
24
OCT
R1050
R1350
1 CPD
CATEGORY 1

COURSE OUTLINE FOR TODAY

CLINIC

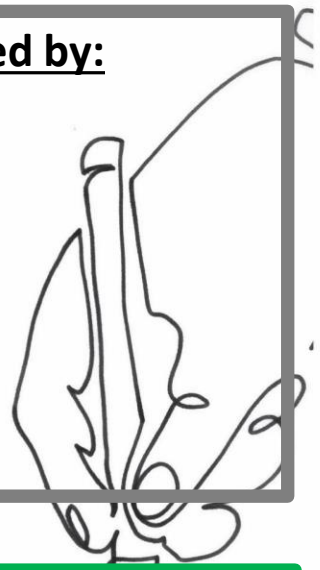
PUBLIC vs PRIVATE

Components:

1. Disabled parking bay
2. Ramp and entrance into the building
3. Patient / Assisted toilet
4. Procedure room / Treatment room
5. Consulting room
6. Dirty Utility room / Sluice room

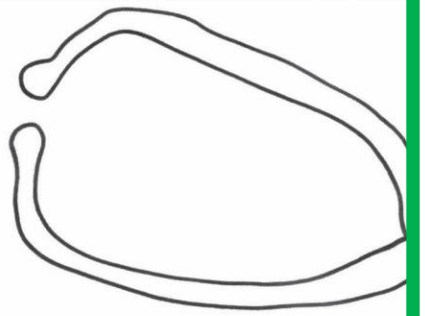
Governed / informed by:

1. R158
2. SANS Part S
3. IUSS documents
4. Design Guide
5. Pharmacy Act



Design Elements:

1. Approach
2. Arrival
3. Entrance
4. "Configuration of the Path" (ie, Circulation)
5. Path / Space Relationship
6. Form of Circulation



Pharmacy:

1. Patient entrance
2. Dispensing counter
3. Private consultation area
4. CCMDD
5. Ward collection
6. Manager's office
7. Secure delivery area
8. Waste area
9. Security
10. Schedule 6 drugs

Public vs Private - two case studies

PUBLIC

vs

PRIVATE

URBAN

vs

RURAL

In order to place this study in proper context, the following is an overview of the basic elements, systems, and orders that constitute a work of architecture. All of these constituents can be perceived and experienced. Some may be readily apparent while others are more obscure to our intellect and senses. Some may dominate while others play a secondary role in a building's organization. Some may convey images and meaning while others serve as qualifiers or modifiers of these messages.

In all cases, however, these elements and systems should be interrelated to form an integrated whole having a unifying or coherent structure. Architectural order is created when the organization of parts makes visible their relationships to each other and the structure as a whole. When these relationships are perceived as mutually reinforcing and contributing to the singular nature of the whole, then a conceptual order exists—an order that may well be more enduring than transient perceptual visions.

Architectural Systems

The **Architecture** of

Space
Structure
Enclosure

- organizational pattern, relationships, clarity, hierarchy
- formal image and spatial definition
- qualities of shape, color, texture, scale, proportion
- qualities of surfaces, edges, and openings

Experienced through

Movement in Space-Time

- approach and entry
- path configuration and access
- sequence of spaces
- light, view, touch, hearing, and smell

Achieved by means of

Technology

- structure and enclosure
- environmental protection and comfort
- health, safety, and welfare
- durability and sustainability

Accommodating a

Program

- user requirements, needs, aspirations
- sociocultural factors
- economic factors
- legal constraints
- historical tradition and precedents

Compatible with its

Context

- site and environment
- climate: sun, wind, temperature, precipitation
- geography: soils, topography, vegetation, water
- sensory and cultural characteristics of the place

...& Orders

Physical — **Form and Space**
- solids and voids
- interior and exterior

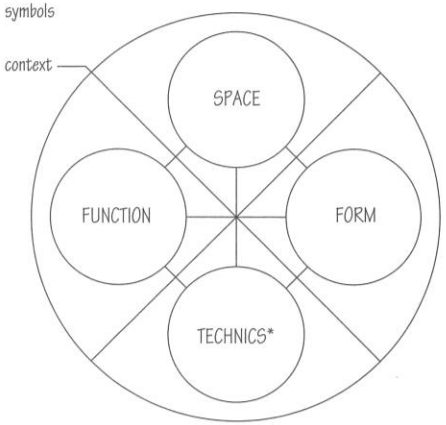
Systems and organizations of
- space
- structure
- enclosure
- machines

Perceptual — Sensory perception and recognition of the physical elements by experiencing them sequentially in time

- approach and departure
- entry and egress
- movement through the order of spaces
- functioning of and activities within spaces
- qualities of light, color, texture, view, and sound

Conceptual — Comprehension of the ordered or disordered relationships among a building's elements and systems, and responding to the meanings they evoke

- images
- patterns
- signs
- symbols
- context



* Technics refers to the theory, principles, or study of an art or a process.

Architecture: Form, Space, and Order

Credit to Francis D.K. Ching

Design Elements:

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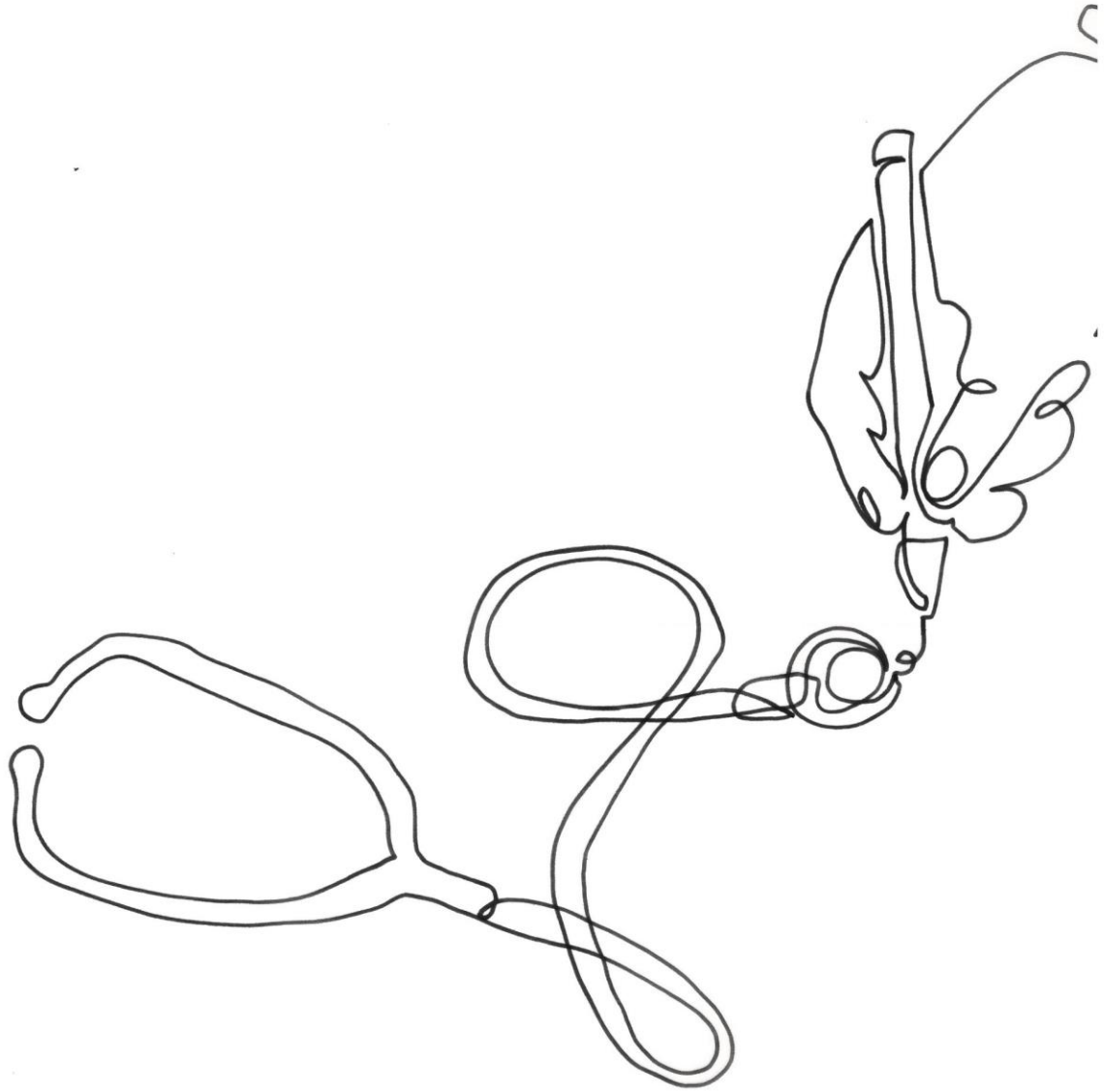
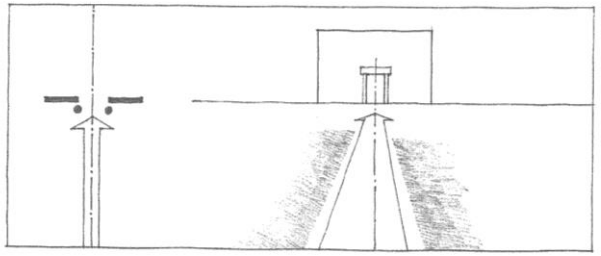
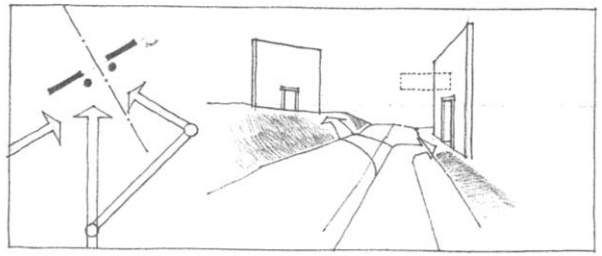
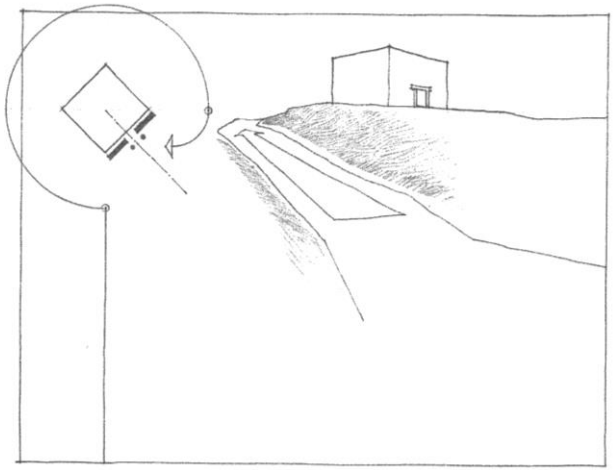


