

FUNCTIONAL PROGRAM

[REDACTED]

December 17, 2023

New 31-Bed SNF Building Addition

[REDACTED]

PROPERTY LOCATION:

[REDACTED]
[REDACTED]

PREPARED FOR:

[REDACTED]

PREPARED BY:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

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FUNCTIONAL PROGRAM EXECUTIVE SUMMARY

Facility Name:	[facility]
Facility ID #:	22272
OSHPD Building #:	New SNF Addition BLD-06823
OSHPD #:	H220478-37-00
Project Description:	New freestanding 31 Special Treatment Program (STP) Bed - Skilled Nursing Facility (SNF) addition with controlled egress
Code Cycle:	The facility will be built under the 2019 California Building Code.

(b) Functional Program Executive Summary

[Facility] began with and has maintained a very simple strategy: focus on quality and service. Our organization strives to present our residents and families with welcoming facilities that are comfortable and maintained. We ensure that our staff is professional, well trained, and qualified to manage the care of our residents, and we set high standards of quality care and service to all who enter our homes. [Facility] believes in our model that a selective approach to facility acquisition, managed growth over time, reinvestment of capital back into its properties, and retention and training of exceptional managers and caregivers, our organization can lift those facilities to the top of the markets they serve. Holding to our tradition, this is precisely what we intend to do with the pod transition to [facility].

In twenty-two years [facility] has established an excellent reputation in the communities it serves with both the medical community and the State Department of Health. [Facility] has built this reputation through a concerted focus on quality and service. [Facility] has invested significant capital in improvements to its facilities, grounds, furniture, equipment, and information systems. Additionally, [facility] has always been dedicated to serving the community of which it is a part. Thus, [facility] enjoys the best of reputations in the markets it serves while being able to provide quality care for all of its residents.

Project Summary:	New free-standing Skilled Nursing building addition
Project Type:	New Construction
Project Size:	10,613 BG SF (SNF Addition)
# Stories:	1
Proposed # of Beds:	31-Beds
Construction Type:	Type V-A with Full Fire Sprinkler System
Occupancy:	Group I-2 Skilled Nursing Facility with Controlled Egress Special Treatment Program

Project Description: The project will consist of a newly constructed, single story skilled nursing building addition to [facility]. The proposed building will offer an additional 31 STP Beds.

Structural Systems: The structural system is conventional wood stud and conventional wood roof framing with plywood shear walls on a concrete pad with continuous footings.

Mechanical Systems: The mechanical systems will consist mainly of rooftop package units serving individual zones within the buildings. A series of rooftop exhaust fans will service the toilet rooms, kitchen space, and any common areas requiring exhaust / relief air.

Electrical Systems: The primary source utility service will be 1200 Amp 120/208V 3PH, 4W utility power from SDG&E. The essential electrical system will include an onsite diesel engine generator with 6 hour fuel storage.

Plumbing Systems: The plumbing systems will consist of waste, vent, domestic water, water heating, and natural gas distribution.

Fire Protection Systems: This facility will be protected by a full fire sprinkler system in compliance with NFPA 13 and CBC Chapter 9. Smoke detectors will be added throughout the building that will work with the controlled egress system.

FUNCTIONAL PROGRAM DETAIL

(c) 1. Purpose of the Project:

The purpose of this project is to construct a new freestanding 31-Special Treatment Program Bed Skilled Nursing Facility (SNF) building addition with controlled egress. The additions will be part of an existing 56-Bed skilled nursing facility campus consisting of (2) existing freestanding buildings.

This facility will increase the availability of skilled nursing services to the population and expanding areas within [location]. This addition to [facility] will offer 31 additional STP patient beds; filling a need of each of the surrounding Hospitals within the County.

The primary care is licensed as a skilled nursing facility and has a designation of Special Treatment Program on the SNF license. Patient population include those in need of skilled nursing but also have a persistent mental illness. The goal of the SNF with STP designation is to manage/rehab the patient's medical needs while concurrently teaching coping skills that will help the patient manage their persistent mental illness in the community.

- 24-hour nursing care
- Individual and group therapy sessions
- Psychiatric and psychological services
- Physical and occupational therapy
- Daily activities and community outings
- Adult education
- Religious services

(c) 2. Project Components and Scope

Our design philosophy for skilled nursing facilities is to incorporate the use of single loaded corridors, multiple sources of natural light from a courtyard, access to outdoor green space, and direct lines of sight for staff efficiencies to most patient room entry doors.

2.A. Departments Affected:

2.A.1 Nursing Service: Our nursing services within this facility addition will cover the full array of specialized services within a skilled nursing facility. Our skilled nursing care approach is always Interdisciplinary. [Facility] therapy and nursing staff collaborate with physicians to care for individuals who display severe and persistent psychiatric impairment and whose adaptive functioning face moderate to severe impairment. [Facility] begins care by focusing on the medical and psychiatric needs of each resident, and then continues by attending to their personal, social, and spiritual needs.

2.A.2 Dietetic Service: The facility will provide Dietary Services in-house in accordance with code and regulation to meet each residents individualized plan of care. The meals prepared through the facility dietary department and will be provided to the resident in both a "Centralized" and "Decentralized" dining experience based upon the resident preference. The facility will provide a space in which if all residents desire may have a "Centralized" or "Decentralized" dining experience.

Registered dietitians are available to assess patient's dietary needs and restrictions. They are called upon to assess patients that may have a risk of weight loss per recommendation, and physician order.

The Meal Program at our [Facility] Skilled Nursing Facility consists of the following policies:

- A planned menu service utilizing a standardized 5-week cycle menu of non-select regional menu items for breakfast, lunch and dinner meals.
- A daily alternate item for each meal consisting of an alternative entrée, starch, and vegetable.
- An everyday available menu of select resident favorites to choose from in lieu of the daily menu items on the cycle or alternate.

