### Appendix 9.0



### 9.1 Glossary of Terms

### **CBOC Standardization Study**

A short name for the Feasibility Study for the Development of Standardized Designs for outpatient Clinics

### Critical Path Method

A technique for scheduling construction on the longest path of planned activities required to reach the end of the project. The CPM process determines which activities are "critical" (i.e., on the longest path) and which have "total float" (i.e., can be delayed without making the project longer). This is in contrast to offsite construction wherein concurrent scheduling is used to complete factory work and site work simultaneously.

### Design Build Delivery

Owner contracts with a single entity, the design-build entity, for both design and construction. The design-build entity can be led by an architect or a contractor and can consist of any number of people.

### Innovation program

Funded by the Veterans Affairs Center for Innovation, this program supports project proposals from VA staff on all aspects of VA's mission, demonstrating real-word solutions to real-world challenges. Not all funded innovations are rolled out nationwide. The program follows a progression of design, implement, evaluate. The evaluation stage has three possible outcomes: Go, No Go, Further Development. This study is Phase 1 in a funded innovation projects for VA titled "Develop Standardized Designs for Outpatient Clinics."

#### Integrated Project Delivery

Seeks to incentivize collaborative process and shared risk and reward; the purposes are to reduce errors and omissions, increase productivity in the project, and create value for the owner. Characterized by more open sharing of data and information through building information modeling, true IPD has been most successful in the healthcare industry.

### Integrated Care

Essentially the same as team care. Whatever disciplines are required to care for the patient to produce the intended outcome are consolidated to function collaboratively, as a team to produce that outcome. Integrated care is always multidisciplinary by nature.

### Lean (Concept, Design, Principles)

The process of applying lean concepts to the evaluation of operations and planning/design of a facility to support these operations; the fundamental goal in lean design is to increase value for the served customer, in this case Veterans, by removing waste in the delivery of healthcare through improvements in space design.

### Multi-trade prefabrication

A form of offsite construction by which prefabricated modules, headwalls, mechanical racks, and other components are pre-assembled using standard subcontractors. This is often accomplished at a location near the jobsite.

### Normative Practice (VA)

The normal practice - usually referred to as a standard practice - by VA for CBOC facility development without the standardization improvements outlines in this report. The authors chose the term "normative" so that standard practice would not to be confused with "standardization."

#### Off-site construction

The process of planning, designing, fabrication, transporting, and assembling building elements for rapid site assembly to a greater degree of finish than in traditional piecemeal onsite construction; products used to deliver offsite include componentized, panelized, and modularized elements deployed in the service of structural , enclosure, service and interior partition systems. The SME team determined that permanent modular construction utilizing offsite construction provides potential cost and schedule benefits when compared with VA's normative practice.

### Patient Centered Care - Patient aligned Care Team Model

Patient centered care (PCC) and patient aligned care team (PACT) is an operational approach to healthcare delivery that focuses on a team approach to delivering improved value for the patient by putting them at the center of the experience. The model relies on standardized spatial tactics that increase standardized work.

#### Permanent Modular Construction

A form of offsite construction in which three-dimensional structural volumetric units are manufactured in a factor nearly complete, shipped to site, and assembled to a form a building.

### Project Labor Agreement

PLA is used in many cases by the Federal government as an extra filter on who (general and sub-contractors) can bid their work. It provides a lot of risk mitigation in terms of strike protection, quality, flushes out of predatory bidding, and the like. It may, however, add to the bottom line due to its ability to restrict competition on bid day.

### Standardized Space

There are two levels of Standardized space in clinics: 1) standardized components spaces such as optimized exam rooms or team zone space; and, 2) optimized predetermined relationships between components spaces within a facility to support team healthcare, sometimes referred to as "functional modules," "lean pods," or "clinical models;" essentially, refers to the combines relationship between circulation and two major space types, exam room and clinical workspace, and may include the expanded relationship between circulation and these two major space types and waiting/reception and supports; standardized space can be combined to create a unique clinic or to create a template plan.

#### Standardized Work

Developing predictable, measurable, and repeatable work processes across the system. Standardized work is essential to achieving high predictability of outcomes and work capacity and resource utilization. Ideally, this creates optimum value for patient outcomes, pulling value to patients in search of optimal healthcare delivery.

### Target Value Design

Cost management technique during the project design process that prioritized where budgeted dollars are to be best spent; process reduces cost during the design phase through constant monitoring and stopping the relentless scope creep that occurs during the design phase. Budget is therefore an input to the design process and not an outcome of design; this required true collaboration of owner, design team and build team.

#### Team Care

Teams are forms to produce outcomes. In the case of patient care, the patients' needs for care define the outcome objective. A teaming approach differs significantly from the traditional departmental model of care in which patients are sent from on department to another. In the team care model, the team has the necessary capabilities to produce the outcomes so that the patient is not sent to another care center and handed off to

other care professionals. Team care professionals are together, collaborating, and functioning as a team.

#### Team Zone

A location for the team to work together to produce outcomes for patients; often designed as off-stage in order to eliminate errors caused by interrupting influences; team zones must be located close to the exam rooms they support.

### Template Plan

Template or "prototype" plans may be a combination of standardized spaces or standalone clinic design, the intention of which is to repeat the template in different locations and gain added efficiencies in the design and construction process; the benefit is the predictability of the plan, and the challenge is to accommodate flexibility for a given locale. Health systems tend to build template plans in small, medium, or large models.

#### 3P

Production preparation process (3P) focuses on elimination waste through product and process design. 3P seeks to meet customer requirements by starting with a clean product development slate to rapidly create and test potential product and process design that require the least time, material, and capital resources. This method typically involves a diverse multidisciplinary group of individuals in a multiday creative process to identify several alternative ways to meet the customer's needs using different product or process designs. 3P typically results in projects that are less complex, easier to manufacture (often referred to as "design for manufacturability"), and easier to use and maintain. 3P can also design production processes that eliminate multiple process steps and that utilize homemade, right-sized equipment that meet production needs.

#### Value

Anything that meets the goals of the customer (end user and healthcare providers); what the client is actually paying for the project to produce and install. Waste removes value from the process of healthcare operations, as well design as construction.

#### Waste

Anything in the design and construction process that does not increase value for the customer (end user and healthcare provides), as measured in materials, time, and money, for example.