1. APPROACH

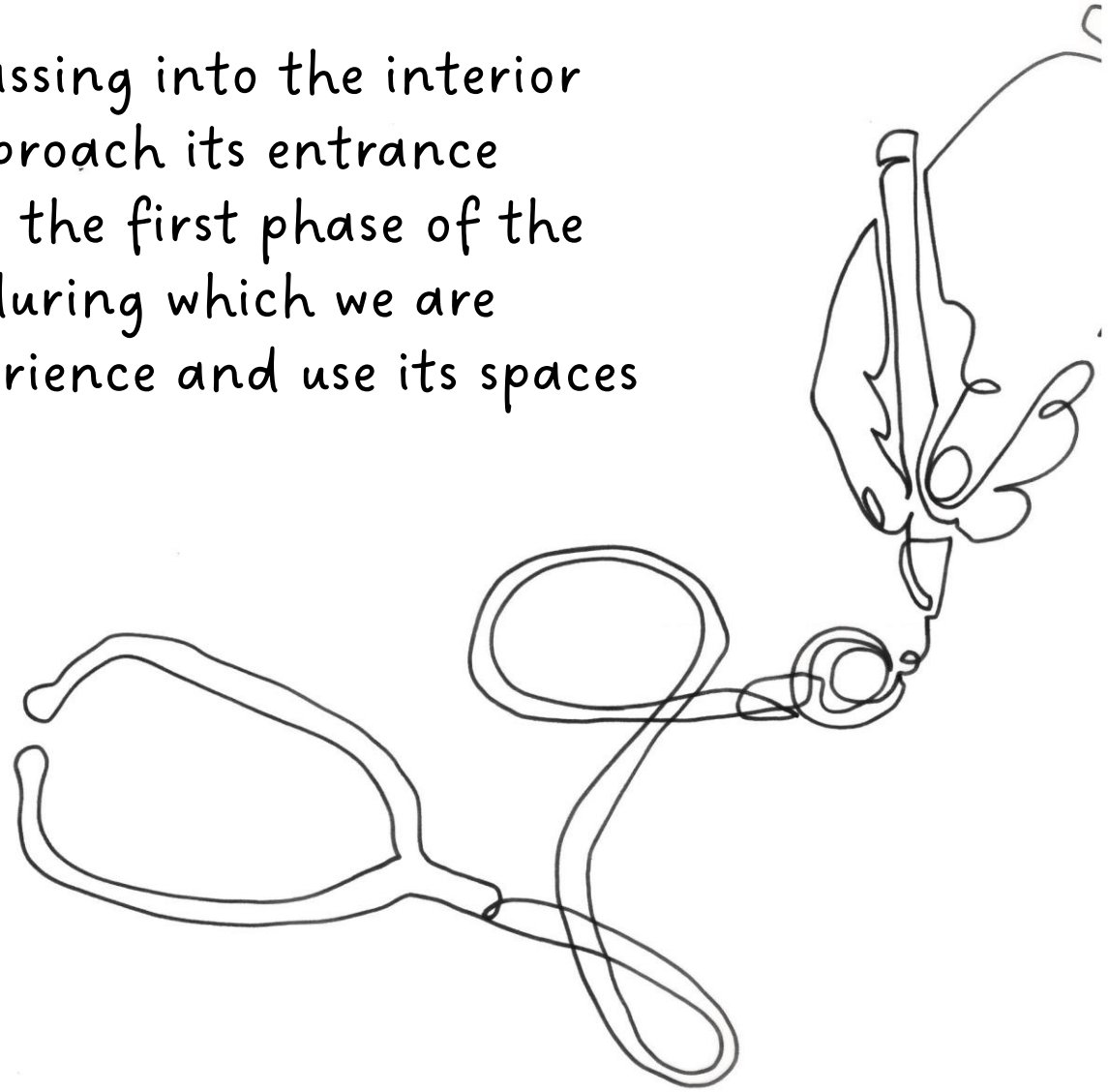
Credit to Francis D.K. Ching





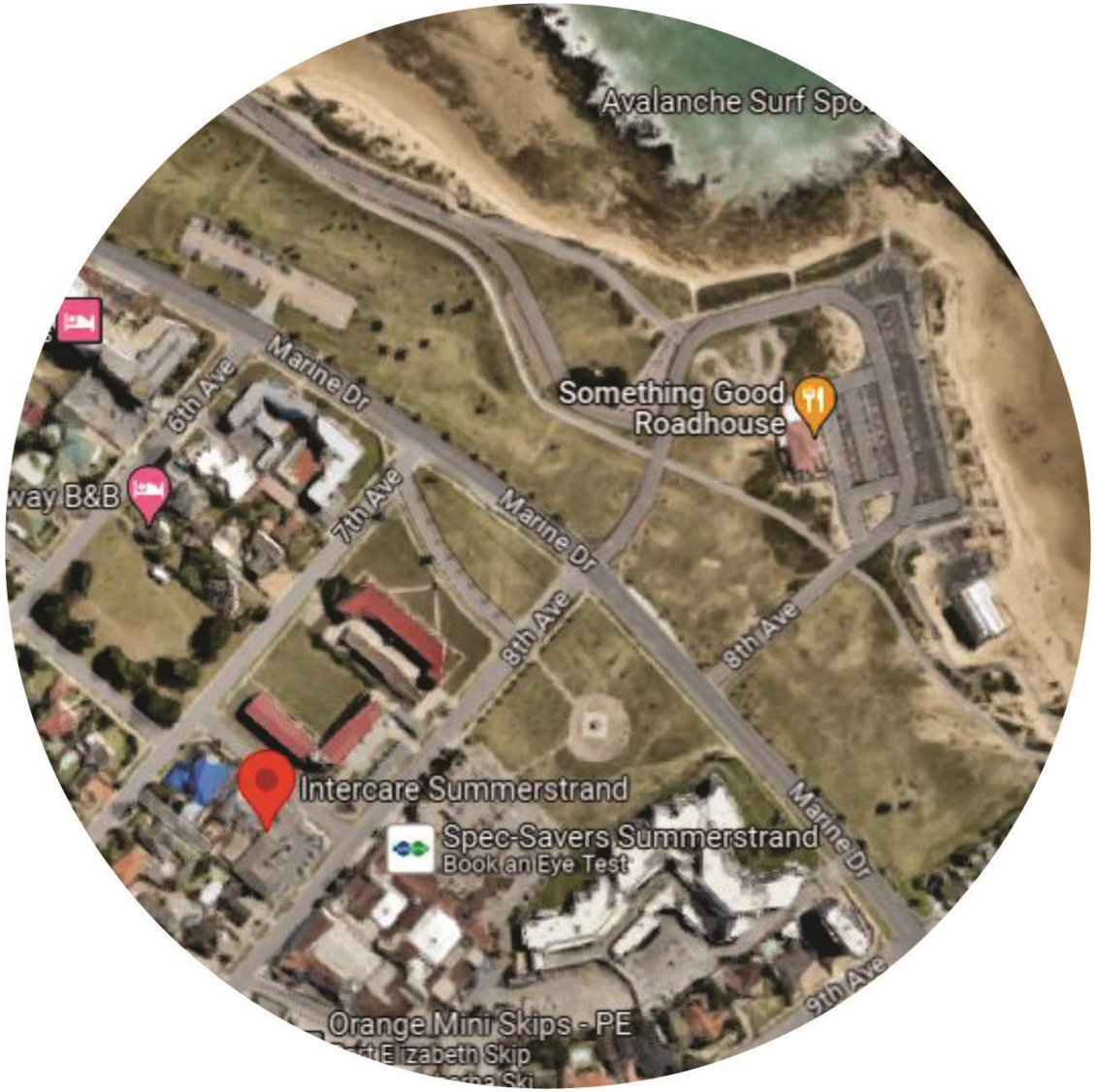


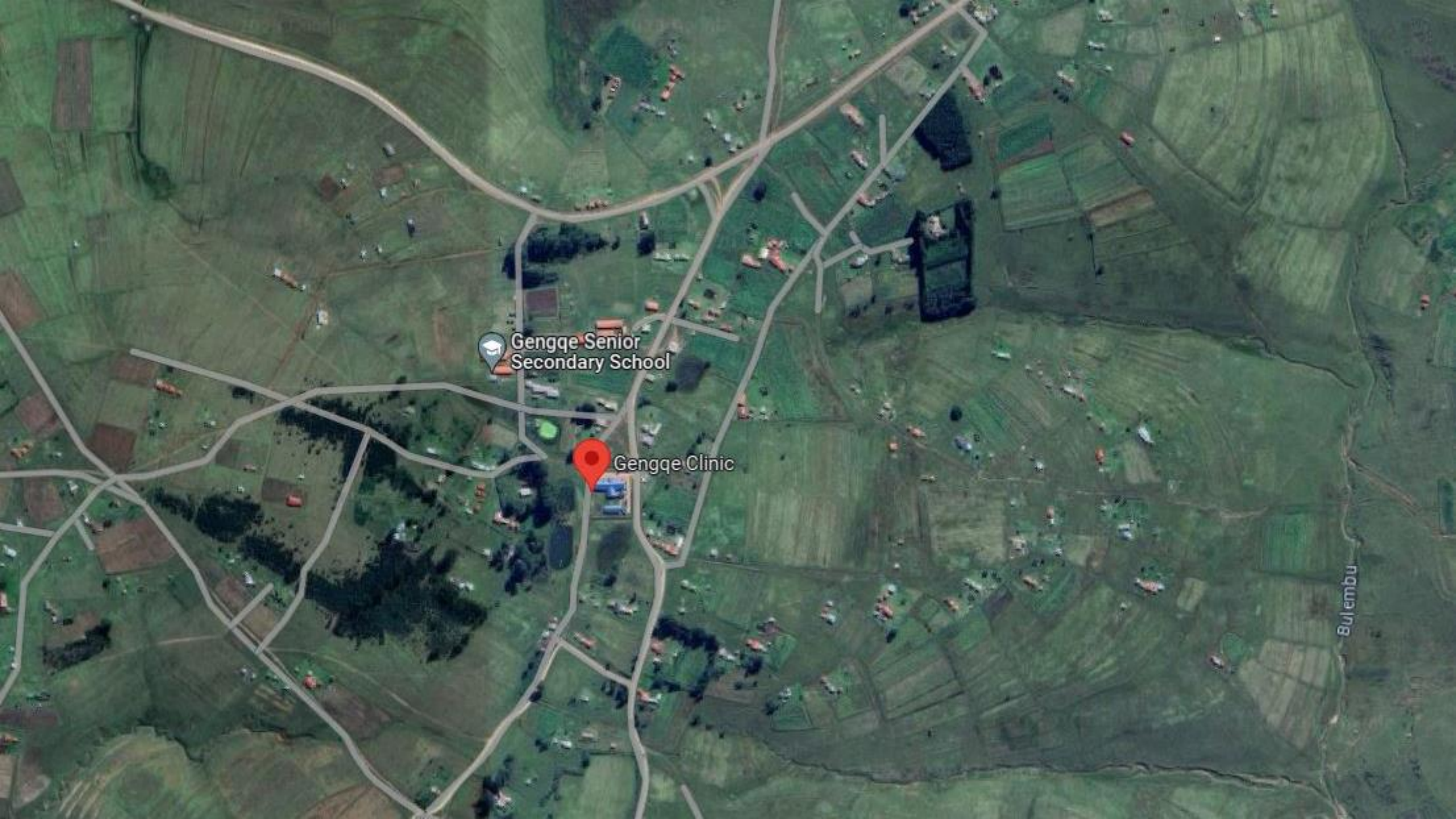
"Prior to actually passing into the interior of a building, we approach its entrance along a path. This is the first phase of the circulation system, during which we are prepared to see, experience and use its spaces within a building."

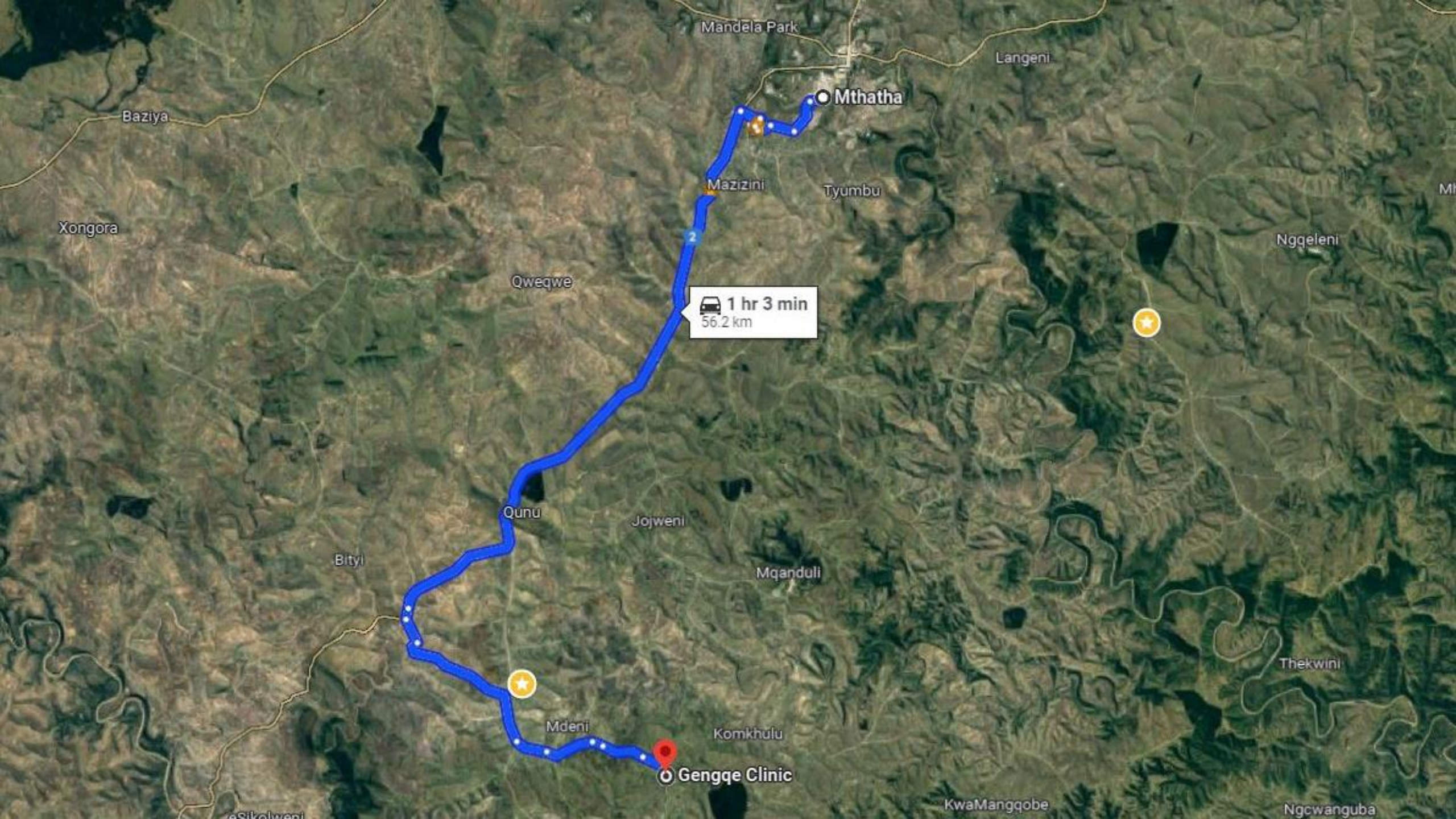


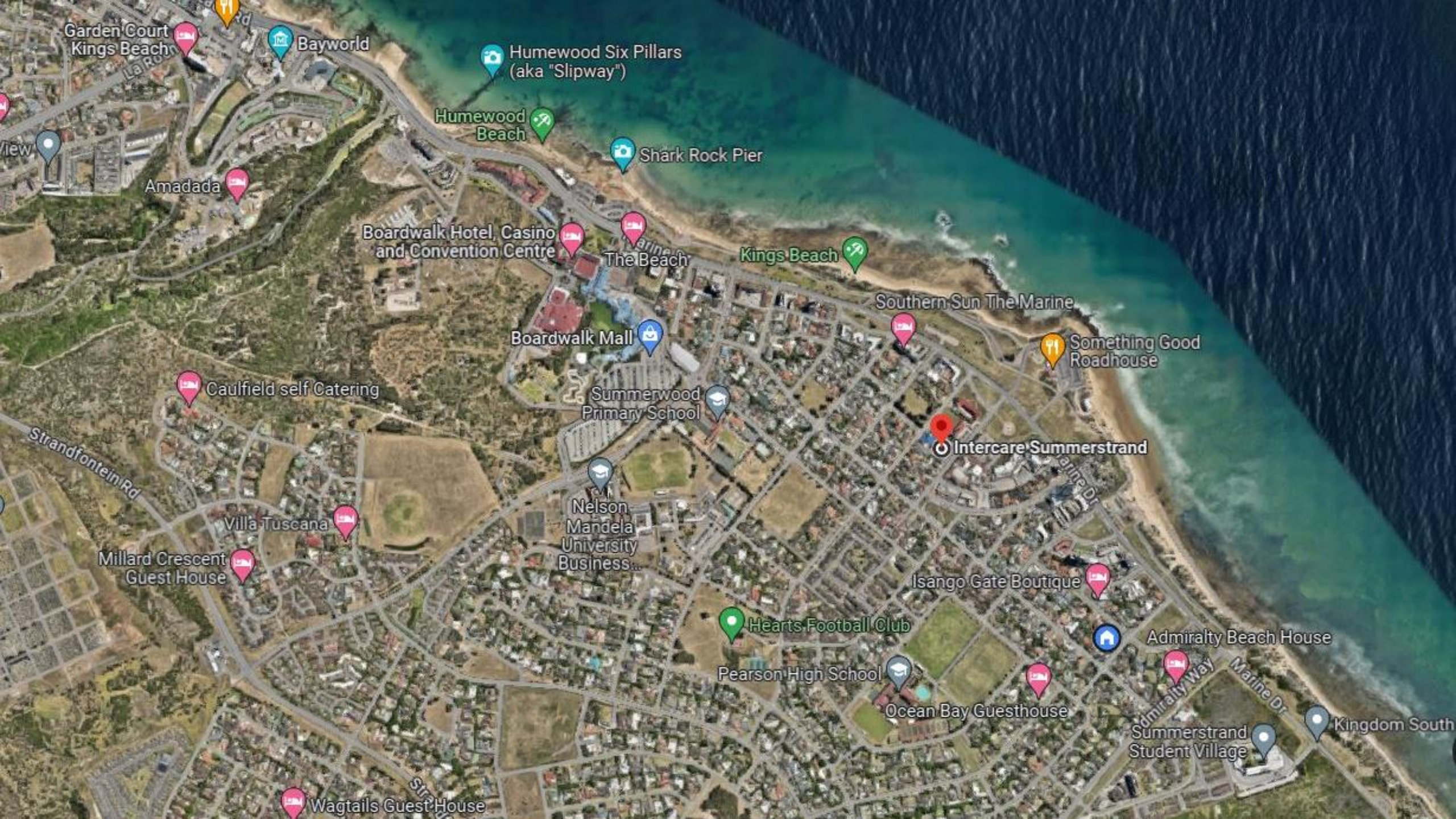
1. APPROACH

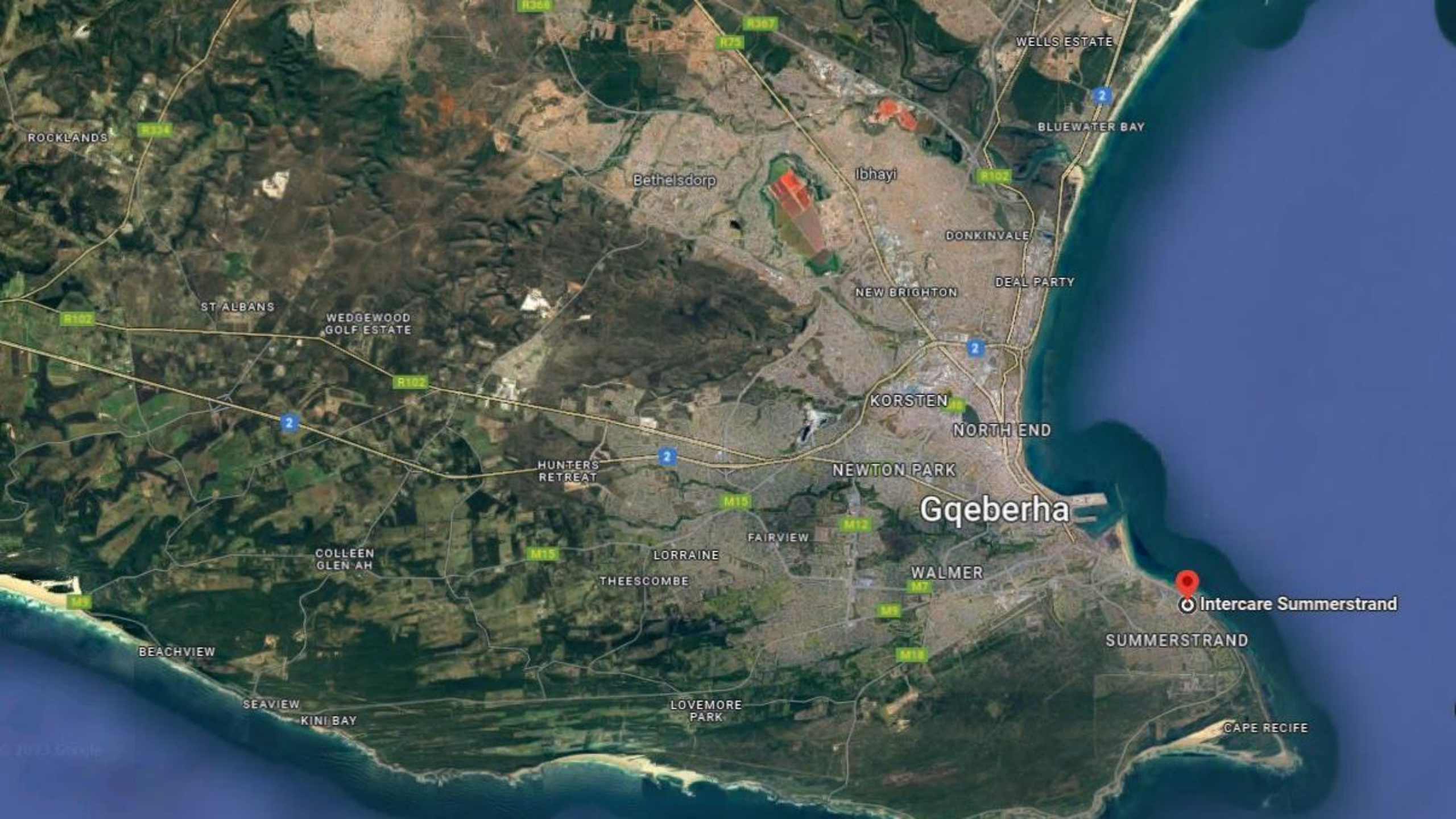
Credit to Francis D.K. Ching




Gengqe Senior
Secondary School
Gengqe Clinic
Bulembu


Mandela Park
Langeni
Mthatha
Baziya
Mazizini
Tyumbu
Xongora
Ngqeleni
Qweqwe
1 hr 3 min
56.2 km
Qunu
Jojweni
Bityi
Mqanduli
Thekwini
Mdeni
Komkhulu
Gengqe Clinic
KwaMangqobe
Ngcwanguba