The 5-week cycle menu is balanced with a variety of items and staple dishes, changed in full twice a year, and altered according to facility specific needs and request. The menu is complete with therapeutic and texture diet modifications and supported by standardized recipes and state required nutritional analysis. Residents, dietary supervisors, facility dietitians, and administrators all play a role in each cycle menu creation.

- For residents eating in the facility's new dining room, the trays are delivered and then served by the nursing department as is done in the other three currently existing dining rooms.
- For residents dining in their rooms, insulated food carts are delivered to each section of the building, checked by nursing and then brought into the room for resident dining.

The below methods of food distribution will be utilized within the facility:

1. Residents that require assistance with feeding or Rehabilitation special assistance:
 - Nursing staff is responsible for removing the food tray from the food cart and delivering the tray to the resident's room.
 - Nursing services shall be responsible for feeding the resident while the food is hot.
 - Nursing services shall be responsible for then taking the resident's food tray and returning it to the food cart then to the dietary department.
2. Dining Room Residents, fine dining residents, or organized private diners:
 - Resident trays are served by nursing personnel.
 - Residents who require assistance with eating will be provided with self-help devices or provided help as needed.
 - Residents who are unable to feed themselves shall be fed with attention to safety, comfort, and dignity.
 - Nursing services shall be responsible for then taking the resident's food tray and returning it to the food cart then to the dietary department.
3. Enteral Feeders:
 - Nursing services is responsible for the feeding of tube feeder residents.
 - Formulas are produced commercially and sent to nursing services per physician order.

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- Enteral formulas, as decided upon by the medical director, dietitian, or Director of Nursing Services, are available in small quantities for emergency use.
 - The administration of the enteral feeding is individualized based upon physician order and policy.

At conclusion of dining, food trays and trash are returned to the food delivery carts and delivered back to the Warewashing Space located within the existing facility by nursing for strays and wares to be washed. Once trays are clean, they are to be transferred by mobile tray rack into new dry food storage. Enclosed carts are brought directly into the Warewashing Station within the existing facility by dietary staff for washing of wares and disposal of trash. Food carts are then taken to the Cart and Trash Can Washing Station for cleaning and sanitation and held for the next meal in the Clean Carts Storage within the new facility.

The patient meals shall be prepared and served in a manner that meets the individual needs of each resident through equipment that meets industry standards for meal distribution. The food will be distributed to each patient based upon the individual desire of that patient and the care plan they follow.

Individualized dietary cards shall be used to identify resident's diet as ordered by the physician based upon the resident's plan of care and placed on each resident's food tray. These diet cards assist in setting up and serving the correct food tray/diet to the resident, diet cards are used to identify the residents' specific diet, food preferences, and allergies. The food trays with the appropriate dietary card shall be checked by the dietary manager or supervising employee prior to the food carts being transported to their designated area.

Nursing services shall check the food tray with the appropriate dietary card prior to serving the tray to the resident.

Tray assembly is located within the Kitchen Cart Staging Area within the new facility. The assembly area is located within proximity to the food preparation and distribution areas within the new facility.

Food service carts will be utilized to transport the food from the Kitchen Cart Staging Area in the new facility to the existing facilities.

Distribution of snacks and nourishment:

All nourishments will be prepared in the Dietetic Service area within the new facility according to established food preparation guidelines. Snacks/Nourishments will be provided for residents based on request or as part of appropriate therapeutic diets.

H.S. (evening snack) is offered daily to every resident including texture-modified diets, to provide nourishment during the period from evening meal to breakfast. This is done to ensure optimal nutritional intakes, and to meet the requirements of certain therapeutic diets. The snacks/nourishments will be provided to residents per physicians order as requested by the resident, nurse, or dietitian in accordance with the menu extensions or snack list written by the dietitian and in accordance with the resident plan of care. As the orders for snacks/nourishments are received they will be sent to the Dietetic Service area within the new facility. Individualized snacks will be prepared, labeled, and dated by the Dining & Nutrition Services Department. Bulk snack supplies for H.S. do not need to be individually labeled. Snacks are delivered at the designated times to the nursing stations via dining carts by the dietary staff. The nursing staff will then deliver to the residents via the dining carts the snacks/nourishments. Once the snacks/nourishments have all been delivered the dining carts will be returned to the Warewashing Station within the existing facility. The snacks/nourishments that are refused by the resident will

be discarded. Ice will be provided through dietary services as requested by residents or the public. The service times for between meal snacks are 10am, 2pm, and 9pm. Bedtime snacks are offered routinely to all residents not on diets prohibiting bedtime nourishment. Nourishing snacks are provided to all residents when the time span between the evening meal and breakfast exceeds fourteen (14) hours. Snacks of nourishing quality are those which provide substantive protein and/or nutrients in addition to carbohydrates and calories (i.e., milk and milk drinks, fruit juice, sometimes with cookies or graham crackers).

2.A.3 Activity Programming Service The facility will provide space for resident activities to take place “Centralized” or “Decentralized” based upon the resident preference and plan of care. The facility will provide activities and maintain a schedule that is consistent with the patient’s interests, assessments and plan of care;

- Making choices relating to the patient’s health care that are consistent with his or her plan of care;
- Interacting with persons inside and outside of the facility;
- Participating in social, religious and community activities that do not interfere with other patients in the facility; and
- Making such other choices relating to his or her activities within the facility that are of significance to the patient.

The facility will provide a space so that a patient in the facility may organize and participate in groups formed to interact with other patients in the facility and with the members of their families. The facility shall provide a private area within the facility in which the members of such a group may meet. The Dining tables will remain in place for activity use.

2.A.4 Occupational Therapy Service: The facility shall provide to a patient, according to his or her plan of care, specialized rehabilitative services for mental illness and intellectual disabilities. The rehabilitative services will be provided to a patient in the facility only upon the written order of a physician and in accordance with current regulatory requirements. The preferred area where this will be performed will be at the Existing Rehabilitation Area, at the bedside or in the Activity/Dining area.