### 9.2 Abbreviations

A	Amperes
ABA	
AC/HR	
ADAAr	
AFF	
AI	
AIDSAcquired In	
A & MMAcquisition	
AR	
AT	
AT (SP)Acoustical Ceiling Tile	
BC	
BGSF	Building Gross Square Feet
C	
CB	
CBOCCommu	
CCContractor F	
CFM	
CLG	
CMU	
CPCarpet	(without cushion broadloom)
CRS	
СТ	
DG	Design Guide
DGSFDe	partmental Gross Square Feet
DS	Door Switch
ECG	Electrocardiogram
EGDE	
EMSEnviror	
ER	
ETM	
EtO	
EXH	
F	C
FC	Foot-candle
FD	
FIXT	
FLUOR	
GFIGro	
GI	
GWB	
GYN	
HAC	
HVACHeating, Vent	
HP	
HR	
ICU	
K	
KW	Kılowatt

	Pound/Pounds
LLTS	Lockers, Lounges, Toilets & Showers
MCS	Master Construction Specifications
MLG	Marine Logistics Group
	Medical Office Building
	Mounted
	National Fire Protection Association
	Net Square Feet
	Net Square Meters
	f Construction & Facilities Management
	Open Site Drain
	Patient Aligned Care Team
	Archiving and Communication System
DCD	Archiving and Communication System
	Portland Cement Plaster
	Primary Engineering Control
	Program Guide
	Phase
	Plaster
	Preparation
	Pounds per Square Inch Gauge
~	Quarry Tile
	Resilient Base
	Regiment
	Resilient Sheet Flooring
SCSpec	ial Coating (High Build Glazed Coating)
SD	Standard Detail
SF	Square Feet, Square Foot
SOPC	Satellite Outpatient Clinic
SOTG	Special Operations Training Group
	Supply, Processing and Distribution
	Semi-Restricted Corridor
	Stainless Steel (CRS)
	Telecommunications
	Urgent Care
	Uniform Federal Accessibility Standards
	Uninterruptable Power Supply
	Volts
	Department of Veteran Affairs
	Veterans Affairs Central Office
	Veterans Affairs Medical Center
	Furnished Contractor Installed
	Vinyl Composition Tile
	Veterans Health Administration
	Furnished VA Installed
	Watts
	Welded Seamless Flooring
	Watts per Square Foot
	Watts per Square Meter
W/m2	Watts per Square Meter

### References

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### Deviations from VA Criteria 9.4

				PFD	Deviates from VA	Deviates from VA	VA Criteria
Department Name	Functional Area Name	Room Name	Room Code	NSF	Criteria CBOC Chapter dated June 2006?	Draft PACT Criteria dated July 2013?	NSF
OUTPATIENT					dated June 2000:	dated July 2015.	
CLINIC	LOGISTICS						
20001100		Receiving and Shipping Dock	DOCK1	130	No		
		Storage, Medical and General	MMGS1	300	No		
		Receiving and Issue area	MMRP1	100	No		
		Office, Supervisor, Supply Management Section	OFA02	100	No		
		Storage, Equipment	SRE01		No		
		Storage, Medical Gas	SRGC1		No		
		Storage, Bio-hazard Waste	SRHM1		Yes		5
OUTPATIENT CLINIC	PATIENT ALIGNED CARE TEAM (PACT) MODULE						
		FA1: Workstation, Patient Education	CLSC1	30	N/A	No	
		FA2: Shared Medical Appointment Room	CLSC4	400	N/A	No	
		FA4: Conference Room	CRA01		N/A	No	
		FAZ: Exam Koom, Patient Aligned Care	EVDA1	105	NT/A	V	10
		Team (PACT)	EXPA1		N/A	Yes	120
		FA2: Exam Room, Womens Health FA4: Locker Area, Clinical Staff Personal	EXW01	123	N/A	Yes	12
		Property	LR004		N/A	No	
		FA4: Administrative Office	OFA02		N/A	Yes	12
		FA4: Extended Team Area	OFA03	<del>                                     </del>	N/A	No	
		FA2: Consult Room	OFDC2	1	N/A	Yes	12
		FA2: Height/Weight Station	PEHW1		N/A	No	
		FA3: Resuscitation Cart Alcove	RCA01		N/A	No	
		FA3: Alcove, Medication	RCA02		N/A	No	
		FA1: Reception	RECP1		N/A	No	
		FA1: Kiosk, Patient Check-In FA4: Lounge, Clinical Staff	RECP4 SL001	220	N/A N/A	No No	
			SRE01		N/A	No	
		FA3: Storage, Medical Equipment	SKEUI	120	N/A	No	
		FA2: Storage, Shared Medical Appointments	SRSE1	1	N/A	No	
		FA2: Toilet, General Procedure Room	TLTB1	1	N/A	No	
		FA1: Toilet, General	TLTU1		N/A	No	
		FA2: Patient Toilet	TLTU1	60	N/A	No	
		FA2: Toilet, Women's Health Exam Room	TLTU1	60	N/A	No	
		FA4: Toilet, Clinical Staff	TLTU1	60	N/A	No	
		FA2: Procedure Room, General	TRPR1	180	N/A	No	
		FA3: Utility Room, Clean	UCCL1	1	N/A	No	
		FA4: Workroom	WKTM1	-	N/A	No	
		FA1: Waiting, PACT Module	WRC01		N/A	No	
		FA1: Waiting, Family	WRF01	_	N/A	No	
		FA4: Shared Documentation Area	WRTM1		N/A	No	
		FA5: Training Room/Flex	WRTM1	1	N/A	Yes	12
		FA4: Tele-Health Room	WRTM2	1	N/A	Yes	120
		FA4: Tele-Retinal Room	WRTM2	125	N/A	Yes	12
OUTPATIENT CLINIC	AUDIOLOGY AND SPEECH PATHOLOGY						
		AUD: Electrophysiology Room	EXEN1	120	No		
		AUD: Exam/Consult	EXOS1	1	Yes		12
		Office, Therapy Room, Speech Pathologist AUD: Vestibulography Room	EXOS1 EXVE1	_	Yes Yes		130