Garden Court Kings Beach
Bayworld
Humewood Six Pillars (aka "Slipway")
Humewood Beach
Shark Rock Pier
Amadada
Boardwalk Hotel, Casino and Convention Centre
The Beach
Kings Beach
Southern Sun The Marine
Boardwalk Mall
Something Good Roadhouse
Caulfield self Catering
Summerwood Primary School
Intercare Summerstrand
Strandfontein Rd
Nelson Mandela University Business...
Villa Tuscana
Millard Crescent Guest House
Isango Gate Boutique
Hearts Football Club
Admiralty Beach House
Pearson High School
Ocean Bay Guesthouse
Admiralty Way
Marine Dr
Summerstrand Student Village
Kingdom South
Wagtails Guest House

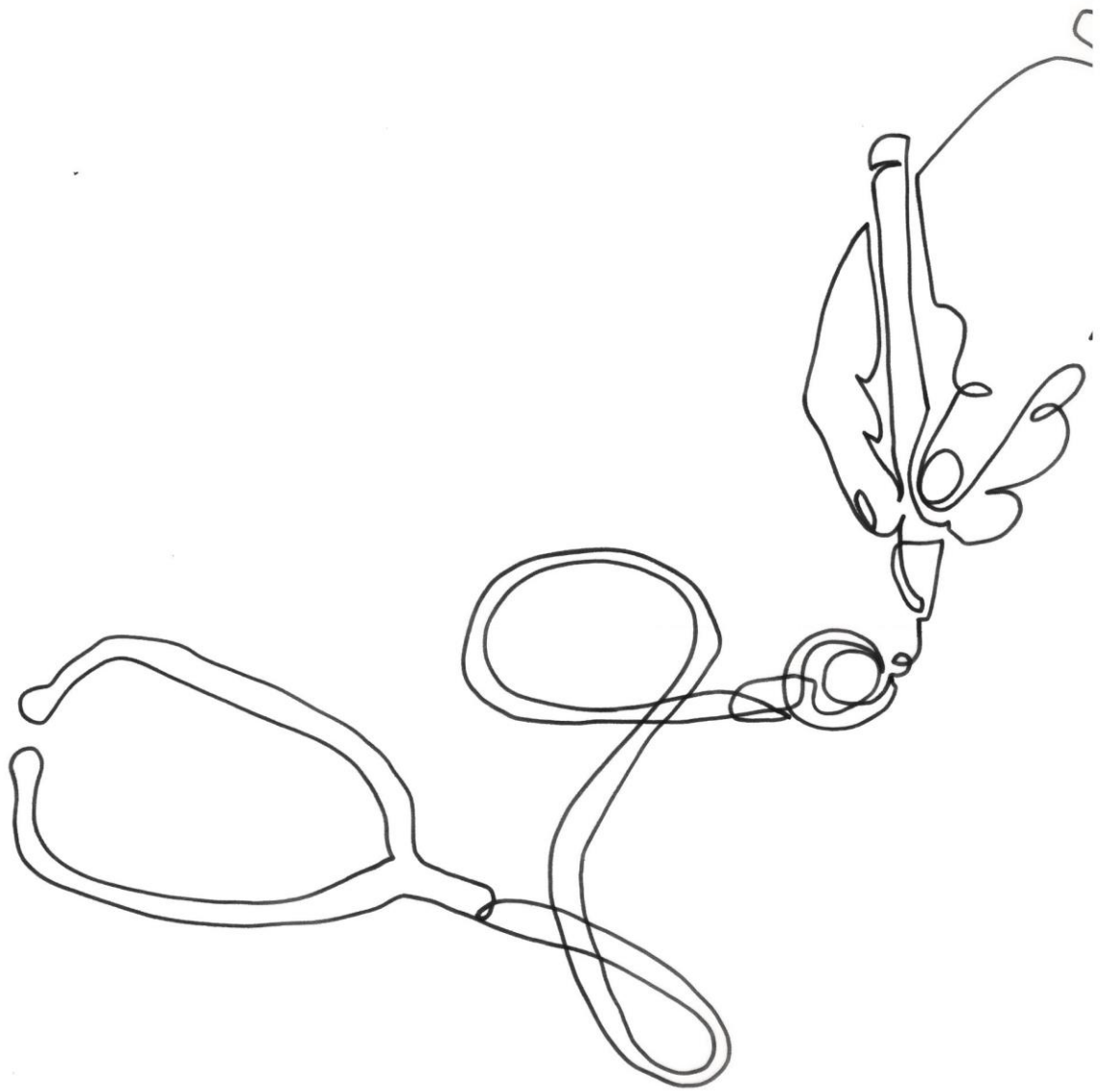

WELLS ESTATE
BLUEWATER BAY
ROCKLANDS
Bethelsdorp
Ibhayi
DONKINVALE
DEAL PARTY
NEW BRIGHTON
ST ALBANS
WEDGEWOOD GOLF ESTATE
KORSTEN
NORTH END
HUNTERS RETREAT
NEWTON PARK
Gqeberha
FAIRVIEW
COLLEEN GLEN AH
LORRAINE
WALMER
THEESCOMBE
Intercare Summerstrand
SUMMERSTRAND
BEACHVIEW
SEAVIEW
KINI BAY
LOVEMORE PARK
CAPE RECIFE
R334
R102
R307
R75
M15
M12
M7
M9
M18
2

2. ARRIVAL – mode of transport

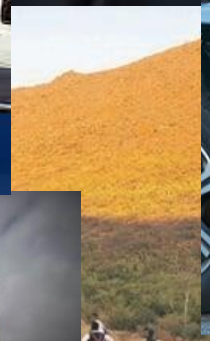
Credit to Christopher Alexander

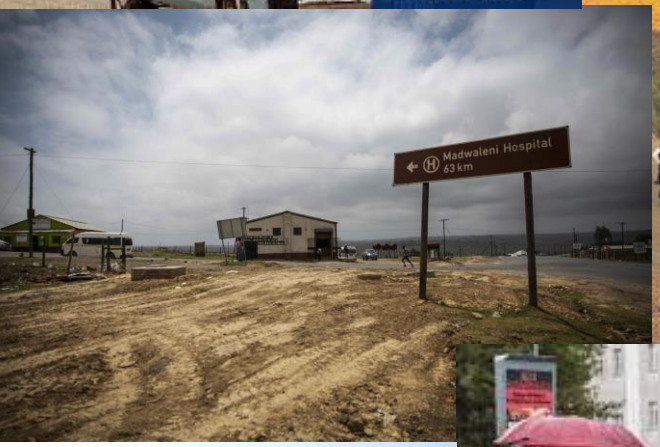
"It is necessary to work out how a person can approach the building by car. Of course, in a pedestrian precinct this will not apply; but generally, the car itself must have a housing somewhere near the building; and when this is so, its place and character are critical."

"The process of arriving in a house, and leaving it, is fundamental to our daily fives; and very often it involves a car. But the place where cars connect to houses, far from being important and beautiful, is often off to one side and neglected"




The Guardian




Madwaleni Hospital
63 km

2. ARRIVAL – gate house

2. ARRIVAL - waiting

From “A Pattern Language” - Credit to Christopher Alexander

Entrance room:

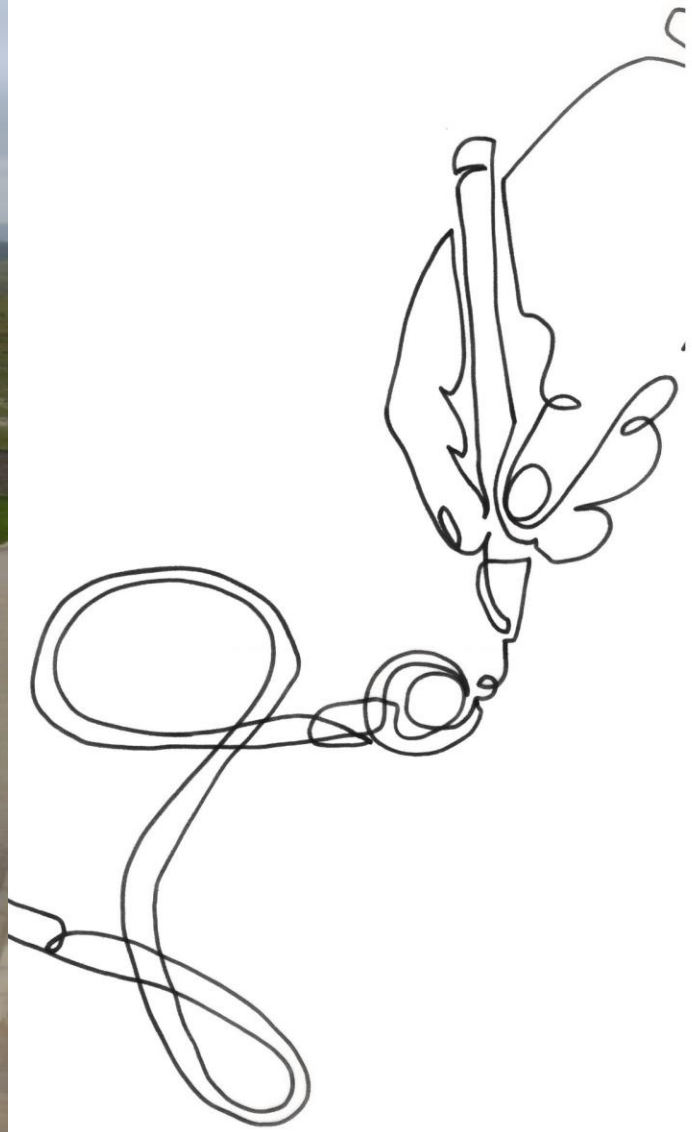
The need for shelter outside the door

(a) People try to get shelter from the rain, wind, and cold while they are waiting.

(b) People stand near the door while they are waiting for it to open.

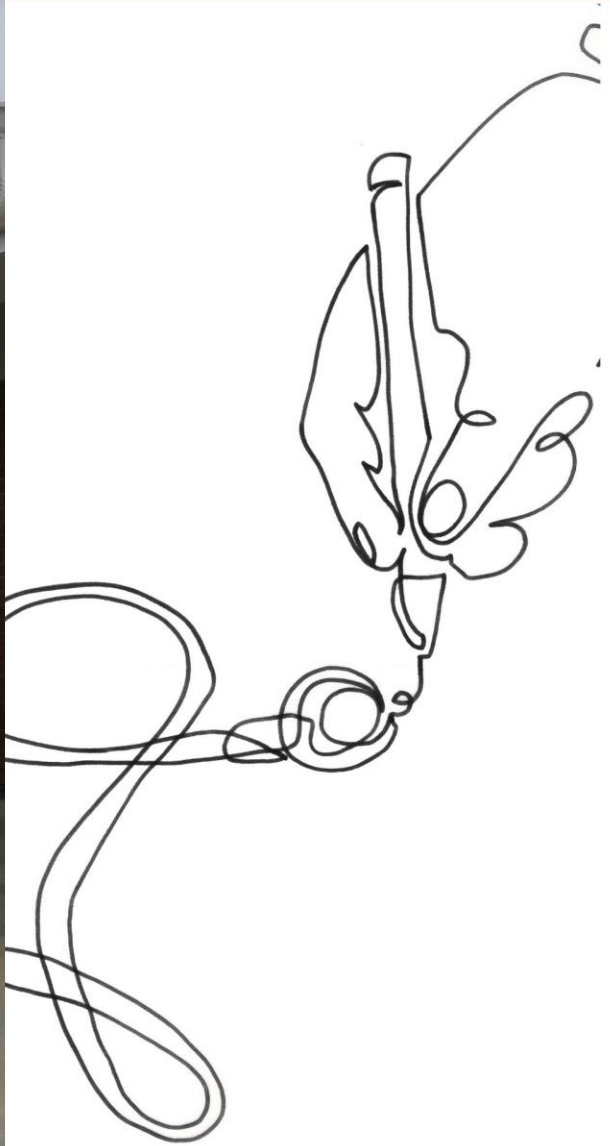
On the outside, therefore, give the entrance room walls enclosing three sides of a covered space