2.A.5 Social Work Service: Staff shall be provided with offices and meeting rooms to coordinate all discharges and ancillary services.

2.B. Services and Project Components Required:

2.B.1 Administration Service: Offices for administration, admissions, medical records, and social services are provided.

The facility shall protect and safeguard all clerical files as they relate to staff, residents and facility operations. Clerical files as so stated by code and regulation will be stored in a locked room and protected from fire, water damage, insects, and theft. All clerical files will be maintained in the Department in which they apply, and will be maintained by such Department. Office space will be provided in the designated Department(s) to accommodate and maintain those clerical files in which it has oversight in accordance with current code and regulations.

2.B.2 Storage: The facility will provide storage space to meet the needs of the resident throughout the facility as they pertain to the individualized plans of care for each resident. For example, but not limited to:

- Storage areas to enhance environmental cleanliness

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- Storage area for personal belongings
 - Storage space for the resident's medical record
 - Storage space for the resident's medications
 - Storage space for the resident's activities and religious articles
 - Storage space for care supplies and equipment
 - Storage space for linens, both soiled and clean
 - Storage space for dry food, refrigerated and frozen food

2.B.3 Housekeeping Service: Housekeeping services shall be provided 7 days / week for each patient room and all common areas.

2.B.4 Laundry Service: The facility uses an in-house laundry service that handles the clean and soiled linen of the facility in order to ensure the best possible care is being provided to our residents. At a minimum, the "Soiled Linen Rooms" in the New SNF Addition will hold soiled linens separate from the clean linen rooms. A hand wash sink in accordance with current codes and regulations and a clean storage area.

(c) 3. Indirect Support Functions

Staff work areas will be designed and located throughout the facility to best meet the needs of the residents and staff. Staff areas will be equipped with the appropriate furniture, lighting and storage space for the staff member to perform his or her job duties in accordance with established codes and regulations. Staff work areas will be designed and designated in the facility for the safety and well-being of all persons within the facility. In accordance with codes and regulations staff work areas will accommodate the needs of such services but not be limited to such work areas for: Nursing Services; Dietetic Service Area; Administration; Medication Distribution; Medical Supplies; Rehabilitation Services; Medical Record Services; Maintenance Services; Laundry Facility and other services per code and regulation.

Our facility provides adequate nursing and operational staffing to meet the care needs and services of our resident population.

Our facility maintains adequate staffing on each shift (AM, PM, and NOC) to ensure that our resident's needs and services exceed their expectations.

Licensed registered nursing and licensed nursing staff are available to provide and monitor the delivery of resident care services. Certified Nursing Assistants are available on each shift to provide the needed care and services of each resident as outlined on the resident's comprehensive care plan. Restorative Nursing Assistants are utilized as needed daily to address the needs as outlined in the care plan of the resident.

Staffing is reviewed daily by the IDT team to verify that the staffing provided within the facility is meeting the acuity needs of our resident population so that the physicians, families, and resident's needs are expectations regarding quality care are exceeded.

(c) 4. Operational Requirements

4.A. Projected Operational Use: The distribution of the various departments is to be in response to the respective operational requirements. Wayfinding to specific nursing units is to be clear and simple.

4.B. Relevant Operational Circulation Patterns:

The building is connected by double loaded corridors that serve the general public in the northern part of the building where the dining area and public restrooms are located, staff and patients.

Patient rooms are intended to be located on the southern part of the building to allow for more privacy.

Sidewalks connect the existing and new buildings for additional therapy, dining and other support areas.

4.B.1 Circulation Patterns for Patients, Visitors and Staff:

The primary entrance of the facility is located in the northern are of the building with a covered Porte Cochere, with secondary entrance(s) directly at the Patient Wings. Patients and visitors have access throughtout the Public Corridors.

4.B.2 Circulation Patterns for Equipment and Clean/Soiled Materials:

There is (1) clean and (1) soiled linen area within each nursing unit. A central Laundry is provided in Existing Building 1, connected to the patient wings by corridors within Building 1 and sidewalks connecting Existing Building 2 and the New Addition.

- 4.C. Departmental Operational Relationships and Required Adjacencies:** The Patient Rooms are inteded to be located on the exterior, southern part of the building, with shared services in the northern area; including Dining/Activity, Therapy, and other support areas. Sidewalks connect the existing and new buildings for additional Dining/Activity, Therapy, and other support areas.

(c) 5. Environment of Care Requirements:

5.A. Delivery of Care Model: The facility addition at [Facility] is intended to provide 31 special treatment program patient beds. The program elements of [Facility] will be post-acute rehabilitation. This facility will utilize a patient focused care model. The goal is to provide care to patients in an inclusive way that builds a strong relationship between the patient and the care giver. By discussing the goals, values, and opinions of a patient, not only is a strong relationship formed, but care givers can better understand the progress an individual feels.

The facility conversion at [Facility] is intended to provide 40 special treatment program patient beds and continues to operate as a skilled nursing facility with total capacity for 120. The facility will continue to focus on meeting the patients' care needs through individualized, patient plans of care. The skilled nursing care approach is always Interdisciplinary. [Facility] therapy and nursing staff collaborate with physicians to care for individuals who display severe and persistent psychiatric impairment and whose adaptive functioning face moderate to severe impairment. [Facility] begins care by focusing on the medical and psychiatric needs of each resident, and then continues by attending to their personal, social and spiritual needs. In addition, provide health education and training to the community, and increase the overall healthcare provided to residents through the promotion of coordinated care with existing healthcare providers.

5.B. Patients, Visitors, Physicians and Staff Accommodation and Flow: In general, visitors will check in to the existing administrative building/receptionist. Staff will assist visitor/family/vendor(s) to their desired locations as to protect the privacy of the residents. The lobby/ waiting area and restrooms for public access are located away from resident rooms to promote resident privacy.

