



U.S. Department
of Veterans Affairs

Office of Construction &
Facilities Management

Office of Facilities Planning
Facilities Standards Service

DESIGN ALERT

OCTOBER 1, 2018
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Design for Patient Privacy and Women Veterans' Health

ISSUE: Per VHA Directive 1330.01, dated (February 15, 2017- Amended: July 23, 2018) Health Care Services for Women Veterans and direction given by the Principal Executive In Charge Veterans Health Administration, in meeting on April 9, 2018, changes in VA Design Guides and other criteria are necessary to implement environment of care requirements for Women Veterans and to extend these requirements to healthcare environments for all Veterans.

BACKGROUND: VHA Program Offices, VAMCs, project teams, designers and constructors, are obligated to our Nation's Veterans and taxpayers to make the most effective and efficient use of resources and provide safe, secure, quality, and high value environments of care. The Office of Construction & Facilities Management (CFM) supports the Department's mission through development and application of Standards as a basis for disciplined planning, design, and construction (PDC) of VA facilities. PDC Standards are published in the VA Technical Information Library (TIL) (<https://www.cfm.va.gov/TIL>). Pursuant to the revised Directive and VHA Executive direction it is necessary to make adjustments to certain VA PDC standards including PG-18-12 Design Guides (<https://www.cfm.va.gov/til/dGuide.asp>).

DISCUSSION: VA Planning Design and Construction (PDC) Standards are required as a basis of design for all new, renovation and retrofit projects. The following outlines changes to basic Standards for planning and design of the environment of care supporting patient privacy and dignity. Illustrations are provided showing the basic principles of patient privacy and modifications to selected room templates. Many of the elements listed below are confirmations of existing criteria and its importance in meeting the privacy and dignity requirements. The basic principles driving these changes are included so-as-to provide a vehicle for adaptation of standards to existing environments.

REQUIREMENT:

- 1) Design Principles for Patient privacy/dignity.
 - a) Door Hardware/Privacy Locks- Specify all locksets shall allow a safe exit from a locked room without the use of a key or code. Staff members shall be provided key(s) or code(s) to allow operation of locks for emergency access into the room. Ref. VA

PG-18-14 Room Finishes/Door and Hardware Schedule

(<https://www.cfm.va.gov/til/spclRqmts.asp#room>). Locksets are required on the rooms identified for the rooms, but not limited to those, listed below:

- (1) Private toilets, baths, and showers: appropriate, function specific, privacy locks (either electronic or manual) are required at entry door(s), allowing staff members to have key or code access in case of emergency.
 - (2) Examination, procedure, and treatment rooms: appropriate privacy locks (either electronic or manual) are required at entry door(s), allowing staff members to have key or code access in case of emergency.
 - (3) Resident sleeping rooms: appropriate privacy locks (either electronic or manual) are required at entry door(s).
Exception: Inpatient Acute Care and Intensive Care patient rooms do not require privacy locks.
- b) Privacy Curtains / Screens – See attached Room Illustrations. In extenuating conditions, disposable privacy curtains, portable screens, integrated blinds in glass, or other similar systems must be considered. If, due to specific existing conditions or operational requirements, it is not possible to provide a visually private patient changing area, the facility must establish a policy to ensure patient privacy while changing.
- (1) Examination, procedure, and treatment rooms- provide privacy curtains/screens to encompass adequate space for the healthcare provider to perform examination unencumbered by the curtain, and provide a visually private patient changing area that allows the provider to remain in the room.
Exception: Patient care rooms where a patient does not have potential for exposure of breast or genital areas.
 - (2) In-patient rooms (private / semi-private / multi-patient) - Provide privacy curtains to encompass adequate space for healthcare provider to perform bed-side examination unencumbered by the curtain. In these rooms the primary purpose of the bedside curtain is to provide the patient visual privacy from the room entry door during an examination or treatment and secondarily a visually private patient changing area where the provider, or other healthcare staff, can remain in the room.
Exception: Patient rooms in: Mental Health in-patient units, Intensive Care Units, Recovery, Emergency Departments, dedicated airborne infection isolation rooms, and other rooms with infection control concerns. In these rooms, provide disposable privacy curtains, portable screens, integrated blinds in glass, or other similar systems.
 - (3) Resident sleeping rooms (multi-bed sleeping rooms) – provide privacy curtains which encompass adequate space for healthcare provider to perform bed-side examination unencumbered, and provide a visually private patient changing area where the provider or other healthcare staff can remain in the room.
Exception: Private resident sleeping rooms do not require curtains.