2. ARRIVAL – outside waiting area (rural)

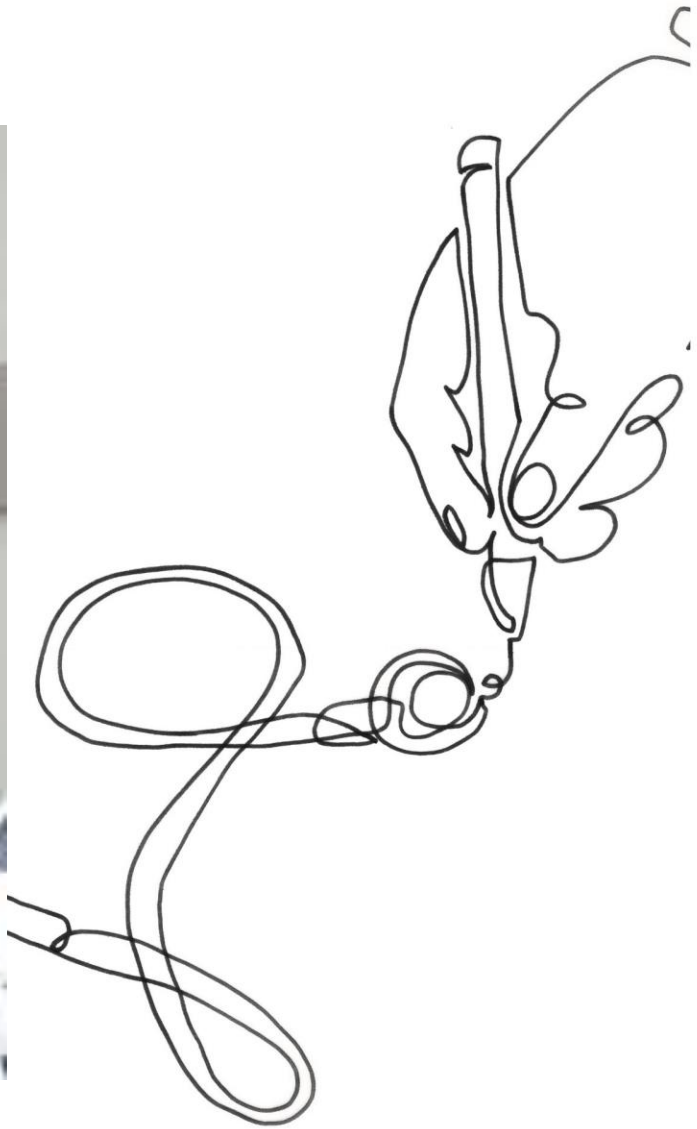


EXTERNAL WAITING

2. ARRIVAL – outside waiting area (rural)



2. ARRIVAL –private / urban



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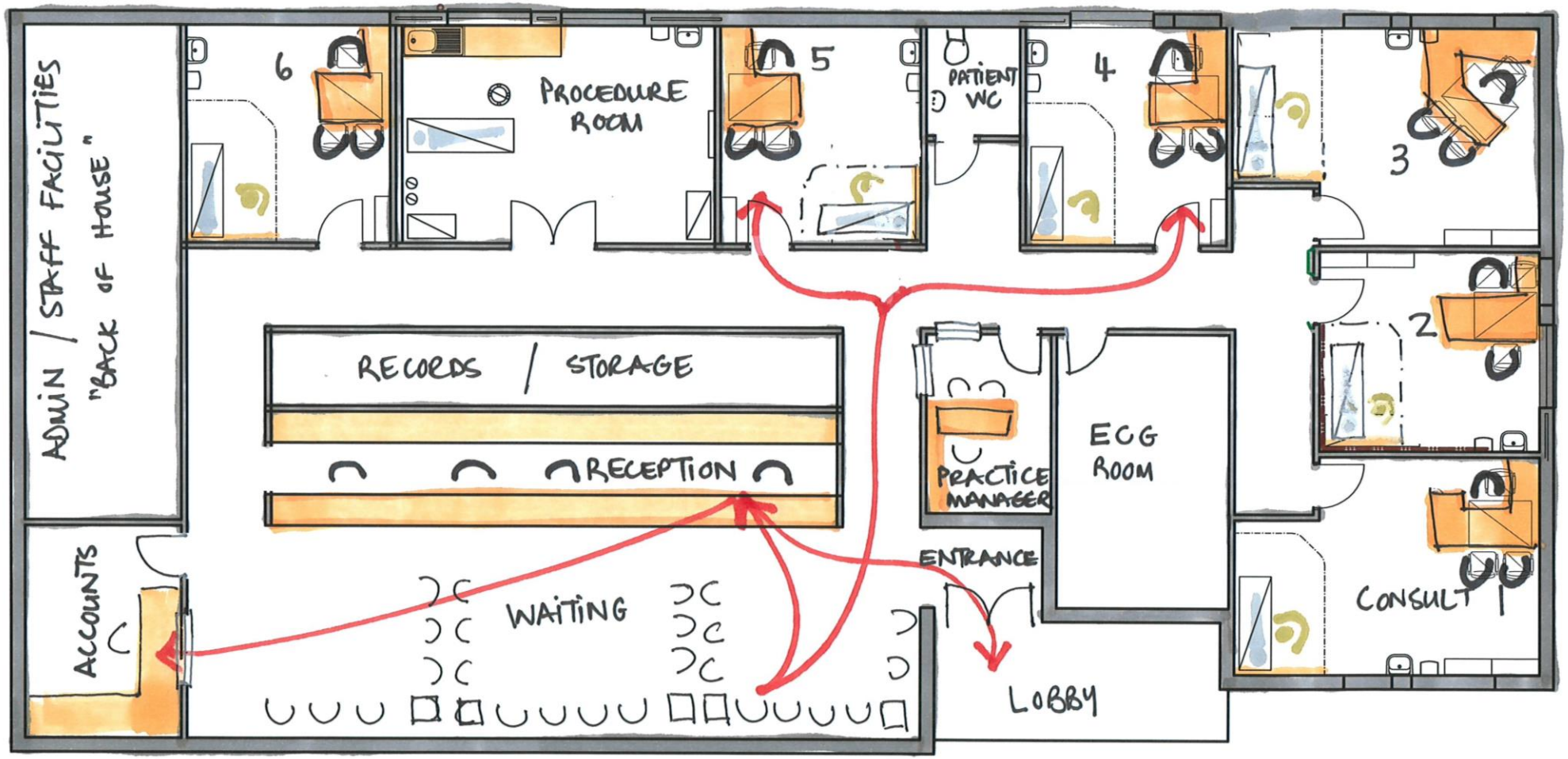
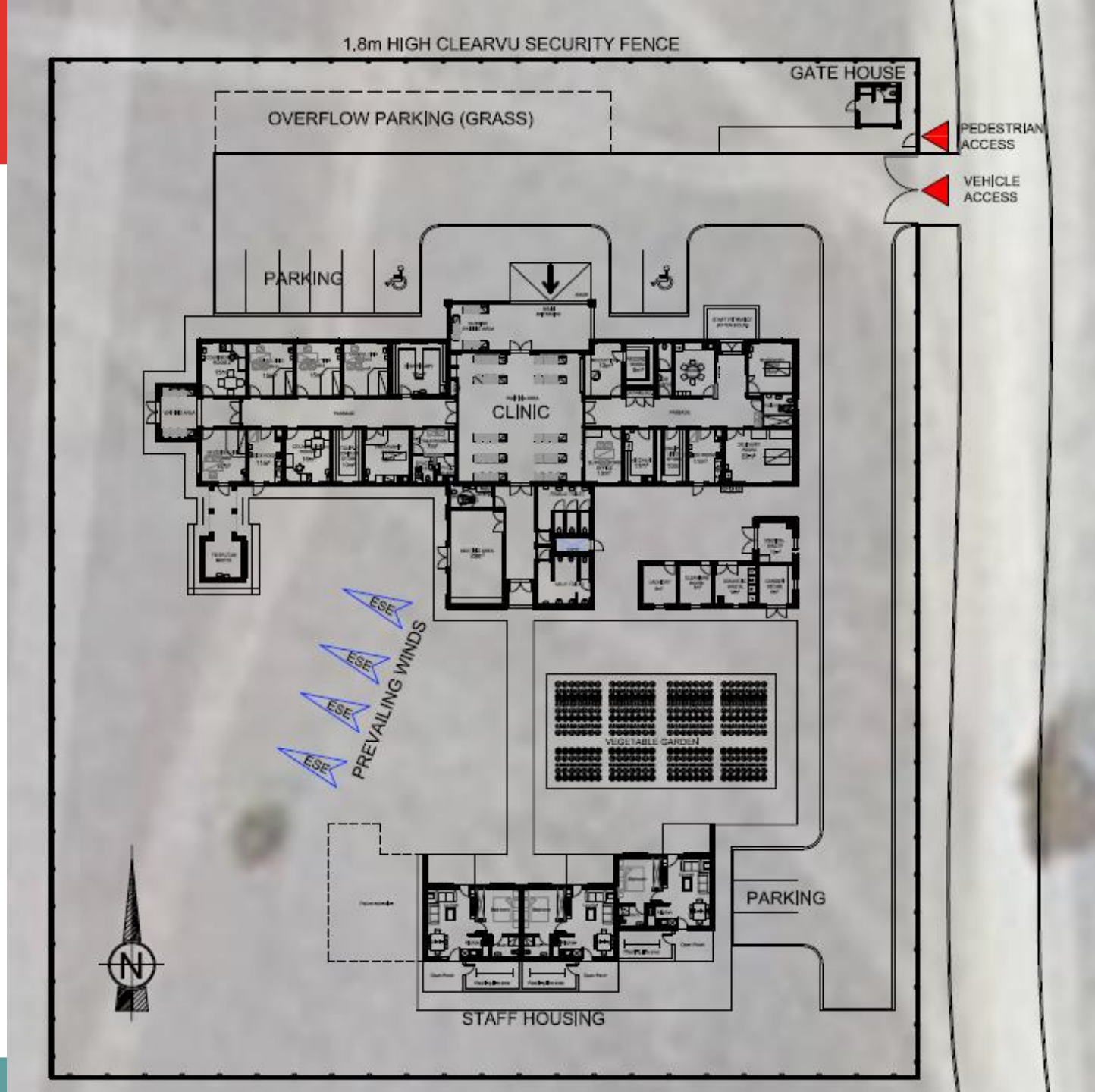


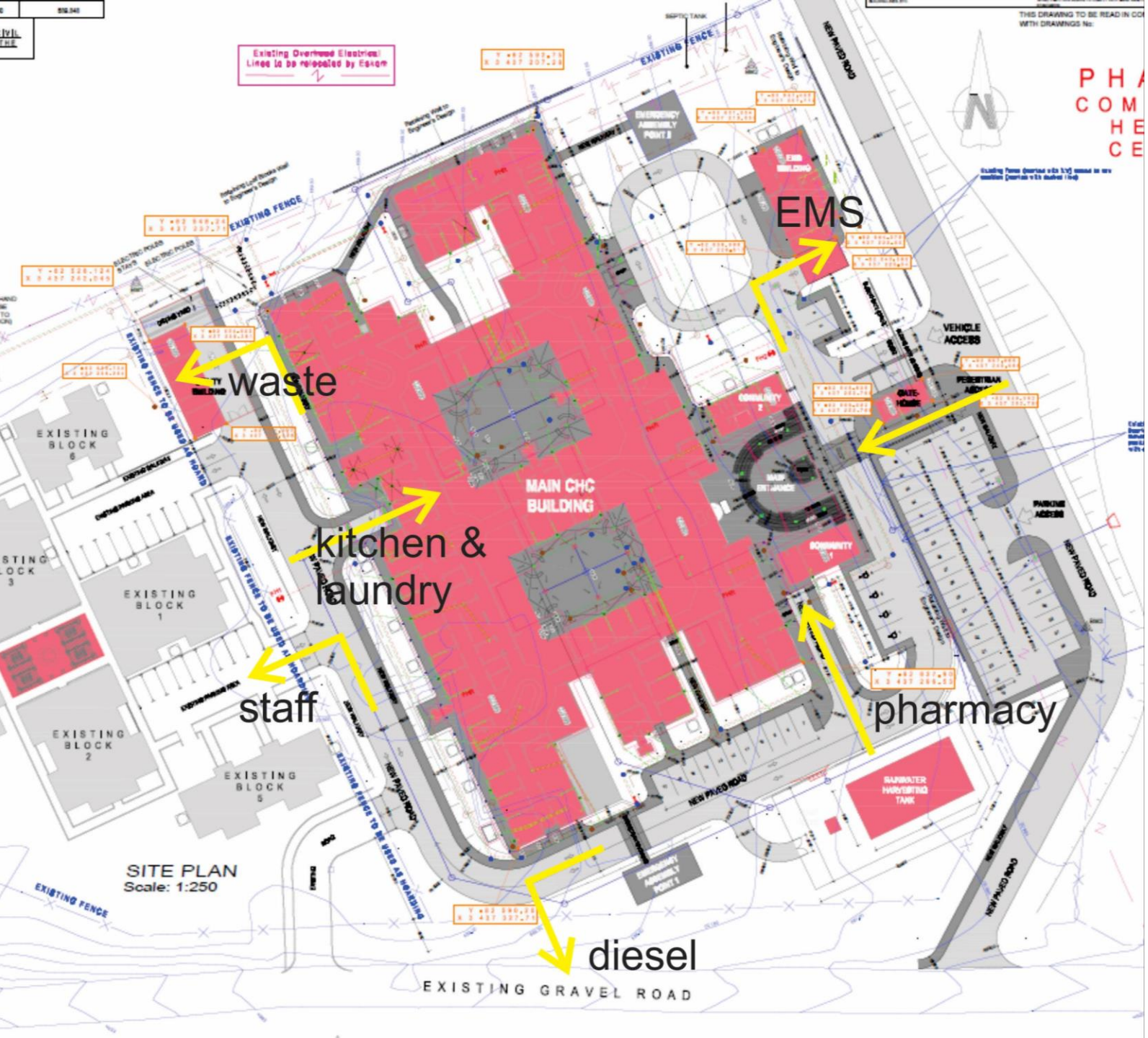
2. ARRIVAL

it's not just people arriving…

Who / What else is arriving?

1. Patient
2. Staff
3. Deliveries
4. Collections





2. ARRIVAL

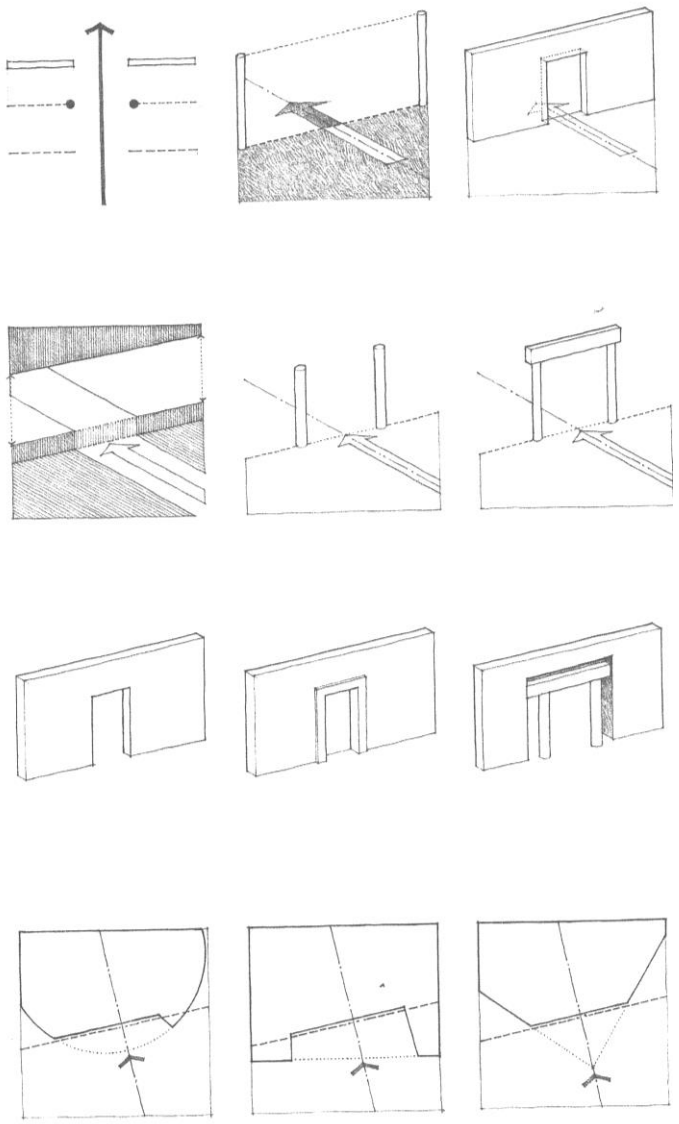
- **it's not just people arriving…**

OPERATING HOURS

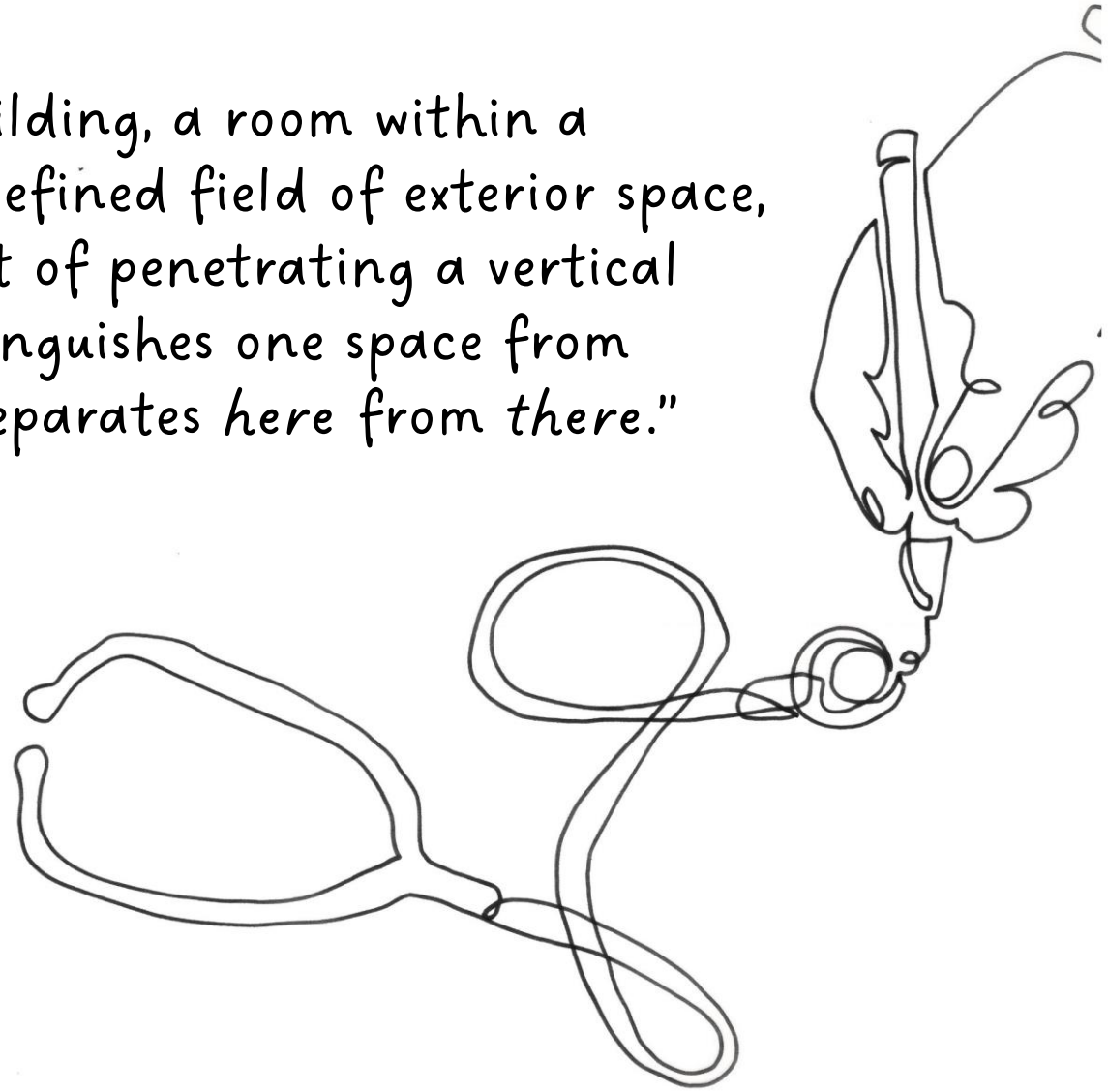
OPERATING HOURS

3. ENTRANCE

Credit to Francis D.K. Ching



"Entering a building, a room within a building or a defined field of exterior space, involves the act of penetrating a vertical plan that distinguishes one space from another and separates *here* from *there*."



