

## DoD Space Planning Criteria for Health Facilities

### Occupational Therapy Clinic

#### **3.8.1. PURPOSE AND SCOPE:**

This Chapter provides guidance for space planning for Occupational Therapy Services in military health care facilities.

#### **3.8.2. DEFINITIONS:**

**Administrative Personnel:** Administrative personnel are all personnel who do not counsel, diagnosis, examine or treat patients, but who do work that is essential for the accomplishment of the missions of a medical treatment facility. This does include military (assigned and borrowed), contract and civilian personnel. It does not include volunteers.

**Full-Time Equivalent (FTE):** A work force equivalent to one individual working full time for a specific period, which may be made up of several part-time individuals or one full-time individual. This will include everyone working in the facility; military, civilian and contractor personnel.

**Occupational Therapy (O.T.):** Is the use of purposeful activity with individuals who are limited due to physical injury or illness, psychosocial dysfunction, developmental or learning disabilities, poverty and cultural differences or the aging process in order to maximize independence, prevent disability and maintain health. The practice encompasses evaluation, treatment and consultation. Specific Occupational Therapy services include: diagnosis and treatment of upper extremity conditions (physician extender role); designing, fabricating or applying selected orthotic and prosthetic or selective adaptive equipment; using specifically designed crafts and exercises to enhance functional performance; administering and interpreting tests such as manual muscle and range of motion; teaching daily living skills; developing perceptual motor skills and sensory integrative functioning; developing play skills and prevocational and leisure capacities; health promotion and injury prevention education and treatment; and adapting environments for the physically and mentally challenged. These services are provided individually, in groups, or through social systems.

In addition to the above, service may include ergonomics/human factor consultation (work adjustment); work-site evaluation; development of avocational interests and leisure time skills; fabrication of orthotic and assistive devices; clinical education programs for therapist level and or assistant level students and research programs; and evaluation and treatment for sensory integrative dysfunction. As appropriate, service may be extended beyond the Occupational Therapy module to provide home health visits and consultation services to community agencies supporting the military.

**Office:** A private office is an enclosed room outfitted with either standard furniture (Room Code OFA01) or systems furniture (Room Code OFA02). An administrative cubicle is within an open room and is constructed out of system furniture (Room Code OFA03)

**Service:** A service in this context includes all functions and activities associated with accomplishing the Occupational Therapy mission. This service receives referrals from all medical specialties.

**Treatment Area for O.T.:** The major treatment area or patient care area is the general clinic area including daily life skills area, evaluation areas, and work adjustment/hardening equipment area. Space requirements for the above treatment areas are calculated on the basis of projected patient visits per month. When computing actual space requirements, the resulting figures should be rounded to a whole number.

**Visit:** Each time a patient presents himself/herself to the Occupational Therapy Clinic; it is counted as one visit. One visit may generate several treatments. Visits to any areas outside the clinic, such as nursing units and homes, are not to be counted for space allocation.

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#### **3.8.3. POLICIES:**

A separate Occupational Therapy Clinic will be provided when there are three or more projected FTE Occupational Therapists and occupational therapy technicians. If one or two Occupational Therapists are projected, recommend combining occupational therapy with the Physical Therapy Clinic.

**Offices, Private:** With the exception of the office provided for “Key Personnel,” all other private offices will be 120 net square feet as stated in Chapter 2.1 (General Administration), paragraph 2.1.5. Private offices will be provided to following personnel:

- a) Staff who must meet with patients/customers on a regular basis and hold private consultations/discussion.
- b) The senior officer and enlisted member of a department.
- c) Staff who supervise others and must hold frequent, private counseling sessions with their junior staff. This does not include staff who supervise a very small number of people, and who would only occasionally need private counseling space. These staff can use available conference rooms or other private areas for their infrequent counseling needs
- d) Any personnel who interview or counsel patients with patient privacy concerns.

**Office, Non-Private or Shared Space:** Personnel, who require office space, but not a private office, will be provided space in a shared office. Non-private or shared office space will be programmed at 60 net square feet per occupant

**Public Toilets, Staff Lounges and Locker Areas:** The criteria for public toilets, staff lounges and locker rooms are provided in Chapter 6.1 (Common Areas).

#### **3.8.4. PROGRAM DATA REQUIRED:**

How many FTE Occupational Therapists are projected?

How many FTE Occupational Therapy technicians are projected?

How many FTE NCOIC/LCPO/LPO are projected?

How many officers or officer equivalents are projected? **Note:** This information is used to calculate the size of the Conference Room. See Chapter 2.1 (General Administration), paragraph 2.1.2 for Personnel Equivalents Chart.

How many staff will require a cubicle? **Note:** Do not include therapists and technicians.