Department Name	Functional Area Name	Room Name	Room Code	PFD NSF	Deviates from VA Criteria CBOC Chapter dated June 2006?	Deviates from VA Draft PACT Criteria dated July 2013?	VA Criteria NSF
		Hearing Aid Programming/Fitting	HAFR1	125	Yes		120
		AUD: Group Therapy Room	OPMH1	240	No		
		Group Therapy Room, Speech Pathology	OPMH1	225	No		
		AUD: Suite, Audiometric Exam	PEHS4	260	No		
		Office, Reception / Control Clerk	RECP1	140	No		
		Equipment Area	SRSE1	100	No		
		AUD: Patient Toilet	TLTU1	60	No		
		Waiting Area	WRC01	200	No		
OUTPATIENT CLINIC	CANTEEN						
		Vending Machine Area and Seating	BX001		No		
OUTPATIENT		Canteen	FSCD1	1675	No		
CLINIC	HOME-BASED PRIMARY CARE						
		Team Room, Home-Based Primary Care	SL002	240	No		
		Storage Room	SRE01	120	No		
OUTPATIENT CLINIC	CLINIC MANAGEMENT						
		Office, CMO	OFA02	120	No		
		Office, Nurse Manager	OFA02	120	No		
OUTPATIENT CLINIC	DENTAL						
		FA #5: Dental Prosthetic Laboratory	DNPL1	240	No		
		FA #2: Operatory, Multi-Functional	DNTG2	125	Yes		120
		FA #2: X-Ray, Panoramic / Cephalometric	DNXD1	150	Yes		230
		FA #3: Linen Room and Clean SPD Cart	LCCL1	100	Yes		80
		FA #3: Soiled SPD Cart Holding FA #3: Dental Equipment Mechanical	LCSL1	100	Yes		60
		Room	MECH1	120	Yes		80
		FA #4: Consult Room	OFC01	125	Yes		120
		FA #1: Reception	RECP1	120	No		
		FA #3: Storage Room	SRE01	100	Yes		80
		FA #2: Patient Toilet	TLTU1	1	No		
		FA #1: Waiting Area	WRC01	335	No		
		FA #4: Team Collaboration Room, Staff	WRCH1	240	No		
OUTPATIENT CLINIC	ENGINEERING						
		Biomedical Engineering Repair Shop	BMER1	200	No		
OUTPATIENT CLINIC	EYE CLINIC						
		Fitting and Dispensing Room	EYFD1	_	Yes		120
		Exam / Training Room, Low Vision	EYOT2	1	No		
		Exam / Treatment Room	EYOT2		Yes		130
		Visual Fields Room	EYVF1		Yes		130
		Photography Room	EYVS1		Yes		150
		Pre-Testing Room Office, Blind Rehabilitation (VIS1)	EYVS1	125	Yes		130
		Counselor	OFA02		Yes		120
		Office, Supervisor	OFD03		Yes		120
		Waiting Area (Dilation)	WRC01		No		
		Team Room	WRTM1	360	No		

9.10

Department Name	Functional Area Name	Room Name	Room Code	PFD NSF	Deviates from VA Criteria CBOC Chapter dated June 2006?	Deviates from VA Draft PACT Criteria dated July 2013?	VA Criteria NSF
OUTPATIENT CLINIC	LOPPY / COMMON APEAS				·		
CLINIC	LOBBY / COMMON AREAS	Communications Room	COMC1	110	No		l
		Janitors Closet	JANC1		No		
		Employee Wellness	LAC01	1	No		
		Vestibule	LOB02	200			
		Volunteer Alcove	RECP3	<b>!</b>	No		
		Wheelchair Storage	SRLW1	<b>!</b>	Yes		100
		Female Toilet, Multiple	TLTF2	200			100
		Male Toilet, Multiple	TLTM2	200			
OUTPATIENT		Water Fonct, Whitepie	TLTWIZ	200	140		
CLINIC	MENTAL HEALTH						
		Office, Mental Health Provider/Coordinator	OFDC1	125	Yes		120
		Office, Supervisor	OFDC1	1	Yes		120
		Group Therapy Room	OPMH1	300			120
		Biofeedback / Neuropsych	OPMH3		Yes		120
		Storage Room	SRS01	1	No		120
		Team Room, Mental Health	WRTM1	1	No		
OUTPATIENT CLINIC	PATHOLOGY AND LABORATORY MEDICINE (PLM)						
		Shipping & Receiving, Minimal	LBSS1	100	No		
		Blood Specimen Collection Room	LBVP1	80	Yes		120
		Clinical Chemistry	LMCH1	400	No		
		Storage, Refrigerated	SRR02	50	No		
		Storage, Bulk	SRS01	200	No		
		Toilet, Unisex	TLTU1	60	No		
		Toilet, Urine Specimen Collection	TLTU1	60	No		
OUTPATIENT CLINIC	PHARMACY						
		NS: Office, Pharmacist	OFA02	120	No		
		Office, Consultation Room	OFA02	120	No		
		Data Processing Space	OFA03	144	No		
		Prescription Receiving Drug Receiving, Breakdown and	OFA03	80	No		
		Drug Receiving, Breakdown and Verification Area	PHBS1	180	No		
		Prepackaging	PHMP2	1	No		
		Filling and Assembly	PHOD1	-	No		
		Dispensing	PHOD2		No		
		Storage, Active	PHOD2	1	No		
		Storage, Medical Supplies	SRCS1	1	No		
		Storage, Flammable	SRHM1		No		
		Refrigeration	SRR01		No		
		Storage, Controlled Substance / Secured					
		Dispensing	SSS01	_	No		
		Toilet, Staff	TLTU1		No		
		Waiting Area	WRC01	150	No		

Department Name	Functional Area Name	Room Name	Room Code	PFD NSF	Deviates from VA Criteria CBOC Chapter dated June 2006?	Deviates from VA  Draft PACT Criteria dated July 2013?	VA Criteria NSF
OUTPATIENT CLINIC	PHYSICAL MEDICINE AND REHABILITATION (PMR)						
		D : D	DROOT	25			
		Dressing Room	DR001	35			120
		Office	OFA02	+	Yes		120
		Treatment Exercise Area	PTEA1 SRE01	1000	No		
		Storage, Equipment Toilet, Patient	TLTU1	+	No		
OUTPATIENT		Tollet, Patient	TETOT	00	NO		
CLINIC	POLICE AND SECURITY			_	1	1	
		Locker Room	LR001	1	N/A		
		Secure Storage, Safe	SSS01	+	N/A		
		Holding Room	XXYYC	+	No		
		Operations Room	XXYYC	120	No		
OUTPATIENT CLINIC	PROSTHETICS AND SENSORY AIDS						
		Office, Dispensing Prosthetic Clerk	OFA02	125	Yes		120
		Reception and Waiting Area	RECP1	60	No		
		Pros. Appl. Sto.: Mailing Room	SRCS1	80	No		
		Pros. Appl. Sto.: Storage Room	SRCS1	150	No		
OUTPATIENT CLINIC	MULTI-SPECIALTY CARE / ANCILLARY DIAGNOSTIC SERVICES						
		FA1: Workstation, Patient Education	CLSC1	30	N/A	No	
		FA2: Podiatry Exam Room	EXP01	+	N/A	No	
		FA2: Exam Room	EXPA1	125	N/A	Yes	120
		FA2: Cast Room	OPCR1	180	N/A	No	
		FA2: Exercise Room	OPPF5	240	N/A	No	
		FA2: Height/Weight Station	PEHW1	40	N/A	No	
		FA3: Alcove, Medication	RCA02	20	N/A	No	
		FA1: Reception	RECP1	120	N/A	No	
		FA1: Kiosk, Patient Check-In	RECP4	30	N/A	No	
		FA3: Storage, Medical Equipment	SRE01	120	N/A	No	
		FA2: Toilet, Procedure Room	TLTB1	75	N/A	No	
		FA1: Toilet, General	TLTU1	75	N/A	No	
		FA2: Patient Toilet	TLTU1	75	N/A	No	
		FA4: Toilet, Clinical Staff	TLTU1	60	N/A	No	
		FA2: Procedure Room	TRPR1	180	N/A	No	
		FA3: Utility Room, Clean	UCCL1	60	N/A	No	
		FA1: Waiting	WRC01	270	N/A	No	
		FA4: Team Room	WRTM1	240	N/A	No	
		FA2: Tele-Health Room	WRTM2	120	N/A	No	
OUTPATIENT CLINIC	RADIOLOGY						
		Dressing Room	DR001	50	Yes		35
		Office, Staff Radiologist	OFDR1	120	No		
		Shared Office, Tech	OFDR1	120	No		
		R/F Toilet	TLTU1	60	No		
		Ultrasound Toilet	TLTU1	60	No		
		Sub-Waiting Area	WRC01	120	No		
		Waiting Area	WRC01	120	No		
		Diagnostic Bone Densitometer	XDBD1	125	N/A		
		Mammography Room	XDM01	180	Yes		160