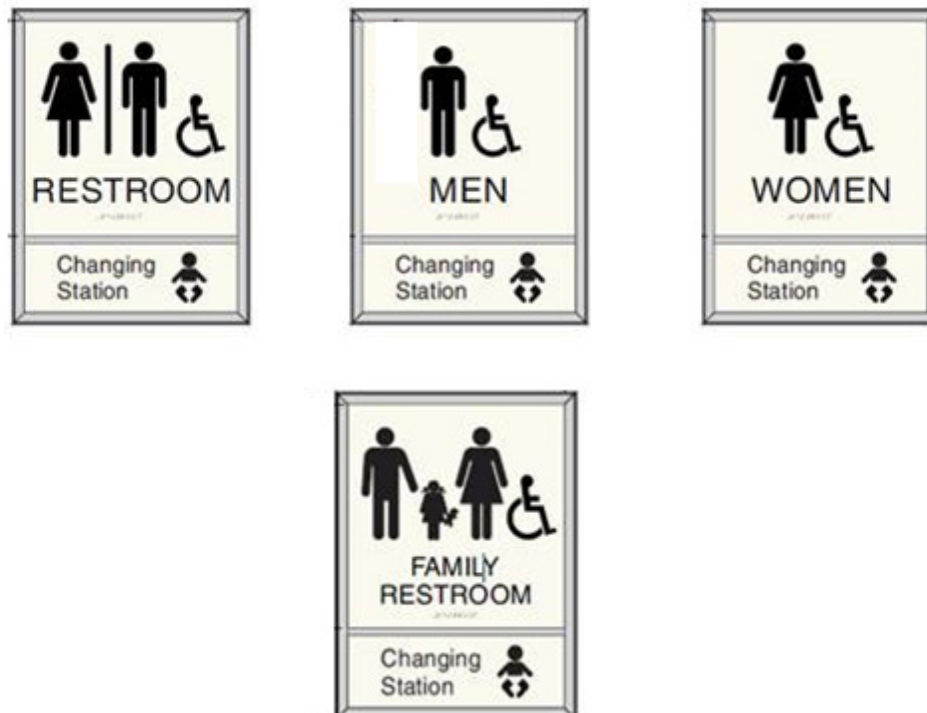
c) Diaper Changing Tables and Signage

(1) Provide diaper changing tables in designated public male, female, unisex, toilet rooms /restrooms, and all family restrooms; Provide a minimum of one per floor in male, female, and unisex restrooms. Toilet rooms/restrooms shall be no more than 300 feet within a building from areas accessible to a patient.

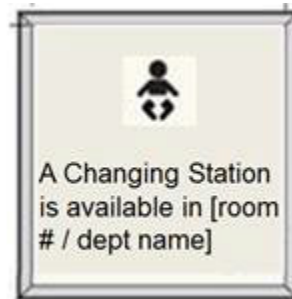
(2) Public toilet rooms/restrooms with changing tables must be appropriately identified in accordance with the VA's Signage and Wayfinding Design Guide <https://www.cfm.va.gov/ti/spclRqmts.asp#SIGN> .

(3) Public toilet rooms/restrooms without diaper changing tables shall have signage directing users to the nearest appropriate facility with a changing table. Signage shall be posted outside near the toilet room/restroom entrance and conspicuously within the toilet room/restroom.

(4) Toilet rooms/restrooms that include Baby Changing Stations must include the appropriate identification on the signage. Below are the VA signage graphics that comply with the VA Signage Design Guide. CFM Signage Manual requirements. Ref. <https://www.cfm.va.gov/ti/spclRqmts.asp#SIGN> , Chapter 09: Interior Signs: pages 9-4-3 and 9-5-29.



(5) For restrooms not designated as containing Diaper Changing Tables, signage shall be placed to indicate to users where the nearest available diaper changing table can be accessed. Signage shall be posted outside the restroom, near the restroom entrance and conspicuously within the restroom.



d) Tampon/Sanitary Napkin Dispensers and Disposal Bins – Applicable to toilet rooms / restrooms listed below:

(1) Public toilet rooms/restrooms- sanitary napkin/tampon dispensers and disposal bins are required in each Women, Unisex, and Family toilet room/restroom.

(2) Non-public toilet rooms/restrooms accessible from or adjacent to examination rooms where pelvic examinations are performed- sanitary napkin/tampon dispensers and disposal bins are required in each restroom.

(3) Multi-stall public female toilet rooms/restrooms- disposal bins are required in each stall.

e) Gender Specific Clothing – Provide space, shelving, or casework required to stock appropriate clothing (e.g. robes, pajamas, patient gowns, etc.) for distribution for use in all healthcare settings.

f) Exam/Treatment/Procedure/Diagnostic Table Orientation - See attached Room Illustrations. All examination, treatment, procedure, and diagnostic tables must be placed in such a way that the genital area is not visible from the doorway. Exception: Treatment/procedure bays (e.g. PACU, ED, Dental) and immovable diagnostic tables in imaging rooms including: Radiology, R & F, Mammography, Ultra-Sound, PET, CT, MRI, Nuclear Medicine, and Surgical Suites are exempted from this requirement.

g) Visual Privacy in Reception/Check-in/Waiting Areas - Veterans must be provided adequate visual privacy at clinic check-in, waiting areas and non-public clinic areas. This privacy includes the following:

(1) Patient names or other PII information shall not be posted in corridors or in public and restricted access clinic areas.

(2) At check-in locations a designated “queue line” is to be marked to provide an identifiable physical distance separation between the person checking in and the



queue. The minimum distance from the front edge of the Check-in/Reception desk to the queue line shall be five (5) feet.

(3) Acoustical partitions are to be installed to provide visual privacy at multi-patient check-in counters.

(4) Provide a private room/area (e.g. private interview room, separate interview station) to accommodate private discussions such as conversations requiring more details than basic patient identification

2) Design Guides and Room Templates will be systematically revised to include the requirements of this Design Alert.

3) All parties in the planning, design, and construction process must comply with these requirements as fundamental in providing optimum environments for Veterans' care and services, in fulfilling VA's mission.

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