How many staff will require a locker? **Note:** Do not include staff with offices or cubicles.

How many FTEs on peak shift are projected? **Note:** This information is used to calculate the number of Staff Toilets and the size of the Staff Lounge.

Is an isolation room required?

Is a procedure room required?

Will ergonomic OT services be provided?

Will a splint fabrication room be required?

Will a neuro/rehab training program be provided?

Will pediatric evaluation and rehabilitation program be provided?

Will there be vending machines in the staff lounge?

**NOTE: GP indicates that a guideplate exists for that particular Room Code.**

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**Occupational Therapy Clinic**

FUNCTION	Room Code	AUTHORIZED		PLANNING RANGE/COMMENTS
		m <sup>2</sup>	nsf	

18.8.5. **SPACE CRITERIA:**

FUNCTION	Room Code	AUTHORIZED		PLANNING RANGE/COMMENTS
		m <sup>2</sup>	nsf	

**RECEPTION AREAS**

Clinic Waiting	WRC01	5.72	60	Minimum (provides seven seats). Provide two seats per FTE projected Occupational Therapist and OT technician. Provide 16 nsf for 85% of the seats and 25 nsf for 15% of the seats (handicapped waiting).
Reception (GP)	RECP1	13.01	140	One per clinic.
Public Toilets	NA	NA	NA	Space will be provided in the Chapter 6.1 (Common Areas).

**PATIENT AREAS**

Clinic Treatment Area	OTGC1	11.15	120	Minimum. Provide 60 nsf per projected FTE therapist and OT technician
Daily Living Skills Training Room (GP)	OTDL1	37.16	400	One per clinic.
Private Evaluation Area	OTEV1	11.15	120	One per every three projected FTE therapists or technicians. (Do not round up).
Ergonomics Laboratory	OTWT1	37.16	400	One per clinic when Ergonomic O.T. Services are provided.
Splint Fabrication Room	OPCR1	18.58	200	One if included in Clinic Concept of Operations.
Neuro/Rehab Training	OTEV1	18.58	200	One per clinic when Neuro/Rehab Training Program offered.
Pediatric Evaluation and Rehabilitation	PTPR1	18.58	200	One per clinic when Pediatric Evaluation and Rehabilitation Program offered.
Patient Toilet	TLTU1	4.65	50	One per clinic.

**STAFF AND ADMINISTRATIVE AREAS**

Occupational Therapist (GP)	OFD01	11.15	120	Army - One per projected FTE Occupational Therapist. Do not include residents. Resident's cubicles are included in the Residency Functional Area.
	OFD02			Navy - One per projected FTE Occupational Therapist.
	OFD03			Air Force - One per projected FTE Occupational Therapist

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		m <sup>2</sup>	nsf	

**STAFF AND ADMINISTRATIVE AREAS: Continued**

Occupational Therapy Technician Office	WRCH1	11.15	120	One per clinic. This area will accommodate up to 3 Technicians.
NCOIC/LCPO/LPO	OFA01	11.15	120	Standard Furniture. One per projected FTE.
	OFA02			System Furniture.
Administrative Cubicle	OFA03	5.57	60	Systems Furniture. Per projected FTE requiring a dedicated work -space but not a private office. See Chapter 2.1 (General Administration), paragraph 2.1.3.
Copy Room	RPR01	9.29	100	For Copier/Fax/Mailbox Distribution
Patient File Area	FILE1	5.72	60	One per clinic
Forms / Literature Storage	SRS01	9.29	100	One per clinic
Conference Room (GP)	CRA01	23.23	250	One per clinic with between four to eight FTE Occupational Therapists. If less than four therapist, combine with another clinic.
Staff Lounge (GP)	SL001	13.01	140	Minimum 140 nsf for 10 FTEs on peak shift. Add 5 nsf for each peak shift FTE over 10. Maximum size is 300 nsf without vending machines and 320 nsf if vending machines are included.
Personal Property Lockers (GP)	LR001	2.32	25	Minimum for the first 10 FTEs on peak shift. Add 2.5 nsf for FTE over 10. For staff without a dedicated office/cubicle space. See Chapter 6.1 (Common Areas) for increase in size or for Locker Room, Changing criteria.
Staff Toilets	TLTU1	4.65	50	Minimum of one for the first 15 FTEs on peak shift. Add one TLTU1 for every additional 15 FTEs on peak shift. Can be combined into multi-stall toilets.

**CLINIC SUPPORT AREAS**

Litter/Wheelchair Storage	SRLW1	5.57	60	One per clinic.
Equipment Storage	SRE01	18.58	200	Minimum. One per clinic. Add 60 nsf for each FTE Occupational Therapist over six.