Department Name	Functional Area Name	Room Name	Room Code	PFD NSF	Deviates from VA Criteria CBOC Chapter dated June 2006?	Deviates from VA Draft PACT Criteria dated July 2013?	VA Criteria NSF
		General Purpose Radiology Room	XDR01	300	No		
		Radiographic / Fluoroscopic (R/F) Room	XDRF1	320	No		
		Ultrasound Room	XDUS1	180	No		
		Multi-Purpose/Viewing	XVC01	125	Yes		120
OUTPATIENT CLINIC	BUSINESS SERVICES						
		Business Services Office	WRTM1	240	No		



# 9.5 Appendix A

Appendix A summarizes the various facilities visited as part of the VISN Kick-off meetings. These facilities include:

- VISN 21: Sierra Pacific Network
  - Leeward Community Based Outpatient Clinic
  - Ambulatory Care Center at Tripler Army Medical Center
- VISN 23: Midwest Network
  - Maplewood Community Based Outpatient Clinic
- VISN 8: Sunshine Network
  - Primary Care Annex to the James A. Haley Veteran's Hospital



# 9.5.1 Appendix A VISN 21 Site Visit



Figure 9.1 VA Signage at Leeward CBOC

The Leeward Community Based Outpatient Clinic is located in a leased medical office building renovated in 2012. The clinic is located on the 5th floor occupying 7,000 S.F. and costs approximately \$300K to operate annually. There are 21,000 Veterans in Oahu – 7,000 of those Veterans reside in the Ewa Plains. Leeward Clinic has Two-PACT modules, but is considering adding a third. They are currently seeing about 1,300 unique patients out of the 7,000 Veterans that reside on this side of the island.

Tripler Army Medical Center is the main hub with 7 CBOCs and 3 outreach programs with collaborative efforts. Of the 7 CBOCs, 6 are in leased MOBs with the exception of the stand-alone clinic in Guam.

The Ambulatory Care Center is a three-story clinic with 3 primary care modules and 1 specialty care module. This clinic supports an enrolled population of approximately. 23,000; unique users are approximately 9,000. Mental health is isolated and located on the first floor of the clinic. Primary care, women's health, optometry, pathology, and radiology are located on the second floor of the clinic. Dentistry, GI Suite and administrative offices are located on the third floor.

Refer to the following pages for Functional Diagrams and Documentation.



Figure 9.2 Leeward CBOC



Figure 9.3 Leeward CBOC



Figure 9.4 Leeward CBOC Provider Workstation in Exam Room



Figure 9.5 Leeward CBOC Typical Exam Room



Figure 9.7 ACC - Patient Entrance

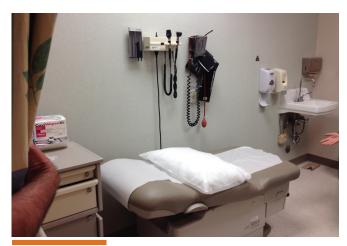


Figure 9.9 ACC Typical Exam Room



Figure 9.6 Leeward CBOC Typical Exam Room



Figure 9.8 ACC - Patient Kiosk



Figure 9.10 ACC Typical Vitals Alcove



# Site Visit Analysis - Leeward Community Based Outpatient Clinic - Functional Diagram

### **LEGEND - FUNCTION**

- STAFF SUPPORT SERVICES
- ADMINISTRATIVE SERVICES
- OUTPATIENT
- DIAGNOSTIC AND TREATMENT
- LOGISTICAL SUPPORT
- PUBLIC SUPPORT SERVICES
- VERTICAL CIRCULATION
- MECH, ELEC, PLUMB, COMM
- CIRCULATION

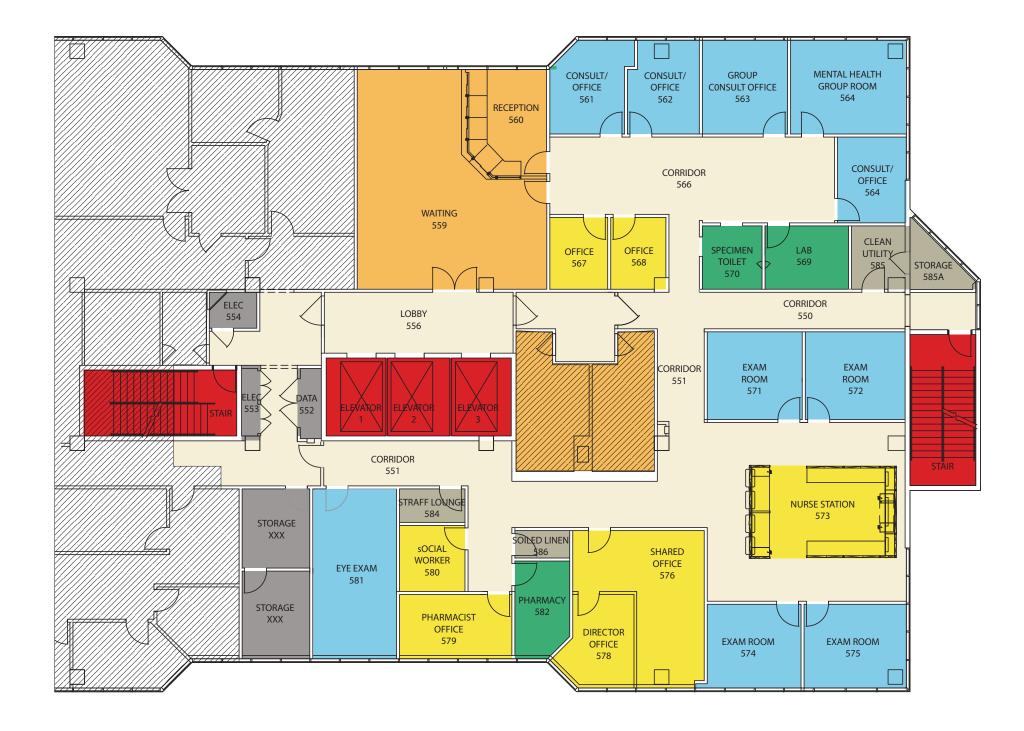
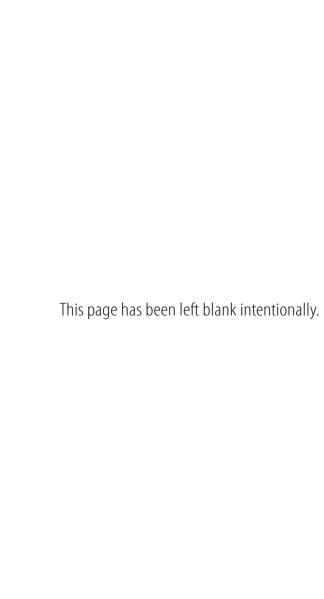