The existing facility is designed in such a way that the flow of visitor/family/vendor movement throughout the facility is to be independent from patient movement within the facility to promote patient privacy as much as possible.

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- 5.B.1 Care and Treatment:** The facility for skilled nursing shall provide to a patient in the facility, according to his or her plan of care, specialized rehabilitative services for mental illness and intellectual disabilities. The rehabilitative services will be provided to a patient in the facility only upon the written order of a physician and in accordance with current regulatory requirements.

5.C. Building Infrastructure and Systems Design Criteria:

- 5.C.1 Structural System:** The structural system is conventional wood stud walls and conventional wood roof framing for the horizontal structure with plywood shear walls on a concrete pad with continuous footings.

Cardboard wood shims will used for furring between wood studs and gypsum board.

- 5.C.2 Mechanical System:** The mechanical systems will consist of several rooftop packaged units serving individual zones within the buildings. The common areas of the building will be zoned in a logical manner based on their occupancies. The units will meet or exceed minimum requirements for outside air supply and filtration. A series of exhaust fans will service the toilet rooms and any common areas requiring exhaust. Equipment will be designed to comply with the 2019 California Mechanical Code, CMC Table 4A requirements.

Rooftop package units serving the corridors that pass through fire and/or smoke walls and do not serve other spaces other than the corridor will have fire dampers at the rated corridor ceiling. Combination fire / smoke dampers will not be required at these locations. Duct work serving the corridors shall be constructed of steel not less than 0.019 inch (0.48 mm) in thickness.

- 5.C.3 Electrical System:** The primary source utility service will be 1200 Amp 120/208V 3PH, 4W utility power from SDG&E. The essential electrical system will include an onsite diesel engine generator with 128 hour fuel storage.

The lighting system will be designed to provide IESNA RP-29-06 recommended footcandle levels in all areas, including:

- Dual level 30/60 footcandles for activity and dining rooms.
- Dual level 30/60 footcandles at patient beds.
- 50 footcandles at nurse stations with 100 footcandles on desk.
- 50 footcandles for toilets, waiting areas, soiled linens and clean linens.
- 100 footcandle task lighting for record and pharmacy.
- 1 footcandle for exit lighting to the public way.

- 5.C.4 Plumbing System:** The plumbing systems will consist of waste, vent, domestic water, water heating, and natural gas distribution.

- 5.C.5 Fire Protection Systems:** This facility will be protected by a full fire sprinkler system in compliance with NFPA 13 and CBC Chapter 9.

- 5.D. Physical Environment:** The following elements are to guide design decisions:

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- 5.D.1 Light and Views:** All patient rooms are provided with exterior windows allowing natural light and views. An open air courtyard is provided between new building and existing building 2 to allow access to outdoors.
- 5.D.2 Wayfinding:** Signage throughout the building(s) will provide names of units, rooms, areas directions and emergency egress, to ensure patients and visitors can navigate through the facility easily.
- 5.D.3 Control of Environment:** The facility will provide access points for the control of the resident environment. At the president's request, and per facility policy and procedure, a resident may request to have the air, heat, lighting or any other change to their environment at any time. If the resident request is in accordance with the current regulations established for skilled nursing facilities per federal and local guidelines a change will be made. The facility will operate in accordance with federal and state regulations for skilled nursing facilities as they apply to —environmental control areas within the facility.
- 5.D.4 Privacy and Confidentiality:** The privacy and confidentiality of every patient is being protected by all employees of the facility. The current facility is designed so that visitor/family/vendor access is monitored by staff in that all visitor/family/vendor's must sign in upon entering, and wear a designated badge indicating that they are not a facility resident. Staff will assist visitor/family /vendir(s) to their desired locations as to protect the privacy of the residents. The lobby/waiting area and restrooms for public access are located away from the resident rooms to promote resident privacy. Electronic Medical Record system has security measures in place to prevent unauthorized access.
- 5.D.5 Security:** Facility staff will be located at control points to enforce limited access to restricted and semi-restricted areas and corridors for infection control protocols and for family/patient/staff safety. A controlled egress alarm will be utilized for those doors not noted as main entrances in and out of the facility for the safety of the residents.
- 5.D.6 Architectural Details:** Architectural finishes / material palette shall promote a healthy, natural, calming healing environment for the patients.
- Patient bedroom and bathroom fixtures are selected based on safety and risk planning (showers, toilets, grab bars, sprinklers, hardware, wardrobes, hinges, pulls, faucets, lights etc.)
- 5.D.7 Cultural Responsiveness:** The economic demographic distribution is relatively homogeneous, and the ethnic backgrounds are quite diverse with no significant representation from any particular group.
- Patient rooms will accommodate all residents admitted to the facility regardless of race, color, creed, national origin, age, sex, religion, handicap, ancestry, marital or veteran status, and/or payment source.
- 5.D.8 Views of, and Access to, Nature:** The skilled nursing facility is located on the North edge of the city limits, North of highway 8 and East of the Highway 67.

(c) 6. Architectural Space and Equipment Requirements:

6.A. Space List – See Exhibit A

6.B.(1) Department Gross Square Footage (DGSF) – See Exhibit A

6.B.(2) Building Gross Square Footage (BGSF) – See Exhibit A

(c) 7. Technology Requirements:

All admitting, accessing, recording and filing of patient medical records shall be supported by an Electronic Medical Record System (EMR). The nursing service units will have wireless nurse call systems with hard-wired master stations at each nurses' station.

(c) 8. Short- and Long-Term Planning Considerations:

The number of beds added is limited to the constraints on the site and costs of construction. The needs in [location] far outweigh the additional 31-beds for this project.

(c) 9. Patient Safety Risk Assessment

[Facility] is an 87-bed facility, separated into three patient care buildings connected by walkways. Building 3 is a new freestanding 31 Bed Special Treatment Program Skilled Nursing Facility addition. All rooms are centrally located around a nursing station for consistent visibility and supervision of patients to provide Behavioral care.