DESIGN ELEMENT 3. ENTRANCE

PUBLIC

vs

PRIVATE

URBAN

vs

RURAL

CLINIC COMPONENT #1: WHEELCHAIR PARKING

4.3 Parking

* min req. vs "best" practice

4.3.1 For employee parking, at least one parking space shall be accessible for persons with disabilities.

4.3.2 In addition to the requirement of 4.3.1, where provision has been made within a building, or on the site on which such building is erected, for the parking of more than 50 motor vehicles,

a) at least one parking space per 25 parking spaces (or part thereof) and at least 20 % of the parking spaces at rehabilitation and medical facilities shall be provided for parking of vehicles used by persons with disabilities;

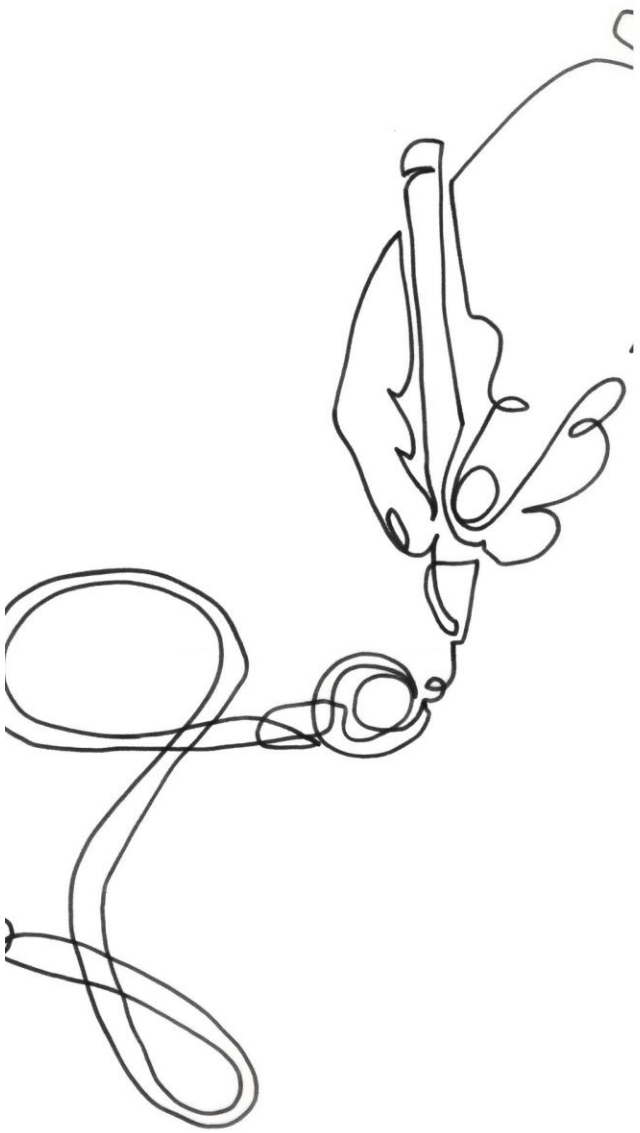
remember your target market

b) the parking spaces provided for vehicles used by persons with disabilities shall be of a suitable length, shall be at least of the dimensions shown in figure 2, and shall be situated on and accessed from a surface that is not steeper than 1:50;

c) any parking space provided for vehicles used by persons with disabilities shall be located within 50 m of an accessible entrance;

d) any parking space provided for vehicles used by persons with disabilities shall be clearly demarcated as being intended for the use of persons with disabilities only;

e) entry and routing to any parking space designated for persons with disabilities shall be provided with a clear height of at least 2,4 m and shall allow for the entry of vehicles suitable for use by wheelchair users, particularly those that have a hoist to carry the wheelchair on top of the car.

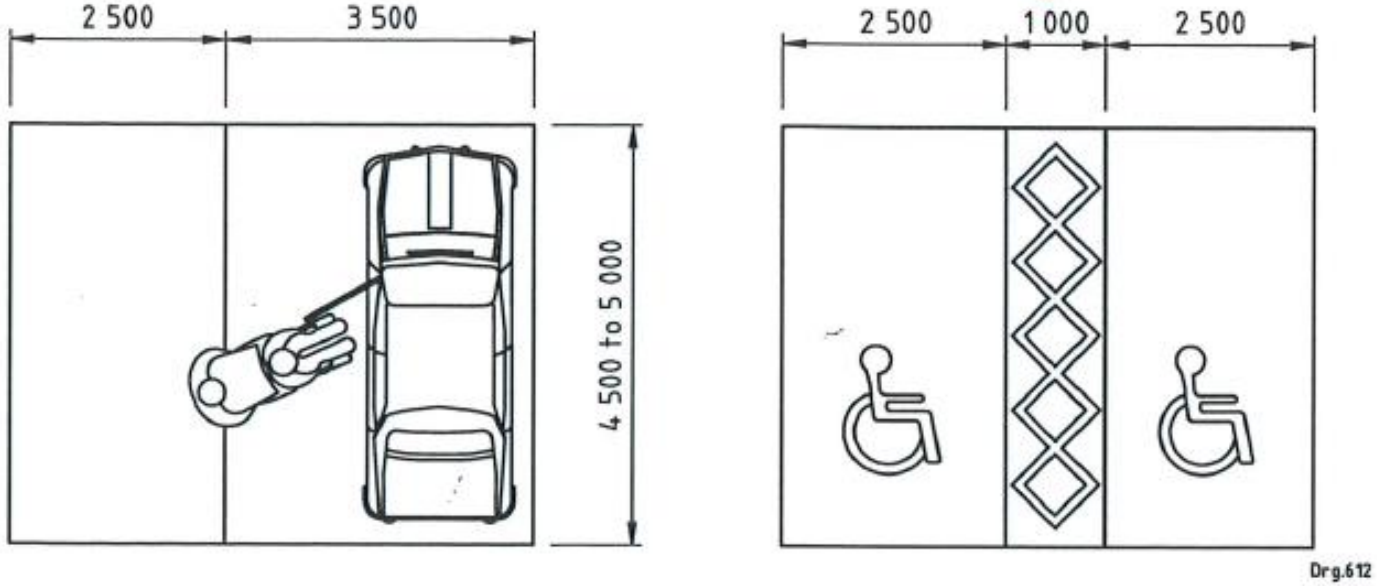


CLINIC COMPONENT #1: WHEELCHAIR PARKING

SANS 10400-S:2011
Edition 3

watch video WHY!

Dimensions in millimetres



a) Full width for wheelchair needed adjacent to standard bay

b) Marked out shared space between two standard bays

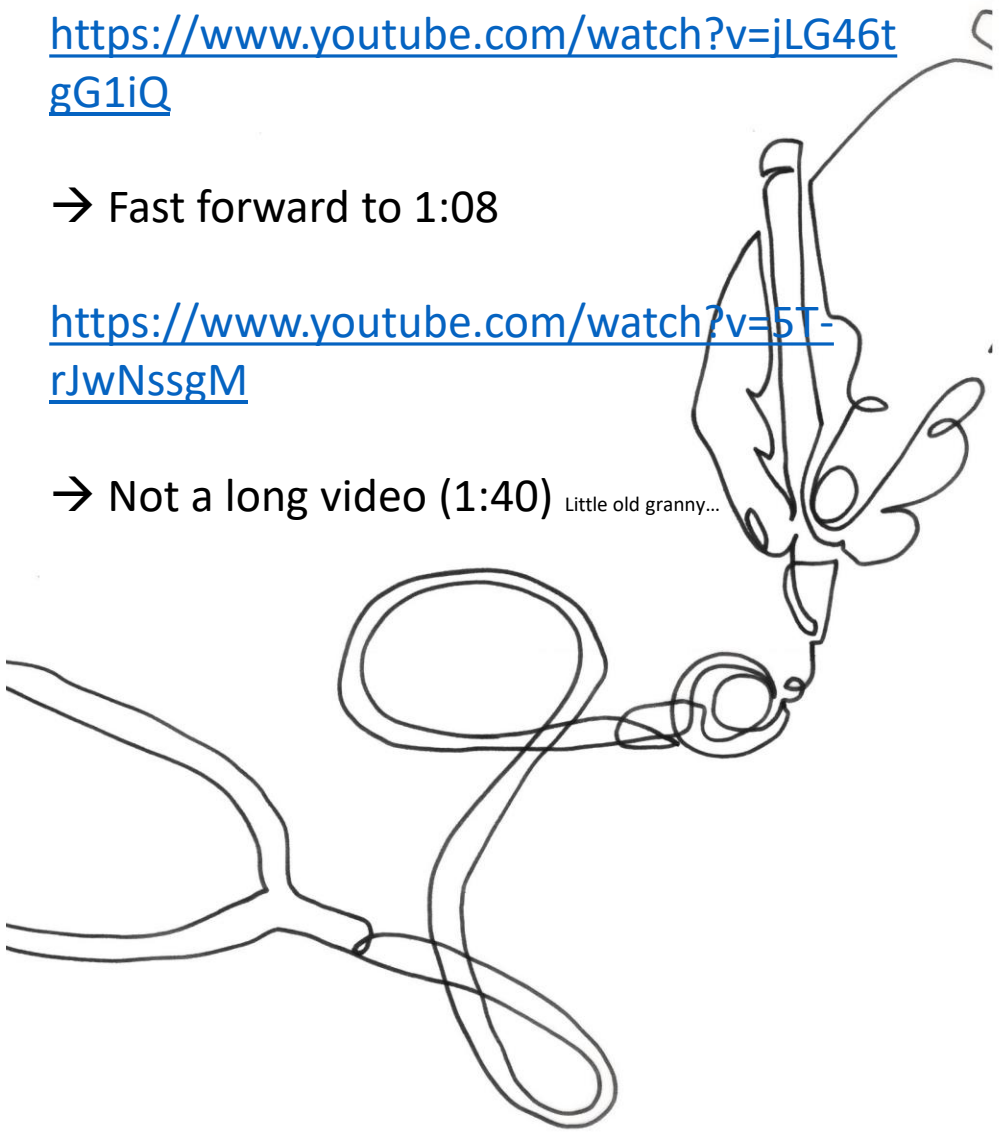
Figure 2 — Accessible parking bays

https://www.youtube.com/watch?v=jLG46tgG1iQ

→ Fast forward to 1:08

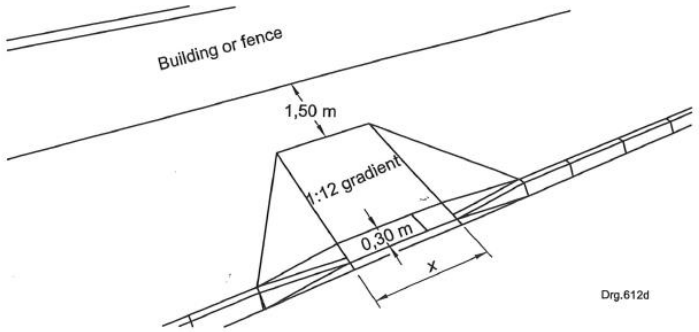
https://www.youtube.com/watch?v=5T-rJwNssgM

→ Not a long video (1:40) Little old granny…

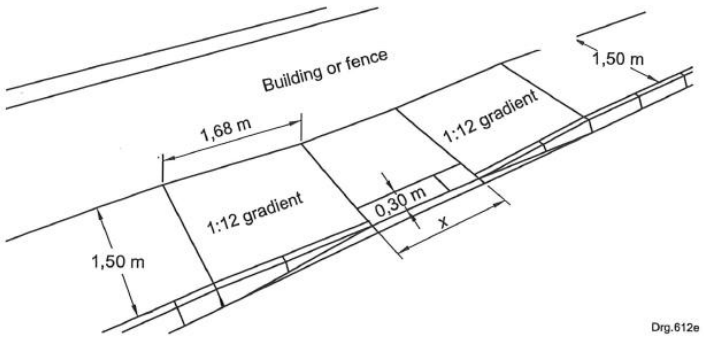


CLINIC COMPONENT #1: DISABLED PARKING BAY

CLINIC COMPONENT #2: RAMP



a) Ramp with kerbed sides (wide footpath)



b) Ramp with narrow footpath

4.4 External and internal circulation

4.4.1 General

4.4.1.1 An accessible route shall form part of an external and internal circulation route.

NOTE The space allowances of this part of SANS 10400 should accommodate the use of self-propelled wheelchairs. The minimum dimensions might need to be increased to accommodate the full range of different types of wheelchair.

4.4.1.2 At least one accessible route shall be provided within the boundary of the site from all public transportation stops, accessible parking spaces, passenger loading zones and public streets and pavements to the accessible building entrance which they serve and the facilities inside the building.

4.4.1.3 There shall be a means of access suitable for use by persons with disabilities from the outside of the building to the ground storey.

4.4.1.4 The clear width of the walking surfaces shall not be less than 900 mm (such as between bollards in parking areas, or between planters and seating) and shall not be reduced by protruding objects. If the clear width is less than 1,5 m, an accessible route shall be provided with passing spaces of 1,5 m × 1,5 m (minimum) at intervals not exceeding 5,0 m, or an intersection of two walking surfaces which provide a T-shaped space.

*engineers!
*Landscapers

4.4.1.5 Each accessible entrance to a building shall have at least one door or doorway in accordance with the requirements of 4.6.1.

4.4.1.6 Revolving doors, revolving gates and turnstiles shall not form part of an accessible route.

*Revolting door

4.4.1.7 Pause areas, with suitable seating, shall be provided adjacent to an accessible route at intervals that do not exceed 25 m.

SANS PART S….
says…
Thou shalt…

4.8 Ramps

NOTE 1 Ramps might be required for use by persons without disabilities, for example, persons pushing trolleys who require ramps as an alternative to stepped access.

NOTE 2 Ramps should only be provided where level access cannot be achieved. Where a ramp is provided, stepped access should normally accompany it for persons with ambulant disabilities who find ramps difficult to use.

4.8.1 Any ramp or series of ramps shall provide a safe, comfortable and convenient route for wheelchair users.

4.8.2 Any ramp provided in terms of this part of SANS 10400 shall

a) have a gradient, measured along the centre line, that is not steeper than 1:12 ;

b) have a clear, trafficable surface not less than 1 100 m wide;

c) have a surface in accordance with 4.5;

d) have a landing at the top and bottom of each ramp of not less than 1,2 m in length (clear of any door swing) and of width not less than that of the ramp;

e) comply with the requirements between landings as given in table 2 and figure 11;

f) have a handrail on both sides of the ramp or, where the width is greater than 2,4 m, a central handrail in accordance with the requirements of 4.10 where the gradient is steeper than 1:15;

g) where ramps in the same direction are used for a vertical rise of more than 600 mm, be staggered by the width of the ramp, in order to prevent a long straight line of ramps (see also 4.8.2(d)).

NOTE Where the total rise contemplated for a series of ramps is greater than 2 m, consideration should be given to alternative means of vertical circulation.