Figure 9.11 Leeward CBOC Functional Diagram



# Site Visit Analysis – Leeward Community Based Outpatient Clinic – Documentation

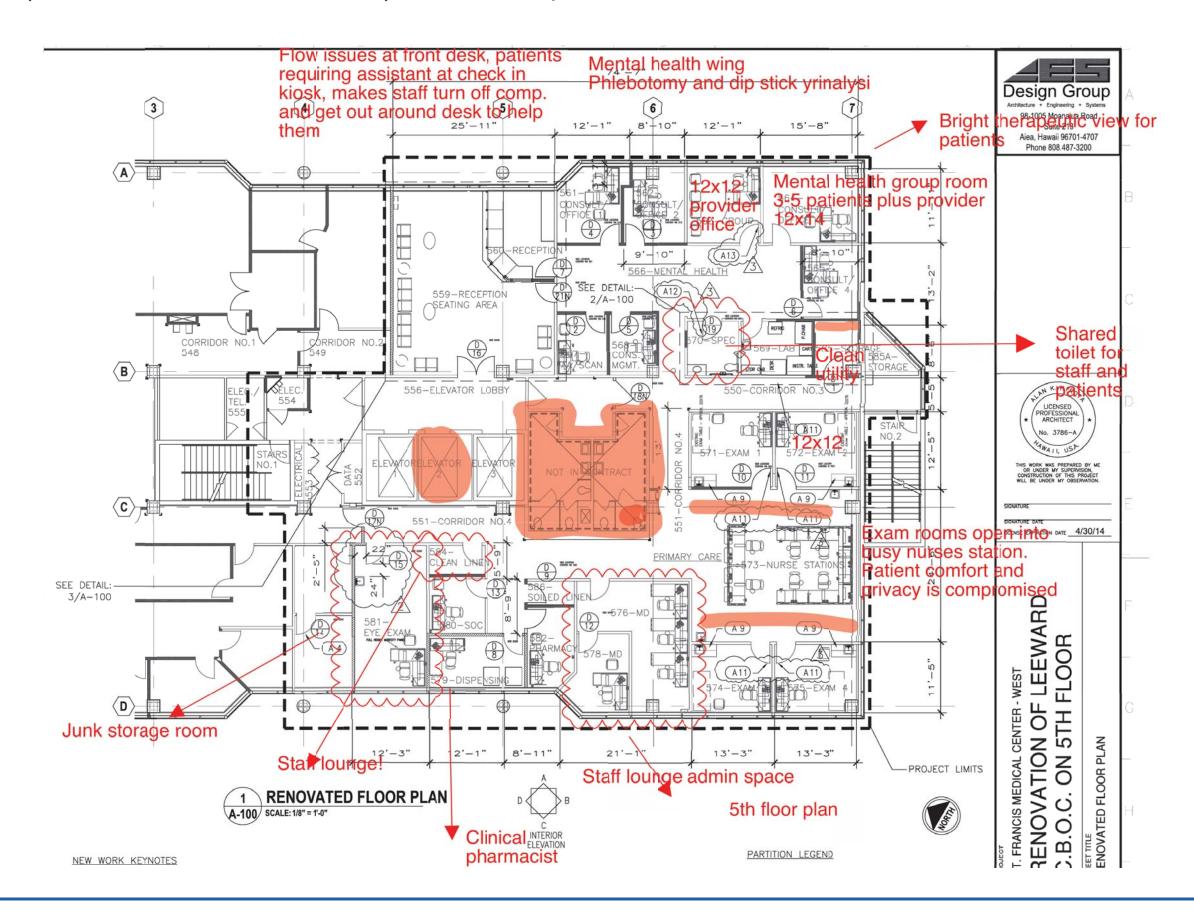


Figure 9.12
Leeward CBOC
Documentation



# Site Visit Analysis – Ambulatory Care Center – Functional Diagram

### First Floor

### **LEGEND - FUNCTION**

- STAFF SUPPORT SERVICES
- ADMINISTRATIVE SERVICES
- OUTPATIENT
- DIAGNOSTIC AND TREATMENT
- LOGISTICAL SUPPORT
- PUBLIC SUPPORT SERVICES
- VERTICAL CIRCULATION
- MECH, ELEC, PLUMB, COMM
- CIRCULATION