9.A Behavioral and Mental Health Risk Assessment - [Facility] Special Treatment Program will continue to serve STP and Behavioral patients. There will be no Outpatients treated at this facility.

a. Evaluation of new STP Inpatients:

i. Inherent risks with this population – The client population within our Behavioral facility is admitted through an approval process, in which patient referrals from the neighboring Counties are independently examined by each applicable department and then approved upon as a group if appropriate. These clients are mainly those with chronic psychiatric impairment and secondary medical concerns that are looking to rehabilitate. They are admitted into the hospital prior to long term placement and are expected to be at baseline behavior on admission to our facility. Residents are at a low risk of acute behaviors, such as self- injury, aggression, or AWOL, once admitted and reinforced through the course of their treatments. If residents do begin to escalate, they are either de-escalated onsite or transferred to an acute care facility for proper supervision.

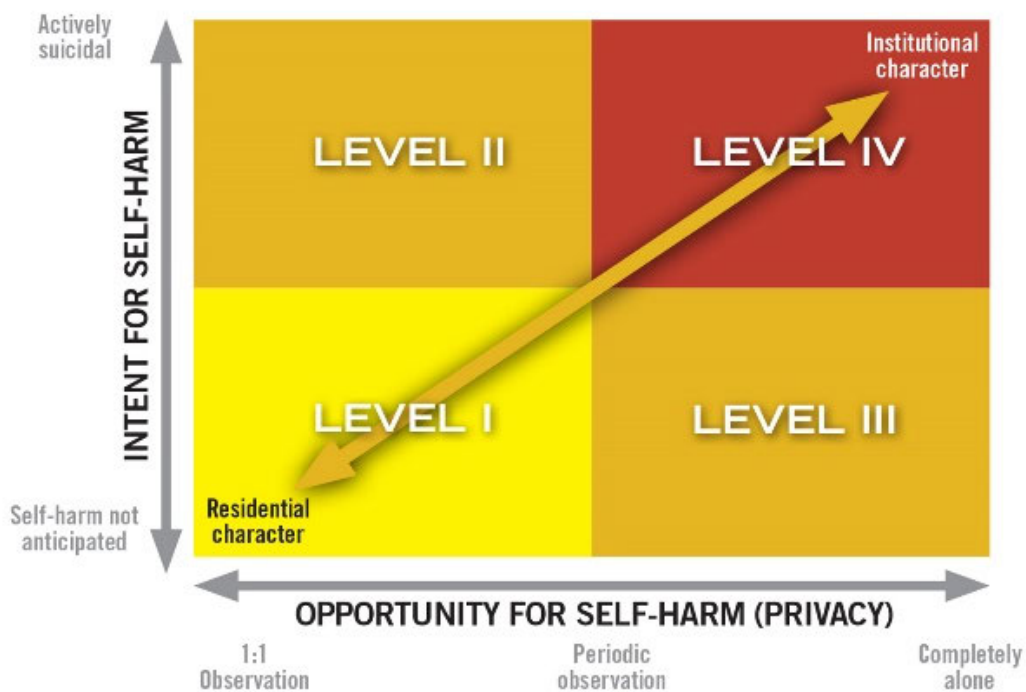
ii. Model of Care – [Facility] STP facilities follow a psychosocial rehabilitation model with the intent of rehabilitating the “whole” person. The model of care utilized for this patient group is conducted by trained nursing and other clinical staff including psychiatrists, nurses, and other therapists. It is crucial that the physical plant have indoor and outdoor spaces, areas for

treatment, and classroom space. With this comprehensive approach to recovery, the goal is for clients to stabilize and rehabilitate enough to transition into the community and lower levels of care.

iii. Operational Considerations – The facility follows compliance guidelines set forth by CDPH for staffing, with 24-hour nursing staff, appropriate levels of mental health staff, and other interdisciplinary staff as required. This ensures that residents are supervised at all times, both in semi- private and public areas. All residents are medically managed as well by their primary care physician, our psychiatrist, and other necessary disciplines throughout the duration of their care within the facility.

iv. Built Environment Solutions – The campus already has great common area indoor and outdoor spaces for Activities, Counseling, Life Skills teaching, etc. The outdoor space will be enhanced with additional locked secure gated areas to be used for gathering, counseling, canteen activity, etc. Smoking spaces will also be setup within the new outdoor space.

9.B. Behavioral and Mental Health Elements (Psychiatric Patient Injury and Suicide Prevention)



Graphic adapted from the *Behavioral Health Design Guide* by James M. Hunt and David M. Sine.

a. Areas that will serve patients at risk of injury and corresponding risk level:

Space Type	Risk Level
Patient Toilet / Shower Rooms	III
Patient Rooms	III

Activity Rooms	II
Group Therapy Rooms	II
Laundry Rooms	0
Therapy Offices	I
Corridors	II
Dining Rooms	II
Courtyards	III
Offices and Staff-only Spaces	I

b. The areas above will be designated with numerical risk levels I & III – level I being the lowest risk and level III being the highest risk where patients are present. Spaces where patients would not be present are not given a “Level” (Level 0) and considered low risk. While there are 2 risk levels identified in the above chart where patients are present (Level 2 & 3), the team identified two levels of moderate risk depending on the level of staff supervision and number of patients in the space at one time that required design details to mitigate risk.

c. Using the Hunt/Sine Safety Risk Assessment, most of this facility would most closely represent Level III, a more residential- type facility where residents have low intent for harm but are allotted some opportunity with minimal supervision if able to do so safely. This is consistent with the mission of the Special Treatment Program to build independence skills with the goal of rehabilitating to lower levels of care, while still maintaining a safe environment for those who have a history of risky or dangerous behavior when escalated. Some areas more closely represent Level I, where staff observation is present, however a 1:1 staffing level is not necessary. Levels II and IV are never present at this facility. The patient population is not generally subject to self-harm or associated with harm to others.