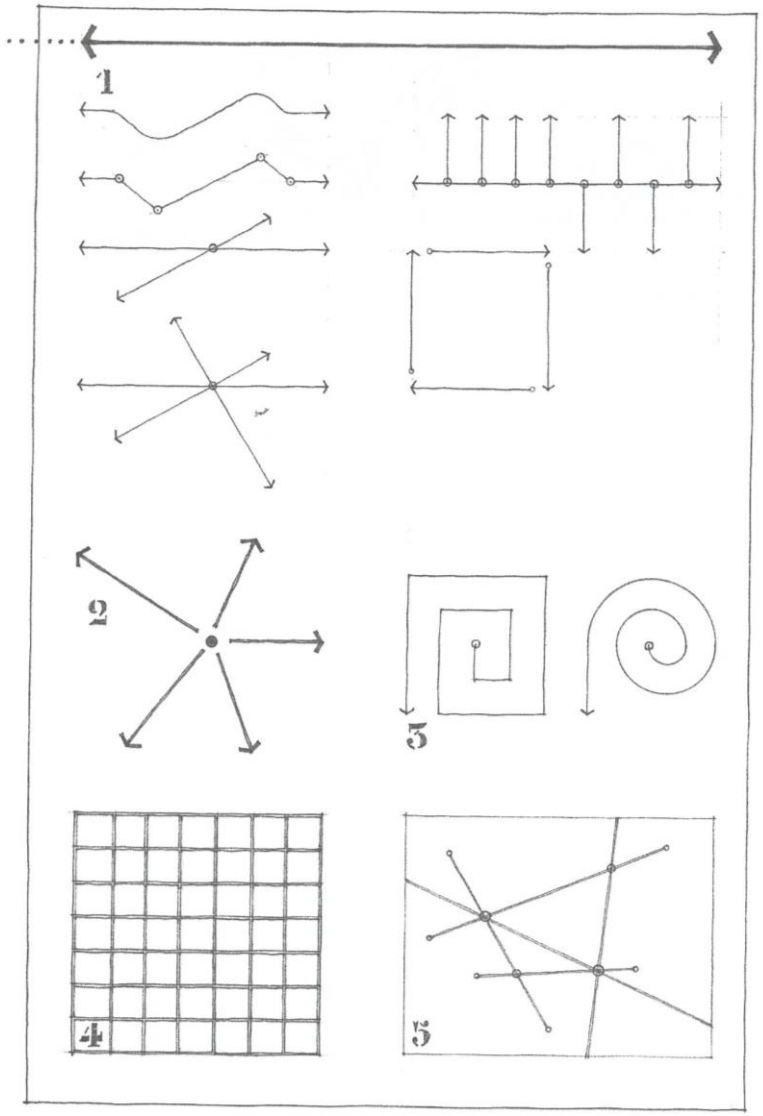
RAMP:
- gradient (1:10)
- length / width (1500)
- surface.
- landing
- railing

CLINIC COMPONENT #2: RAMP INTO THE BUILDING

RAMP & ENTRANCE

4. CONFIGURATION OF THE PATH

Credit to Francis D.K. Ching



All paths of movement are linear in nature.

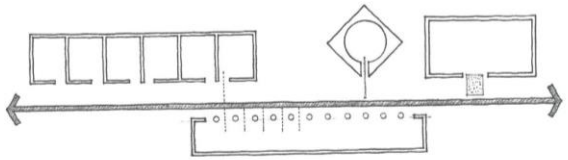
The contour of the path depends on the mode of transportation.

The intersection of paths is always a point of decision-making.

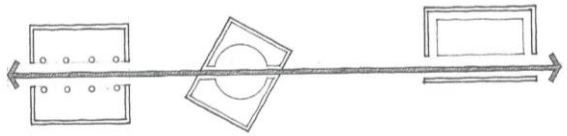
The configuration of a path both influences and is influenced by the organisational pattern of the spaces it links.

5. PATH-SPACE RELATIONSHIP

Credit to Francis D.K. Ching



Pass by Spaces
- The integrity of each space is maintained.
- The configuration of the path is flexible.
- Mediating spaces can be used to link the path with the spaces.



Pass through Spaces
- The path may pass though a space axially, obliquely, or along its edge.
- In cutting through a space, the path creates patterns of rest and movement within it.

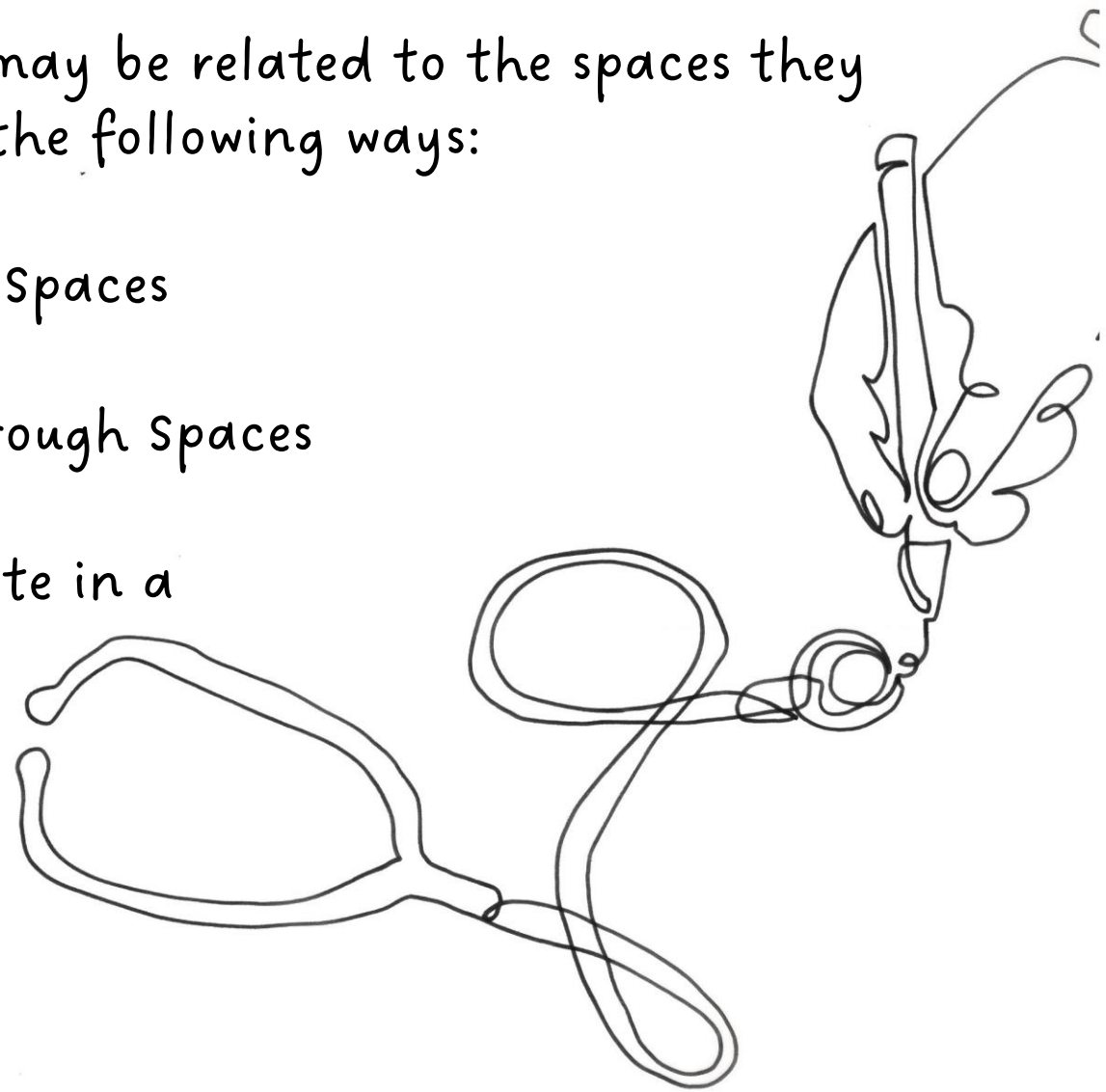
Terminate in a Space
- The location of the space establishes the path.
- This path-space relationship is used to approach and enter functionally or symbolically important spaces.

"Paths may be related to the spaces they link in the following ways:

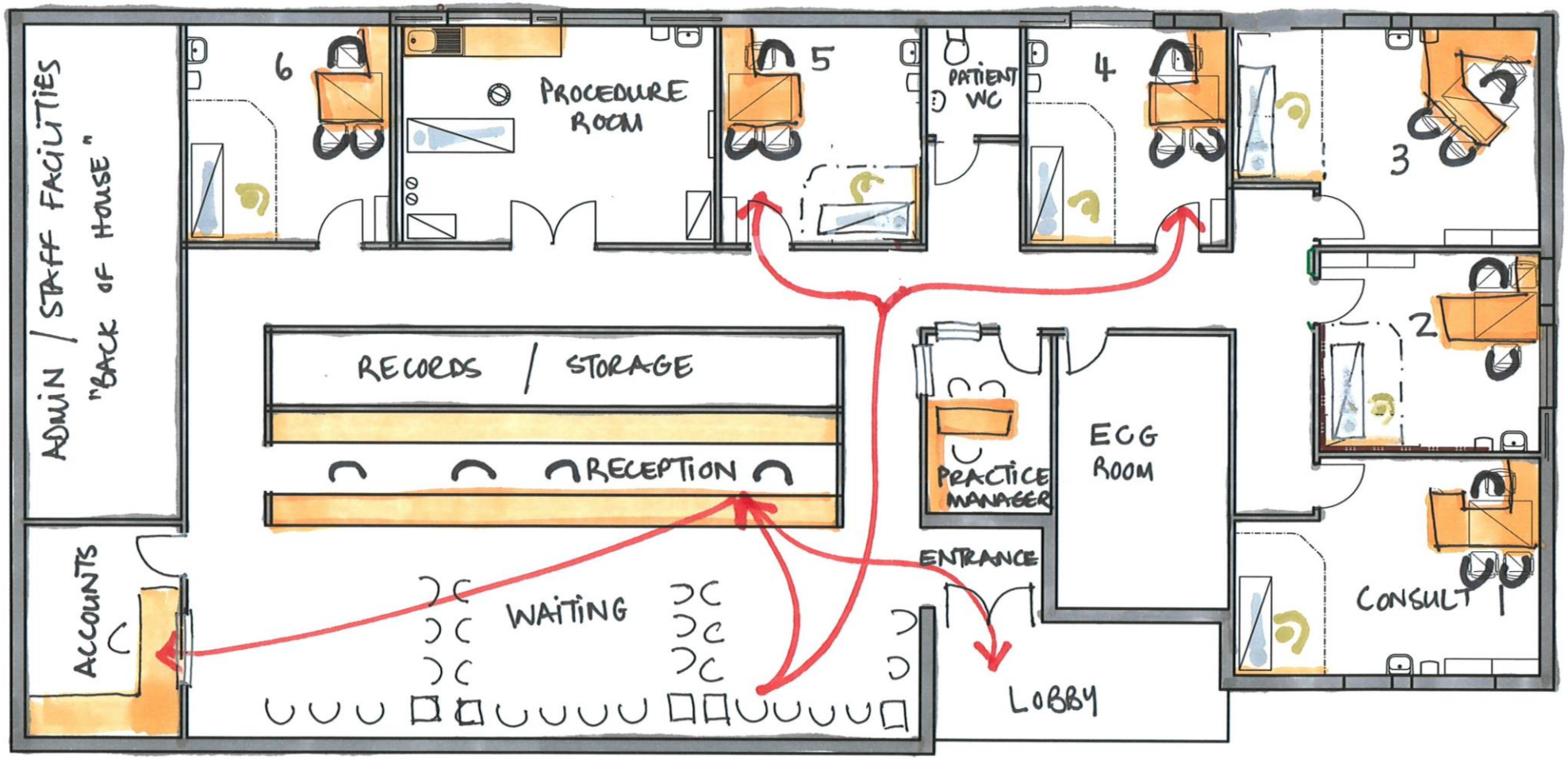
Pass by Spaces

Pass through Spaces

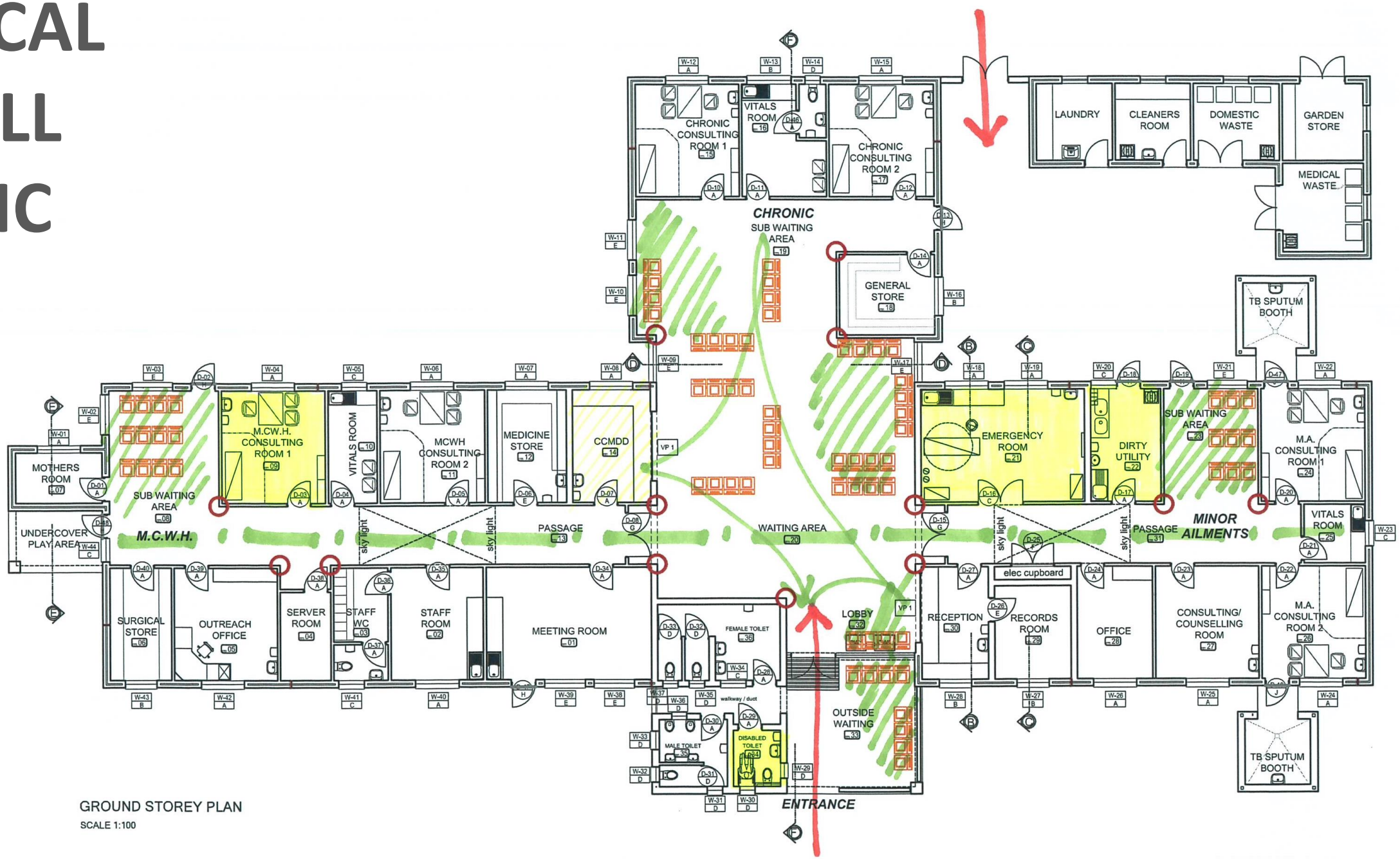
Terminate in a Space"