**Figure 9.13**Ambulatory Care Center
Functional Diagram



# Site Visit Analysis – Ambulatory Care Center – Documentation

### First Floor

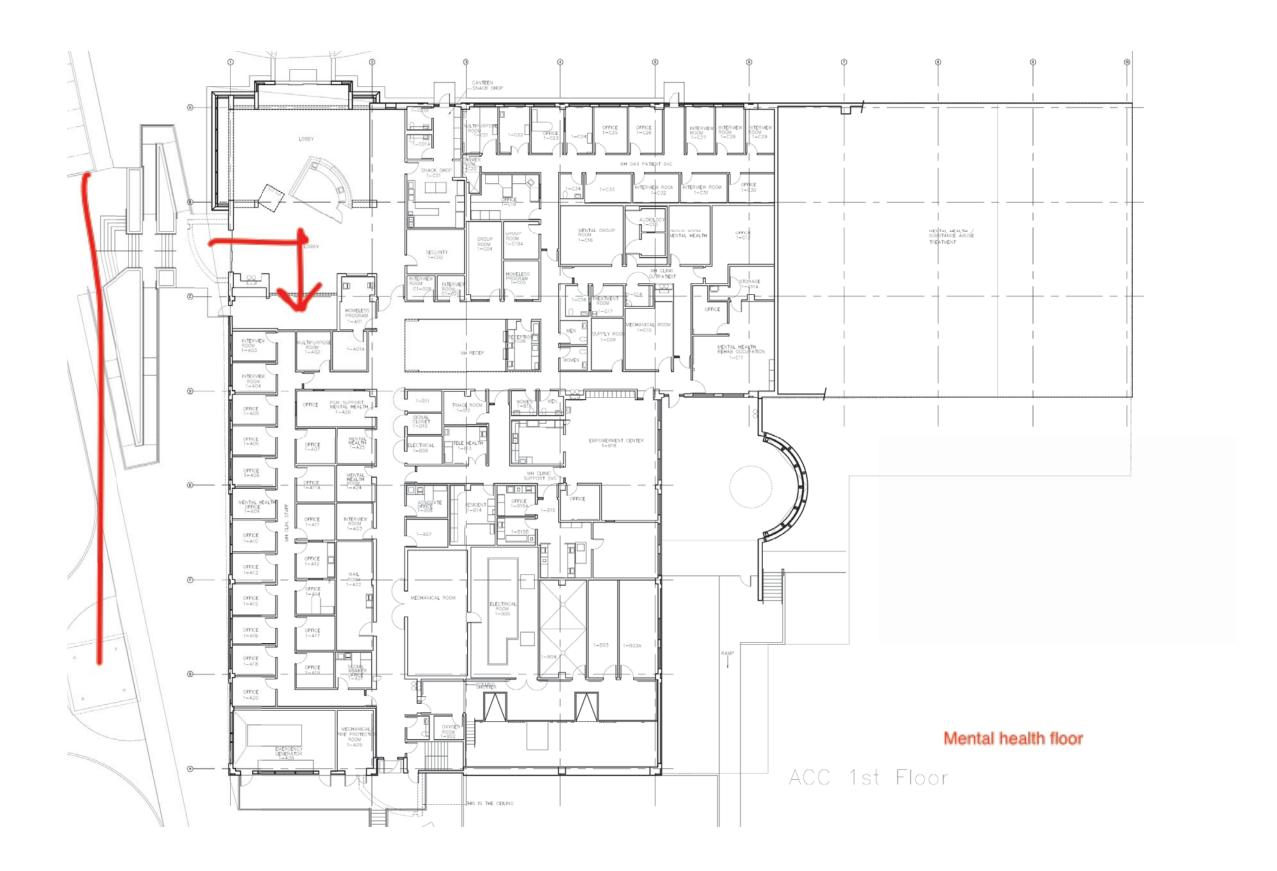


Figure 9.14
Ambulatory Care Center
Documentation



# Site Visit Analysis – Ambulatory Care Center – Functional Diagram

### Second Floor

### **LEGEND - FUNCTION**

- STAFF SUPPORT SERVICES
- ADMINISTRATIVE SERVICES
- OUTPATIENT
- DIAGNOSTIC AND TREATMENT
- LOGISTICAL SUPPORT
- PUBLIC SUPPORT SERVICES
- VERTICAL CIRCULATION
- MECH, ELEC, PLUMB, COMM
- CIRCULATION



**Figure 9.15**Ambulatory Care Center
Functional Diagram



# Site Visit Analysis – Ambulatory Care Center – Documentation

### Second Floor

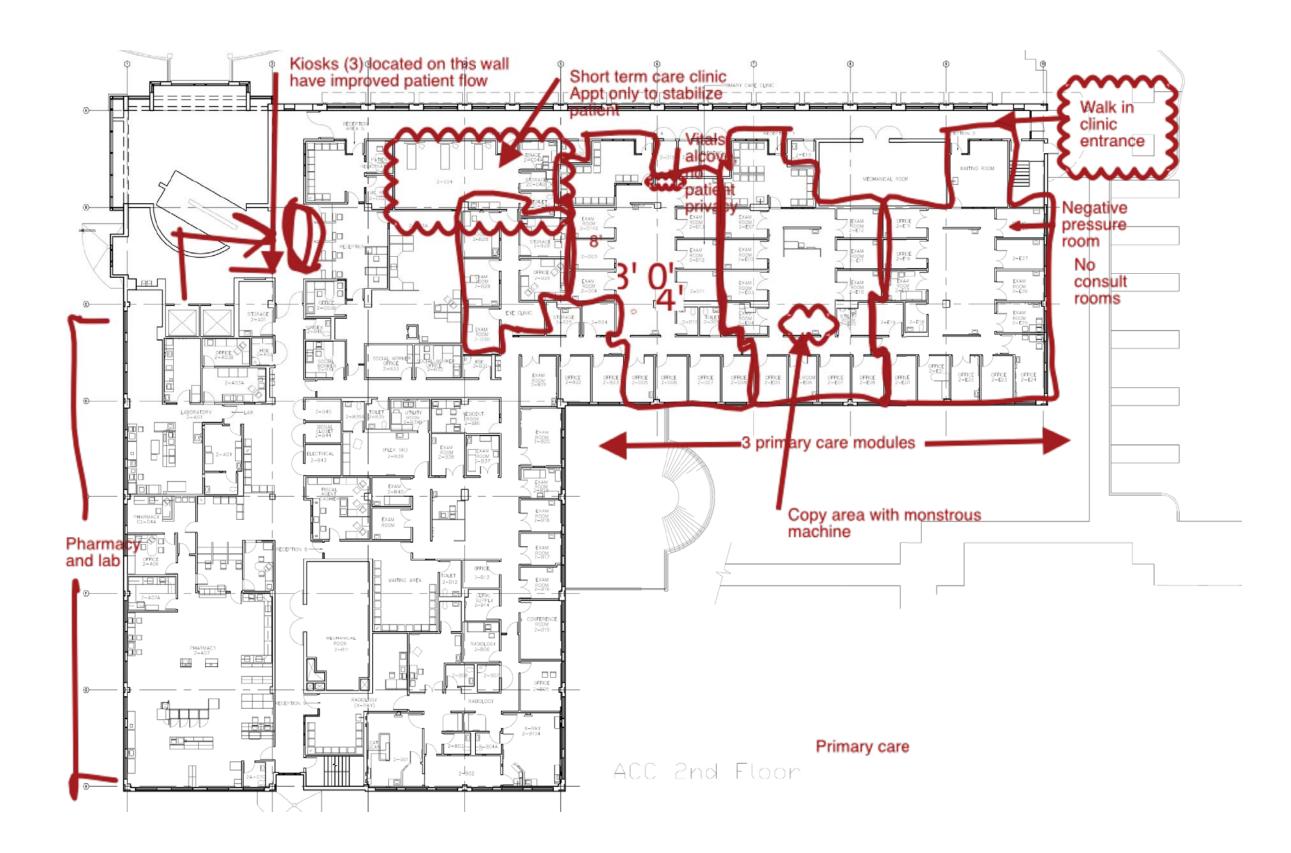
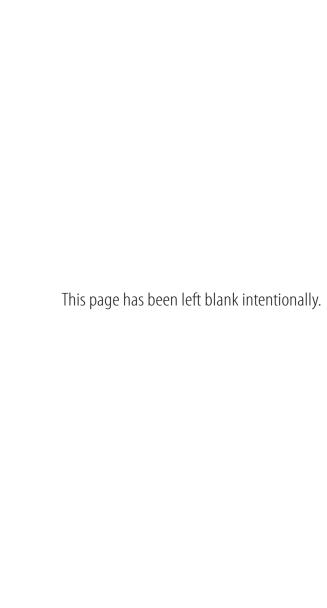