9.C. Behavioral and Mental Health Response:

a. The risk levels are assigned to each space in the facility to direct the design and construction to address the spaces with the correct design features to mitigate the risk.

b. These features are depicted on the schematic design drawings (Security Provisions Plans) with the risk level legend. See Figure 1.1.

c. In addition to the details described in the risk level legend, the following mitigating features are also implemented throughout the facility.

i. Mild dementia and memory care issues result in elopement concerns associated with inadvertently “wandering off” as opposed to intentional “escape.” The use of controlled egress doors and gates, magnetic locks and key pads provide moderate containment of designated patient areas and limit access to non-patient areas. Door locking will be compliant with the California Building Code.

ii. Safe Furnishings – In addition to consistent nursing engagement, the facility also utilizes side rails, fall mattresses and beds that lower to ground level, along with all bedrooms and restrooms being equipped with a call light system. All facility office spaces and non-patient rooms (treatment rooms, exam rooms, etc.) are locked, unless appropriate staff members are present and remain in the room. This also includes dining, which is always monitored by nursing staff. As a baseline, residents are also on one-hour checks for behaviors and safety, with the possibility of more frequent checks if needed.

EXHIBIT A

EXHIBIT A
(c) 6. Architectural Space and Equipment Requirements
6.A. Space List

Skilled Nursing Service

Standard Semi- Private Patient Room
Accessible 2-Bed Room
(15) Total
Room Numbers: A1,A2,A3,A5,A6,A7,A10,A11,A12,A13,A14,A15,A16
Gross Floor Area : 237 sf
Bed: 42" x 80" (2) Clearance: 48" Clear at foot of bed(s), 36" clear at sides of bed(s)
Door: 48"W x 84"H door without closer
Built-in: Wardrobe (2)
Furnishings: Nightstand (2), Overbed Table (2), Guest Arm Chair (2)
Exterior Exposure: 30 sf fixed window (24" sill)
Finishes: Sheet vinyl plank flooring with rubber base, painted gypsum board walls and ceilings
Electrical: Normal, Critical Branch
Lighting: General: 10-20 foot-candles Task: 30-50 foot-candles
Heating: 70°F (+/- 2°) Cooling: 73°F (+/- 2°)
Ventilation: 6 Air Changes/Hr total with 2 Air changes/hr Outside Air
Accessible Toilet Room
(15) Total
Room Numbers: A1T, A2T, A3T, AST, A6T, A7T, A10T, A11T, A12T, A13T, A14T, A15T, A16T
Gross Floor Area : 54 sf
Door: 36"W x 84"H door without closer
Built-in: Solid surface counter
Fixtures: Water Closet (1), Lavatory (1)
Exterior Exposure: 6 sf fixed window (72" sill)
Finishes: Sheet vinyl flooring with self-coved base, painted gypsum board walls and ceilings
Lighting: General: 10-20 foot-candles Task: 30-50 foot-candles
Ventilation: 100% Exhaust – 10 Air Changes/Hr

Standard Semi- Private Patient Room
Non-Accessible 2-Bed Room
(2) Total
Room Numbers: A8,A9
Gross Floor Area : 231 sf
Bed: 42" x 80" (2) Clearance: 48" Clear at foot of bed(s), 36" clear at sides of bed(s)
Door: 48"W x 84"H door without closer
Built-in: Wardrobe (2)
Furnishings: Nightstand (2), Overbed Table (2), Guest Arm Chair (2)
Exterior Exposure: 30 sf fixed window (24" sill)
Finishes: Sheet vinyl plank flooring with rubber base, painted gypsum board walls and ceilings

EXHIBIT A
(c) 6. Architectural Space and Equipment Requirements
6.A. Space List

Electrical: Normal, Critical Branch
Lighting: General: 10-20 foot-candles Task: 30-50 foot-candles
Heating: 70°F (+/- 2°) Cooling: 73°F (+/- 2°)
Ventilation: 6 Air Changes/Hr total with 2 Air changes/hr Outside Air
Accessible Toilet Room
(2) Total
Room Numbers: A8T, A9T
Gross Floor Area : 54 sf
Door: 36"W x 84"H door without closer
Built-in: Solid surface counter
Fixtures: Water Closet (1), Lavatory (1)
Exterior Exposure: 6 sf fixed window (72" sill)
Finishes: Sheet vinyl flooring with self-coved base, painted gypsum board walls and ceilings
Lighting: General: 10-20 foot-candles Task: 30-50 foot-candles
Ventilation: 100% Exhaust – 10 Air Changes/Hr
Special Purpose Patient Room
Accessible 1-Bed Room
(1) Total
Room Numbers: A4
Gross Floor Area : 159 sf
Bed: 42" x 80" (1) Clearance: 48" Clear at foot of bed, 36" clear at sides of bed
Door: 48"W x 84"H door without closer
Built-in: Wardrobe
Furnishings: Nightstand (1), Overbed Table (1), Guest Arm Chair (1)
Exterior Exposure: 24 sf fixed window (24" sill)
Finishes: Sheet vinyl plank flooring with rubber base, painted gypsum board walls and ceilings
Electrical: Normal, Critical Branch
Lighting: General: 10-20 foot-candles Task: 30-50 foot-candles
Heating: 70°F (+/- 2°) Cooling: 73°F (+/- 2°)
Ventilation: 6 Air Changes/Hr total with 2 Air changes/hr Outside Air
Accessible Toilet Room
(1) Total
Room Numbers: A4T
Gross Floor Area : 53 sf
Door: 36"W x 84"H door without closer
Built-in: Solid surface counter
Fixtures: Water Closet (1), Lavatory (1)
Exterior Exposure: 6 sf fixed window (72" sill)