TYPICAL – private / urban



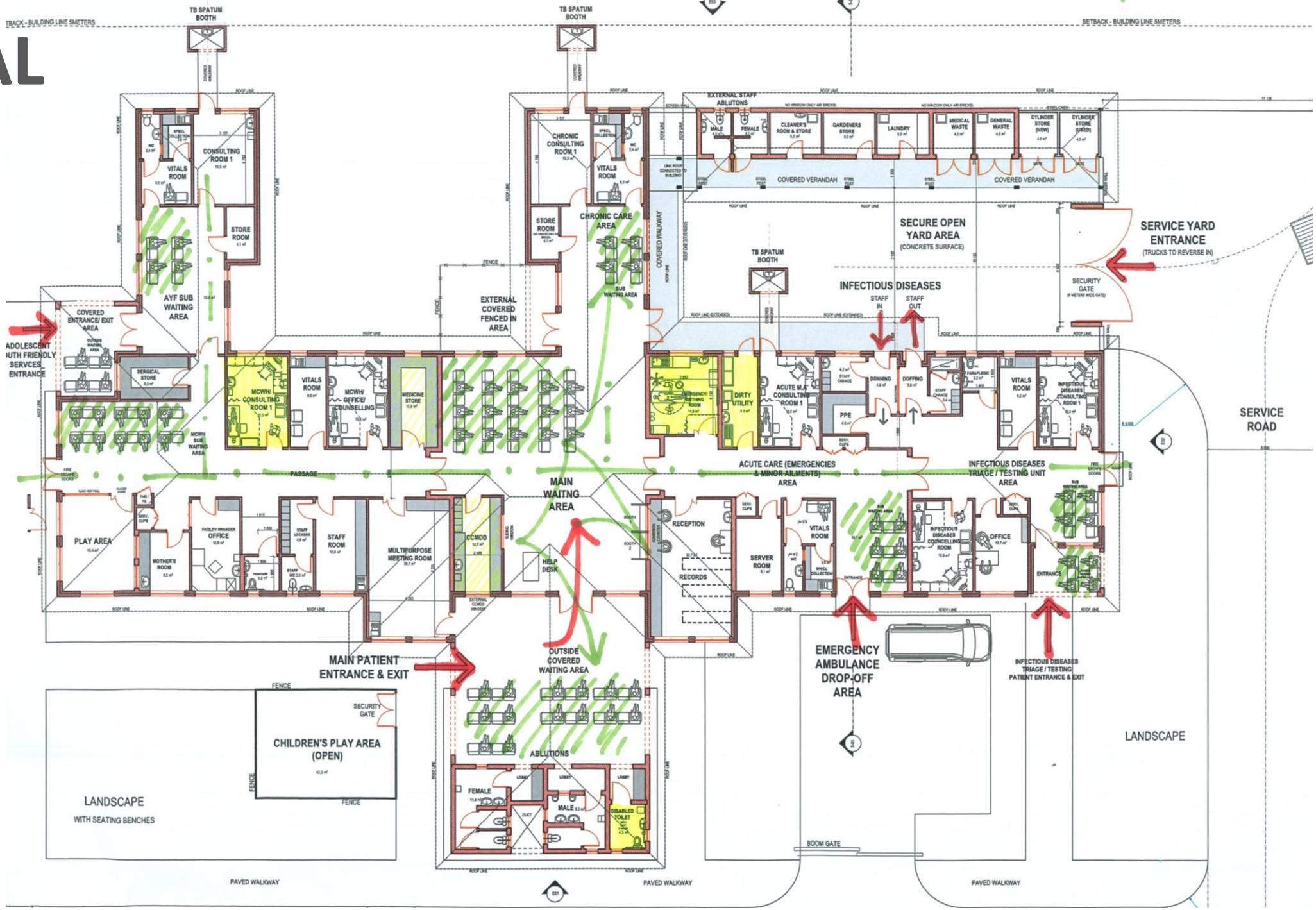
TYPICAL SMALL CLINIC



GROUND STOREY PLAN

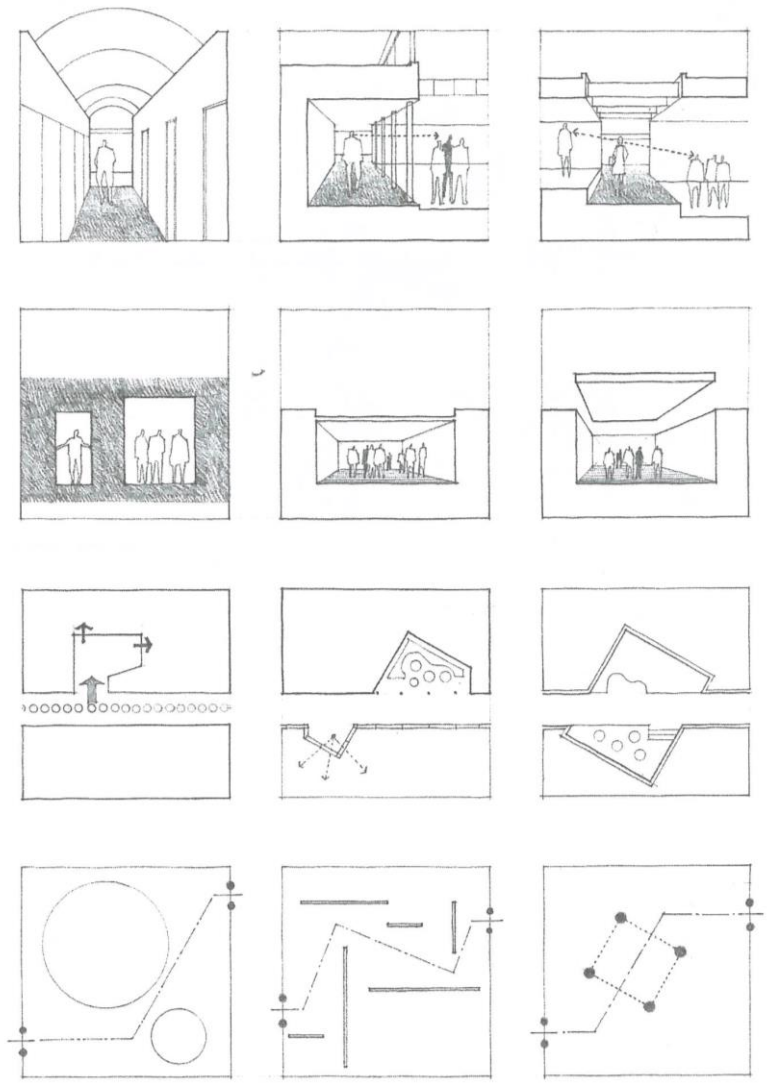
SCALE 1:100

TYPICAL LARGE CLINIC



6. FORM OF CIRCULATION

Credit to Francis D.K. Ching

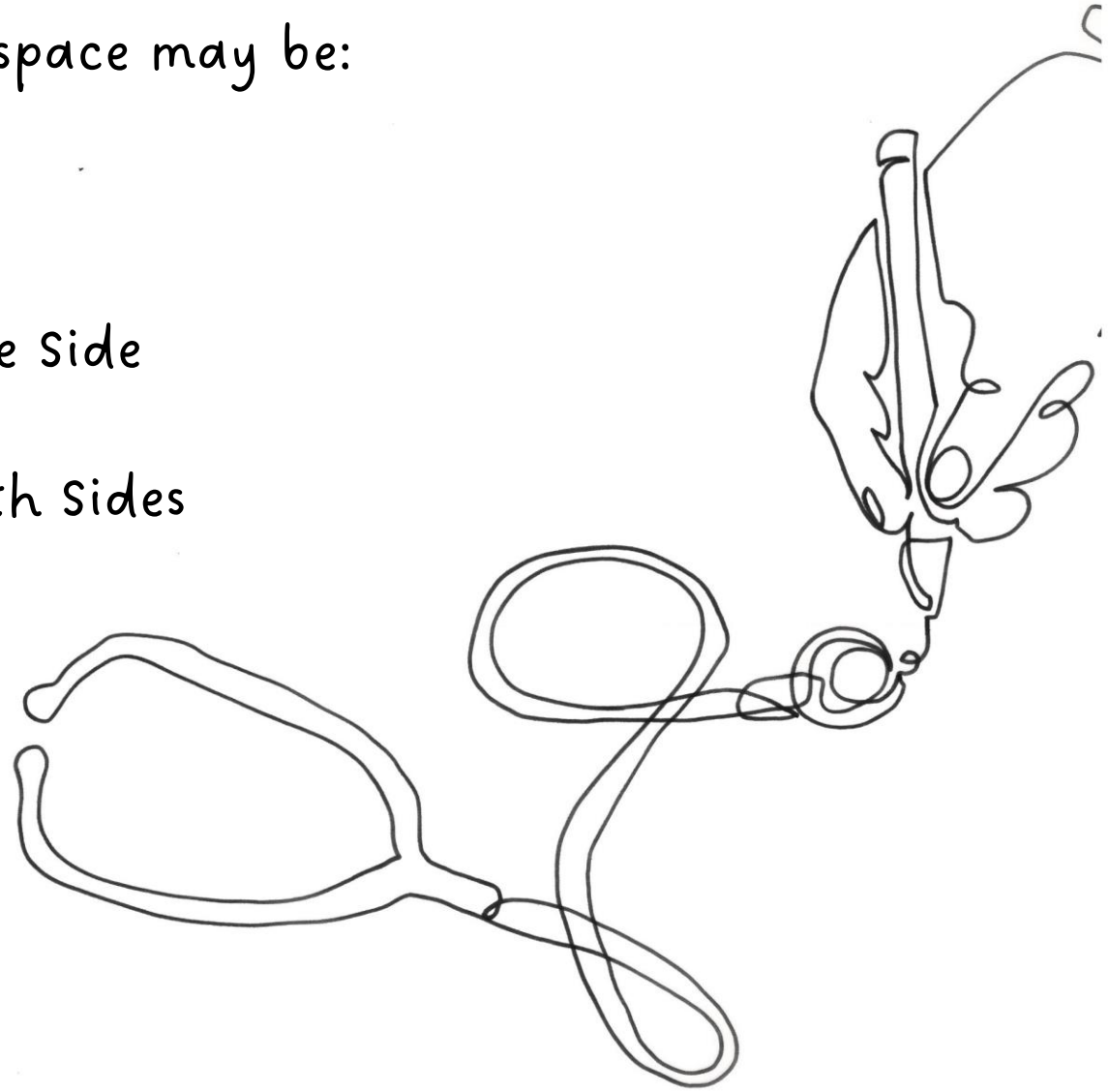


Circulation space may be:

Enclosed

Open on One Side

Open on Both Sides



WALK WAYS

WALKWAYS

LET'S RECAP

CLINIC

PUBLIC vs PRIVATE

Components:

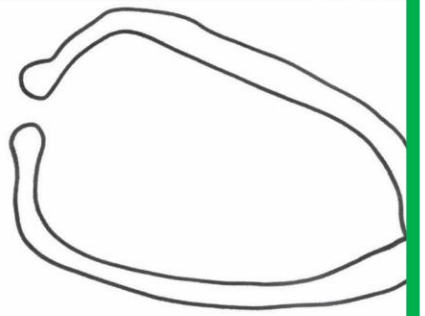
1. Disabled parking bay
2. Ramp and entrance into the building
3. Patient / Assisted toilet
4. Procedure room / Treatment room
5. Consulting room
6. Dirty Utility room / Sluice room

Governed / informed by:

1. R158
2. SANS Part S
3. IUSS documents
4. Design Guide
5. Pharmacy Act

Design Elements:

1. Approach
2. Arrival
3. Entrance
4. "Configuration of the Path" (ie, Circulation)
5. Path / Space Relationship
6. Form of Circulation



Pharmacy:

1. Patient entrance
2. Dispensing counter
3. Private consultation area
4. CCMDD
5. Ward collection
6. Manager's office
7. Secure delivery area
8. Waste area
9. Security
10. Schedule 6 drugs

SANS PART S

c) In any building other than buildings of occupancy class H1, where in terms of SANS 10400-P, a toilet is required, not fewer than one toilet accessible to persons with disabilities shall be provided within every group of toilets provided.

d) Persons with disabilities shall not be required to travel further than persons without disabilities to get to a toilet that is accessible to them (see annex B). Travel distance WHY ?

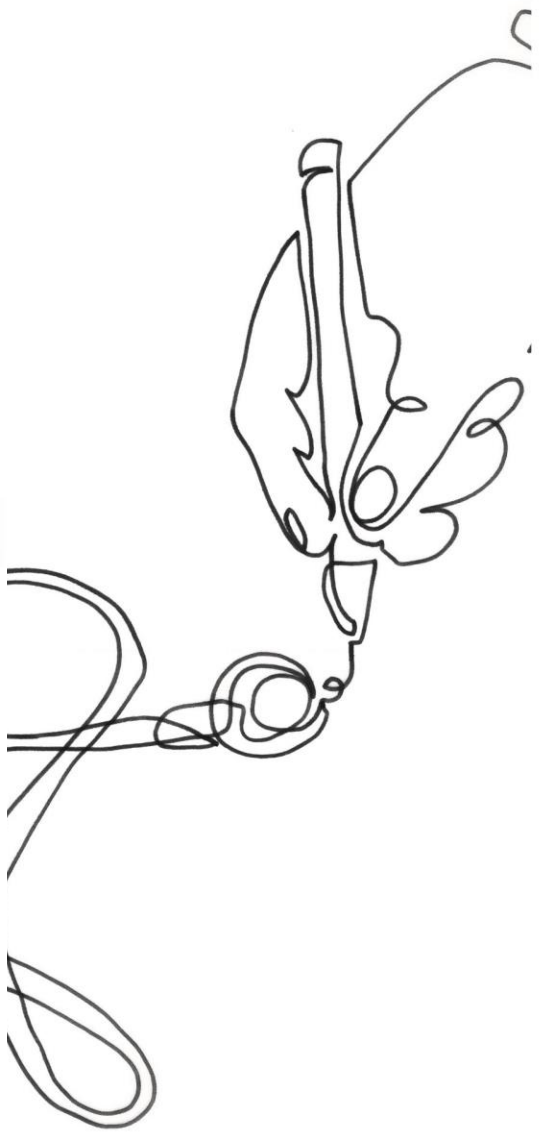
e) Persons with disabilities shall not be required to travel a distance of more than 45 m on the same floor, or 25 m where horizontal and vertical distances are combined, in order to reach a toilet accessible to them, regardless of the number of toilets available to persons without disabilities.

4.12.2 In a wheelchair-accessible toilet, Spend time on this. SEE DRAWING!

a) the door of the compartment that contains the toilet facilities shall open outwards unless a 1,2 m diameter area that is clear of all fittings, fixtures and the line of the door swing is provided. It shall be fitted with a grab rail on the inside and an easy-to-use locking device. The door leaf shall be openable from the outside by the use of a suitable device in the case of an emergency, and such leaf shall be fitted with a suitable means of indicating whether the compartment is occupied;

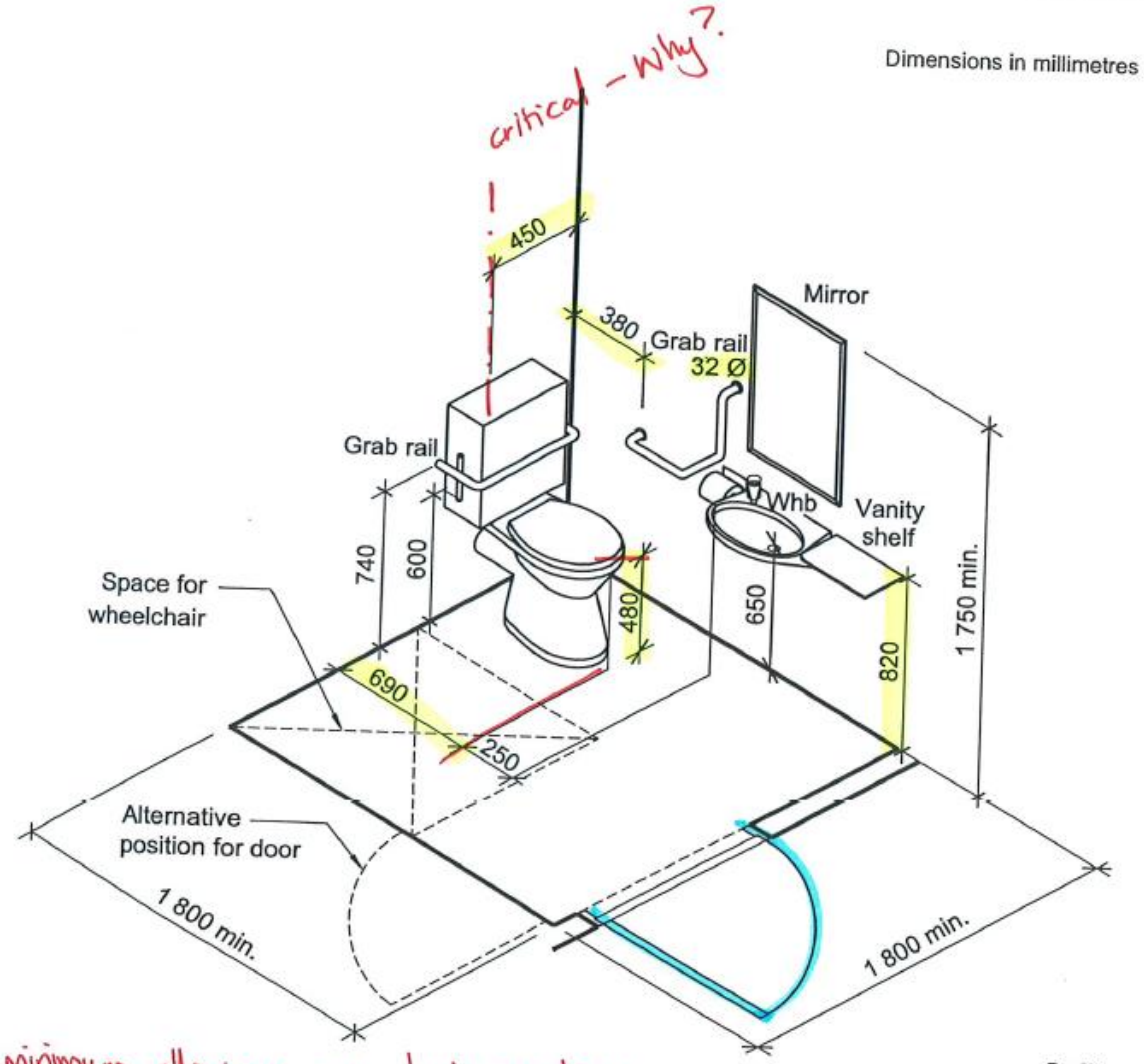
b) the minimum finished wall-to-wall dimensions of the compartment shall be not less than
? 1,8 m × 1,8 m; we recommend 1.8 x 2.1

c) a distance of not less than 450 mm and not more than 500 mm shall be provided between the centre line of the toilet and the nearer side wall of such compartment, and suitable grab rails shall be fixed to such side wall and the rear wall;



SANS 10400-S:2011
Edition 3

Dimensions in millimetres



minimum allowance vs best practice.