Figure 9.16
Ambulatory Care Center
Documentation



# Site Visit Analysis – Ambulatory Care Center – Functional Diagram

### Third Floor

### **LEGEND - FUNCTION**

- STAFF SUPPORT SERVICES
- ADMINISTRATIVE SERVICES
- OUTPATIENT
- DIAGNOSTIC AND TREATMENT
- LOGISTICAL SUPPORT
- PUBLIC SUPPORT SERVICES
- VERTICAL CIRCULATION
- MECH, ELEC, PLUMB, COMM
- CIRCULATION



**Figure 9.17**Ambulatory Care Center
Functional Diagram

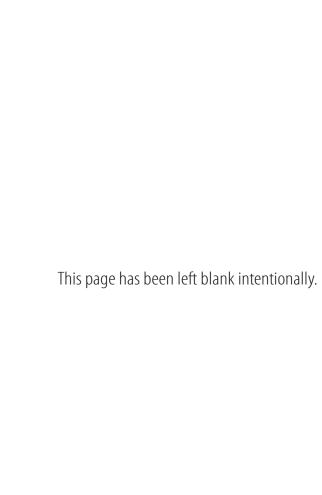


# Site Visit Analysis – Ambulatory Care Center – Documentation

### Third Floor



Figure 9.18
Ambulatory Care Center
Documentation



# 9.5.2 Appendix A VISN 23 Site Visit



**Figure 9.19**Main Clinic Entrance
Maplewood CBOC

The Maplewood Community Based Outpatient Clinic is a single story clinic with approximately 10,000 NUSF. The clinic opened in March 2013 and serves approximately 4,000 patients. The scope of services include Primary Care with mental health, pharmacy, audiology, radiology, vtel and 15 specialties for tele-medicine. Each provider has two exam rooms and shares an office with another provider. Mental health is dispersed throughout the clinic to refrain from the stigma of "mental health" corridor. The women's exam rooms are located near the nurses' station to provide greater visibility. All exam rooms are set up to accommodate bariatric patient population – treatment tables are in the sitting position.

Although this clinic does not employ a PACT model of care clinic layout, there appears to be no issues with patients and staff sharing circulation. This particular clinic prefers provider visibility and they know where their patients are at all times. Supplies are delivered from the Medical Center weekly. A courier service courier picks up lab and linens. The layout of the clinic allows the building to be secured for evening shared medical appointments or group therapy session.

Refer to the following pages for Functional Diagrams and Documentation.



Figure 9.20 Maplewood CBOC Reception Desk



**Figure 9.22** Maplewood CBOC Typical Tele-health Room



Figure 9.24 Maplewood CBOC Waiting Area

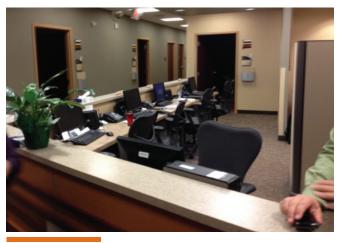


Figure 9.21 Maplewood CBOC Staff Work Area



**Figure 9.23**Maplewood CBOC
Typical Exam Room

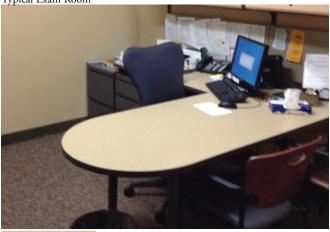


Figure 9.25 Maplewood CBOC Provider Office

## Site Visit Analysis - Maplewood Community Based Outpatient Clinic - Functional Diagram

#### **LEGEND - FUNCTION**

- STAFF SUPPORT SERVICES
- ADMINISTRATIVE SERVICES
- OUTPATIENT
- DIAGNOSTIC AND TREATMENT
- LOGISTICAL SUPPORT
- PUBLIC SUPPORT SERVICES
- VERTICAL CIRCULATION
- MECH, ELEC, PLUMB, COMM
- CIRCULATION