EXHIBIT A
(c) 6. Architectural Space and Equipment Requirements
6.A. Space List

Finishes: Sheet vinyl flooring with self-coved base, painted gypsum board walls and ceilings
Lighting: General: 10-20 foot-candles Task: 30-50 foot-candles
Ventilation: 100% Exhaust – 10 Air Changes/Hr

Lobby
(1) Total
Room Number: 100
Gross Floor Area : 168 sf
Built-in: N/A
Fixtures: N/A
Lighting: Recessed can light fixtures
Equipment: Hi & low drinking fountain, TV
Furnishings: N/A
Finishes: Sheet vinyl plank flooring with rubber base, painted gypsum board walls and ceilings

Corridor
(1) Total
Room Numbers: 101, 108, 112, 113, 121, 122
Gross Floor Area : 168 sf, 296 sf, 682 sf, 181 sf, 128 sf, 172 sf
Built-in: Handrails
Fixtures: N/A
Lighting: Surface mounted light fixture
Equipment: Fire Extinguisher
Furnishings: N/A
Finishes: Sheet vinyl plank flooring with rubber base, painted gypsum board walls and ceilings

Office
(2) Total
Room Numbers: 102, 103
Gross Floor Area : 100 sf, 103 sf
Built-in: N/A
Fixtures: N/A
Lighting: Surface Mounted Light Fixture
Equipment: Telecom
Furnishings: Desk, chairs
Finishes: Carpet with rubber base, painted gypsum board walls and ceilings

Dining / Recreation
(1) Total
Room Numbers: 104
Gross Floor Area : 622 sf

EXHIBIT A
(c) 6. Architectural Space and Equipment Requirements
6.A. Space List

Built-in: N/A
Fixtures: N/A
Lighting: Surface mounted light fixture
Equipment: N/A
Furnishings: Tables, chairs
Finishes: Sheet vinyl plank flooring with rubber base, painted gypsum board walls and ceilings

Storage A
(4) Total
Room Number: 105, 106, 132
Gross Floor Area : 61 sf, 97 sf, 15 sf
Built-in: N/A
Fixtures: N/A
Lighting: surface mounted light fixture
Equipment: N/A
Furnishings: Storage Racks
Finishes: Sheet vinyl flooring with rubber base, painted gypsum board walls and ceilings

Food Service
(1) Total
Room Number: 107
Gross Floor Area : 80 sf
Built-in: Solid surface counter, upper & lower cabinets
Fixtures: (1) Handwash station
Lighting: Surface mounted light fixture
Equipment: Refrigerator, microwave
Furnishings: N/A
Finishes: Sheet vinyl flooring with rubber base, painted gypsum board walls and ceilings

Soiled Utility (S. U.) & Soiled Linen
(1) Total
Room Number: 109
Gross Floor Area : 96 sf
Built-in: Top and Bottom Solid surface counter cabinets
Fixtures: (1) Handwash Station, (1) Hopper / Clinical Sink
Lighting: surface mounted light fixture
Equipment: N/A
Furnishings: Storage Racks
Finishes: Sheet vinyl flooring with rubber base, painted gypsum board walls and ceilings

Clean Utility (C. U.) & Clean Linen
(1) Total

EXHIBIT A
(c) 6. Architectural Space and Equipment Requirements
6.A. Space List

Room Numbers: 110
Gross Floor Area : 96 sf
Built-in: Top and Bottom Solid surface counter cabinets
Fixtures: (1) Handwash Station
Lighting: Surface mounted light fixture
Equipment: N/A
Furnishings: Storage Racks
Finishes: Sheet vinyl flooring with rubber base, painted gypsum board walls and ceilings

Shower Room
(1) Total
Room Numbers: 111
Gross Floor Area : 122 sf
Built-in: N/A
Fixtures: (1) water closet, (1) lavatory, (2) showers
Lighting: Recessed can light fixtures, vanity light fixture
Equipment: N/A
Furnishings: N/A
Finishes: Ceramic tile with ceramic tile base, tile and painted gypsum board walls and ceilings

Dietary Mens & Womens Toilet
(2) Total
Room Numbers: 114, 115
Gross Floor Area : 48 sf
Built-in: Solid surface counter
Fixtures: Water Closet (1), Lavatory (1)
Lighting: Recessed can light fixture, vanity light fixture
Equipment: N/A
Furnishings: N/A
Finishes: Ceramic tile with ceramic tile base, painted gypsum board walls and ceilings

Dietary Lockers
(1) Total
Room Numbers: 116
Gross Floor Area : 86 sf
Built-in: N/A
Fixtures: N/A
Lighting: Surface mounted light fixture
Equipment: N/A
Furnishings: Lockers
Finishes: Quarry tile with quarry tile base, painted gypsum board walls and ceilings

EXHIBIT A
(c) 6. Architectural Space and Equipment Requirements
6.A. Space List

Dietary Office
(1) Total
Room Numbers: 117
Gross Floor Area : 51 sf
Built-in: N/A
Fixtures: N/A
Lighting: Surface mounted light fixture
Equipment: N/A
Furnishings: Desk, chairs
Finishes: Quarry tile with quarry tile base, painted gypsum board walls and ceilings

Housekeeping (HSPK)
(1) Total
Room Number: 118
Gross Floor Area : 17 sf
Built-in: N/A
Fixtures: (1) Sink
Lighting: surface mounted light fixture
Equipment: N/A
Furnishings: Janitor shelving, mop bucket and ringer,
Finishes: Quarry tile with quarry tile base, painted gypsum board walls and ceilings

Storage B - Dry Food Storage
(1) Total
Room Numbers: 119
Gross Floor Area : 198 sf
Built-in: N/A
Fixtures: N/A
Lighting: Surface mounted light fixture
Equipment: N/A
Furnishings: Storage racks
Finishes: Tile with tile base, painted gypsum board walls and ceilings

Kitchen
(1) Total
Room Numbers: 120
Gross Floor Area : 756 sf
Built-in: N/A
Fixtures: (2) Handwash station
Lighting: Surface mounted light fixture
Equipment: Refer to kitchen equipment plan
Furnishings: N/A
Finishes: Quarry tile with quarry tile base, painted gypsum board walls and ceilings

EXHIBIT A
(c) 6. Architectural Space and Equipment Requirements
6.A. Space List

Electrical Room
(2) Total
Room Numbers: 123, 130
Gross Floor Area : 99 sf, 38 sf
Built-in: N/A
Fixtures: N/A
Lighting: Surface mounted light fixture
Equipment: Refer to electrical equipment plan, Fire Extinguisher
Furnishings: N/A
Finishes: Sheet vinyl flooring with rubber base, painted gypsum board walls and ceilings

Nurse Station
(1) Total
Room Numbers: 124
Gross Floor Area : 150 sf
Built-in: Solid surface counter, lower cabinets
Fixtures: (1) Handwash station
Lighting: Surface mounted light fixture
Equipment: TV
Furnishings: N/A
Finishes: Sheet vinyl flooring with rubber base, painted gypsum board walls and ceilings

Med Room
(1) Total
Room Numbers: 125
Gross Floor Area : 56 sf
Built-in: Solid surface counter, upper & lower cabinets
Fixtures: (1) Handwash station
Lighting: Surface mounted light fixture
Equipment: Refrigerator
Furnishings: N/A
Finishes: Sheet vinyl flooring with rubber base, painted gypsum board walls and ceilings

Staff Toilet
(1) Total
Room Number: 126
Gross Floor Area : 55 sf
Built-in: Solid surface counter
Fixtures: Water Closet (1), Lavatory (1)
Lighting: Recessed can light fixture, vanity light fixture
Equipment: N/A
Furnishings: N/A

EXHIBIT A
(c) 6. Architectural Space and Equipment Requirements
6.A. Space List

Finishes: Ceramic tile with ceramic tile base, tile and painted gypsum board walls and ceilings

Public Toilet
(2) Total
Room Numbers: 127, 128
Gross Floor Area : 55 sf, 54 sf
Built-in: Solid surface counter
Fixtures: Water Closet (1), Lavatory (1)
Lighting: Recessed can light fixture, vanity light fixture
Equipment: N/A
Furnishings: N/A
Finishes: Ceramic tile with ceramic tile base, tile and painted gypsum board walls and ceilings

Housekeeping (HSPK)
(1) Total
Room Number: 129
Gross Floor Area : 46 sf
Built-in: N/A
Fixtures: (1) Mop Sink
Lighting: surface mounted light fixture
Equipment: N/A
Furnishings: N/A
Finishes: Sheet vinyl flooring with self-coved base, painted gypsum board walls and ceilings

Water Heater & Riser (W.H. & Riser)
(1) Total
Room Number: 131
Gross Floor Area : 34 sf
Built-in: N/A
Fixtures: N/A
Lighting: Surface mounted light fixture
Equipment: N/A
Furnishings: N/A
Finishes: Sealed concrete with rubber base, painted gypsum board walls and ceilings

EXHIBIT A
(c) 6. Architectural Space and Equipment Requirements
6.B.(1) Department Gross Square Footage (DGSF)

Room Name	# of Units	Room #	Area
CIRCULATION			
Lobby	1	100	168 SF
Corridor	1	101	168 SF
Corridor	1	108	296 SF
Corridor	1	112	682 SF
Corridor	1	113	181 SF
Corridor	1	121	128 SF
Corridor	1	122	172 SF
Department Total			1,795 SF
PUBLIC SPACES			
Public Toilet	1	127	55 SF
Public Toilet	1	128	54 SF
Department Total			109 SF
BACK OF HOUSE			
Storage	1	105	61 SF
Storage	1	106	97 SF
Storage	1	132	15 SF
Housekeeping	1	129	46 SF
Electrical Room	1	123	99 SF
Electrical Room	1	130	38 SF
W.H.	1	131	34 SF
Department Total			390 SF
NURSING SERVICES			
Office	1	102	100 SF
Office	1	103	103 SF
Soiled Utility	1	110	96 SF
Clean Utility	1	106	96 SF
Shower	1	111	122 SF
Nurse Station	1	124	150 SF
Med Room	1	125	56 SF
Staff Toilet	1	126	55 SF
1 Bed Patient Room	1	-	212 SF
2 Bed Patient Room	15	-	4,353 SF
Department Total			5,343 SF

EXHIBIT A
(c) 6. Architectural Space and Equipment Requirements
6.B.(1) Department Gross Square Footage (DGSF)

RECREATION / DINING

Dining / Recreation Room	1	104	622 SF
Department Total			622 SF

DIETETIC SERVICES

Food Service	1	107	80 SF
Dietary Toilet	1	114	48 SF
Dietary Toilet	1	115	48 SF
Dietary Lockers	1	116	86 SF
Dietary Office	1	117	51 SF
Housekeeping	1	118	17 SF
Dry Food Storage	1	119	198 SF
Kitchen	1	120	756 SF
Department Total			1,284 SF

Total # of Rooms	49
Total Net Sq. Ft. *	9,543 SF
Total Overall Gross Sq. Ft. *	10,613 SF
Exterior Walls and Structure	10.1%

* Does not include existing buildings / rooms

EXHIBIT A

(c) 6. Architectural Space and Equipment Requirements

6.B.(2) Building Gross Square Footage (BGSF)

Area	Department	DGSF	Beds
9,545	Circulation	1,795	16
	Public Spaces	109	
	Back of House	390	
	Nursing Services	5,343	
	Recreation / Dining	622	
	Dietetic Services	1,284	
	Total DGSF	9,543	
	Circulation/Wall Thickness	1,068	
	Total BGSF	10,613	