**Figure 9.26**Maplewood CBOC
Functional Diagram



## Site Visit Analysis – Maplewood Community Based Outpatient Clinic – Documentation

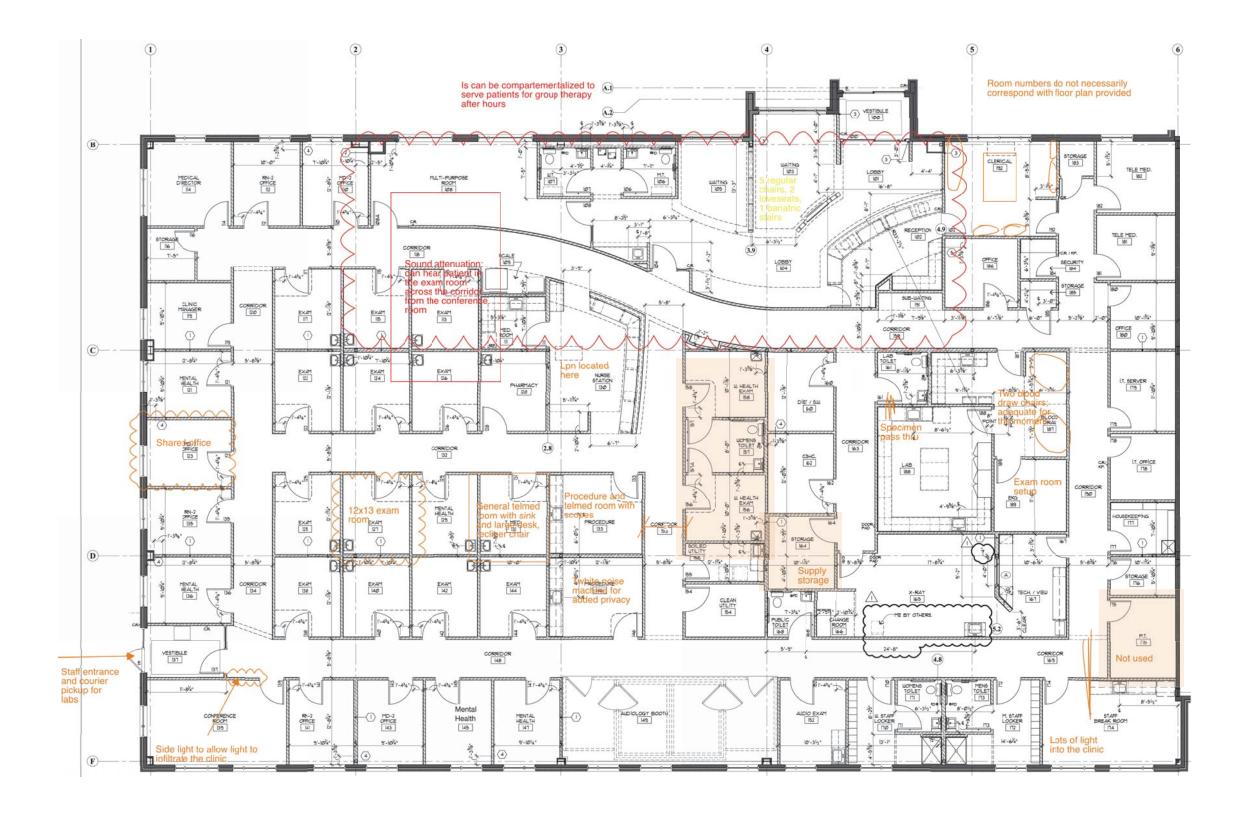
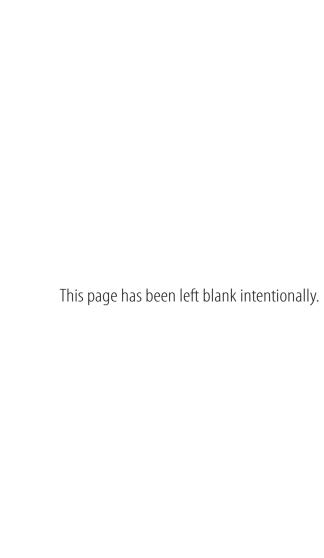


Figure 9.27
Maplewood CBOC
Documentation



# 9.5.3 Appendix A VISN 8 Site Visit



Figure 9.28 Primary Care Annex Aerial View

The Primary Care Annex (PCA) is a new clinic currently under construction. It is located approximately four miles from The James A. Haley Veteran's Hospital. It is a two story clinic with approximately 110,000 SF.

The scope of services include Primary Care clinic with mental health, pharmacy, audiology, physical therapy, radiology, laboratory, phlebotomy, pain clinic and dentistry.

The clinic has 24 teamlets with an integrated mental health service. The women's clinic is located on the lower level with a dedicated entrance for women's Veterans.

The Primary Care Annex is scheduled to be operational in the Spring of 2014.

Refer to the following pages for Functional Diagrams.



**Figure 9.29**Primary Care Annex
Waiting Atrium



Figure 9.31 Primary Care Annex Women's Clinic Entrance



Figure 9.33
Primary Care Annex
PACT Workroom



**Figure 9.30**Primary Care Annex
X-ray Room



Figure 9.32 Primary Care Annex Dental Treatment Room



**Figure 9.34**Primary Care Annex
Waiting overlooking Atrium

### First Floor – Area A

- STAFF SUPPORT SERVICES
- ADMINISTRATIVE SERVICES
- OUTPATIENT
- DIAGNOSTIC AND TREATMENT
- LOGISTICAL SUPPORT
- PUBLIC SUPPORT SERVICES
- VERTICAL CIRCULATION
- MECH, ELEC, PLUMB, COMM
- CIRCULATION

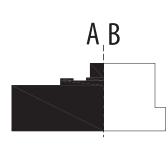
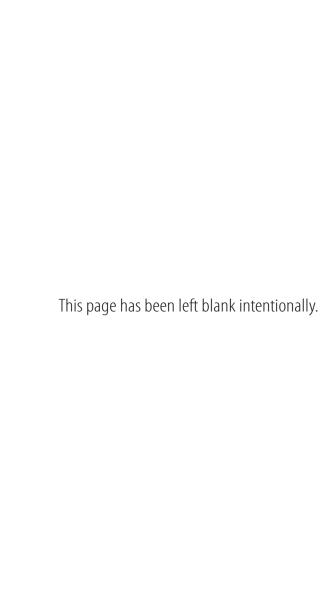


Figure 9.35 Primary Care Annex Functional Diagram





## First Floor – Area B

- STAFF SUPPORT SERVICES
- ADMINISTRATIVE SERVICES
- OUTPATIENT
- DIAGNOSTIC AND TREATMENT
- LOGISTICAL SUPPORT
- PUBLIC SUPPORT SERVICES
- VERTICAL CIRCULATION
- MECH, ELEC, PLUMB, COMM
- CIRCULATION

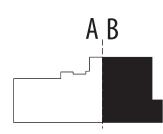


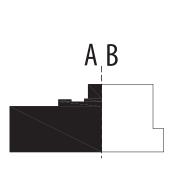
Figure 9.36
Primary Care Annex
Functional Diagram





## Second Floor - Area A

- STAFF SUPPORT SERVICES
- ADMINISTRATIVE SERVICES
- OUTPATIENT
- DIAGNOSTIC AND TREATMENT
- LOGISTICAL SUPPORT
- PUBLIC SUPPORT SERVICES
- VERTICAL CIRCULATION
- MECH, ELEC, PLUMB, COMM
- CIRCULATION



**Figure 9.37**Primary Care Annex
Functional Diagram





## Second Floor - Area B

- STAFF SUPPORT SERVICES
- ADMINISTRATIVE SERVICES
- OUTPATIENT
- DIAGNOSTIC AND TREATMENT
- LOGISTICAL SUPPORT
- PUBLIC SUPPORT SERVICES
- VERTICAL CIRCULATION
- MECH, ELEC, PLUMB, COMM
- CIRCULATION

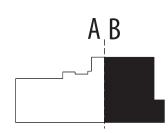


Figure 9.38
Primary Care Annex
Functional Diagram