Whb = wash hand basin

We recommend 2100 x 1800

Figure D.1 — Layout of a typical facility with a close-coupled toilet system

* Bear in mind care-giver.

SANS PART S…. says… Thou shalt…

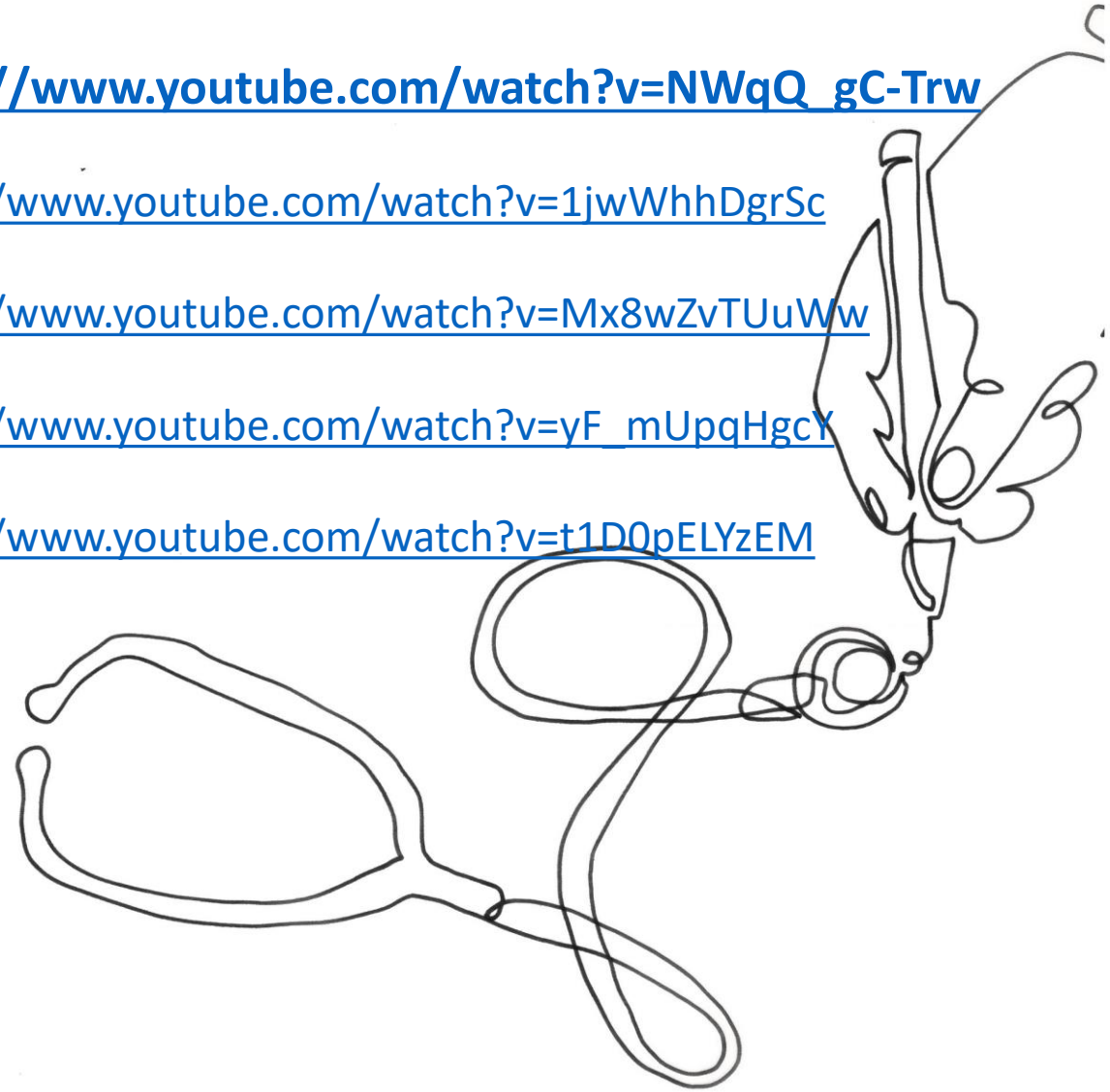
https://www.youtube.com/watch?v=NWqQ_gC-Trw

https://www.youtube.com/watch?v=1jwWhhDgrSc

https://www.youtube.com/watch?v=Mx8wZvTUuWw

https://www.youtube.com/watch?v=yF_mUpqHgcY

https://www.youtube.com/watch?v=t1D0pELYzEM



http://www.kznhealth.gov.za/r158.pdf

5 November 1996

R158

2. DEFINITIONS

Unless otherwise indicated, any word or phrase listed below under definition, shall wherever and whenever used in this regulation, mean the following:

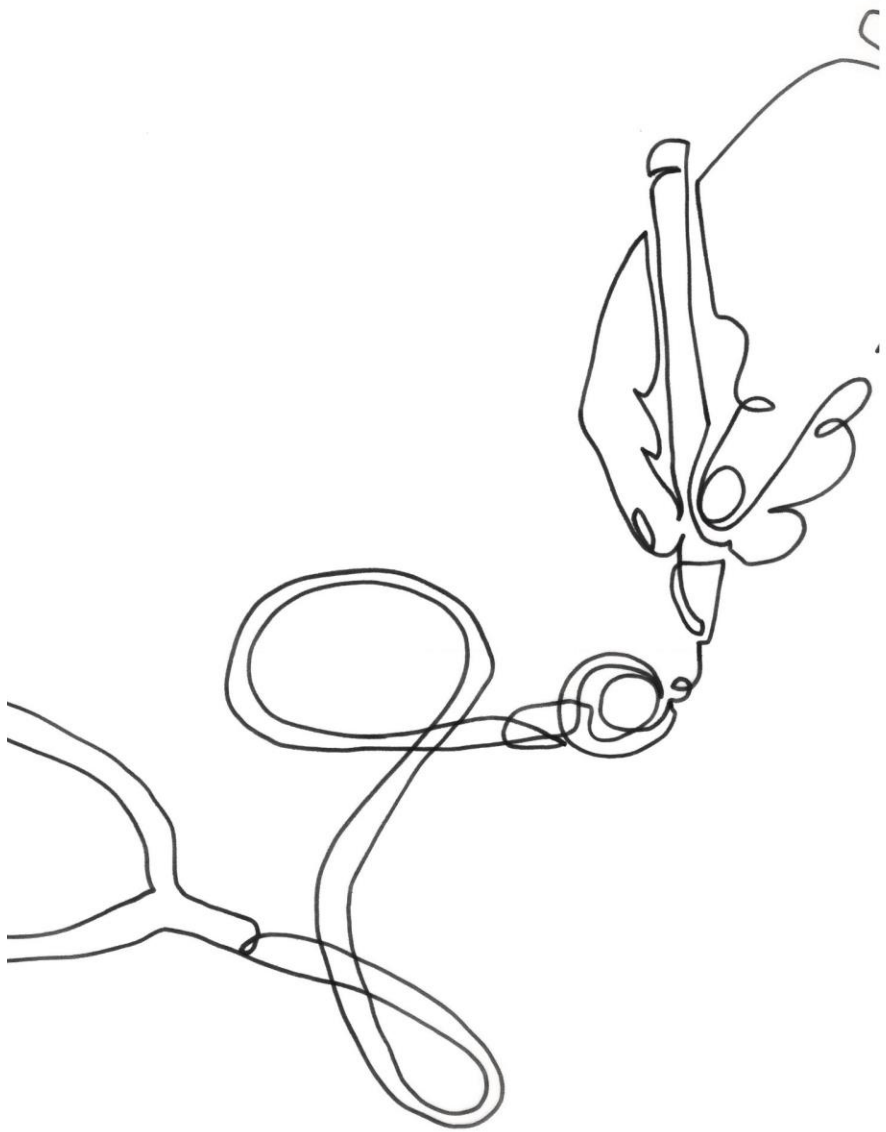
2.1 ADMINISTRATIVE CONTROL AREAS is a room or areas for administrative control, enquiries, admission of patients and storage of records. This must be separate from the nursing unit. Access must not be through the patient care areas.

2.2 CASUALTY UNIT is a unit sometimes only open after hours where urgent service is rendered to members of the public. It will normally not have in-house facilities for management of all major trauma and may not have facilities for management of major medical surgical illness. It must, however, have facilities for stabilisation of such cases prior to transfer.

2.3 CLEANERS' ROOM is a room for the storage of cleaning equipment, the drawing of clean water, the disposal of dirty water, and the washing and drying of cleaning equipment. This room may be combined with the dirty utility room.

2.4 CLEAN UTILITY ROOM is a room for the storage of clean linen, sterilised packs, dressings and pharmaceutical supplies. May be used as a set-up area for ward procedures.

2.5 CLINICAL BASIN is a wash hand basin which can be operated without hand contact. The outlet spout shall be located away from the wall.

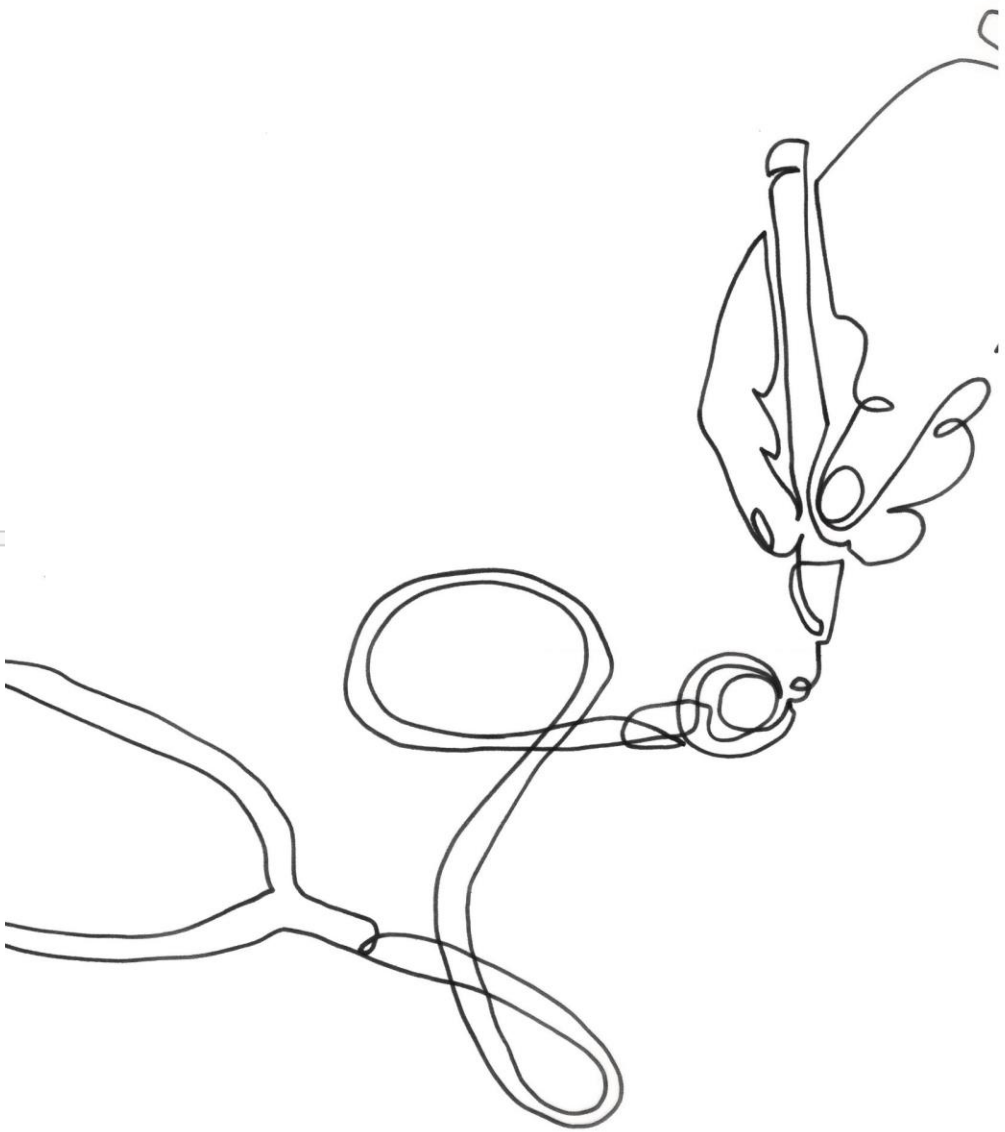


2.8 DIRTY UTILITY ROOM/SLUICE ROOM is a room used for the emptying, cleaning and storage of bedpans, urine bottles and equipment.

2.20 PATIENT ROOM refers to a room where the patient shall be accommodated.

2.21 PROCEDURE ROOM is a room in which certain restricted procedures can be performed without making use of general anaesthetics. This room may be situated outside the operating suite.

R158



HOW MANY TOILETS DO I NEED?

R158 says

5.2.1.9 A disabled ablution facility serving both male and female patients containing a free standing bath or wheelchair shower, and wheel chair toilet (refer NBR) shall be provided on every floor where nursing units are situated.

5.2.1.10 Where several patient rooms share ablution/toilet facilities or where a patient room with its own facilities contains more than eight beds, the following shall be provided:

- separate facilities for male and female patients;
- at least one bath or shower per 12 patients or part of such number. If ablution facilities and toilets are not located in the same area then one wash hand basin per 12 patients or part of such number must be provided in the ablution area.
- At least one toilet per 8 patients or part of such number.
- At least one wash hand basin for every two toilets, unless toilets are located singly in which case one wash hand basin for each toilet is required.

SANS says

Table 1 *(concluded)*

Edition 3.1

1	2
Class of occupancy of building	**Occupancy**
E4	**Health care** Occupancy which is a common place of long term or transient living for a number of unrelated persons consisting of a single unit on its own site who, due to varying degrees of incapacity, are provided with personal care services or are undergoing medical treatment.
F1	**Large shop** Occupancy where merchandise is displ...

Table 4 (*concluded*)

1	2	3
Type of occupancy and population	**Fixtures**	**Exceptions**
G1: Personnel Public and visitors	See table 6 Males: 1 toilet pan, 1 washbasin Females: 1 toilet pan, 1 washbasin	(see above)
H1: Personnel Public and visitors Residents	See table 6 Males: 1 toilet pan, 1 washbasin Females: 1 toilet pan, 1 washbasin See table 5	Any single hotel room or suite or any servant's room with its own facilities need not be provided with separate facilities for males and females. Showers may be substituted for baths in the following maximum ratios: Males: two-thirds of total Females: one-third of total
H2: –	See table 5	
H3, H4 and H5: Within each dwelling unit	1 toilet pan 1 washbasin 1 bath or shower	–
J1, J2, J3 and J4: –	See table 6	–
Educational institutions: Classrooms and lecture rooms (A3 occupancy): Personnel Students and pupils: Peak demand No peak demand Dormitories or other residential accommodation (H2 occupancy): Personnel Students and pupils	 See table 6 See table 7 See table 8 See table 5 See table 5	In primary schools the indicated number of sanitary facilities shall in each case be increased by one. Separate facilities for personnel and students or pupils shall not be required where all facilities are available to both groups Separate facilities for residential accommodation and classrooms or lecture rooms shall not be required where facilities in one are easily available to the other.
E1, E2, E3 and E4	Number to be provided (depends on type and design of institution). Table 5 may be used as a guide.	–
NOTE This table refers to table 6 in most occupancy classifications for the minimum provision to be made for personnel as distinct from that for the public and visitors.		
NOTE The minimum provision of facilities for public and visitors is given in column 2 of this table. In some circumstances this minimum may be considered less than adequate. The view has been taken that rather than be prescriptive, it should be left to the owner to decide what provisions he wishes to make above the minimum to satisfy the public and to safeguard his business interests.		

Table 5 — Provision of sanitary fixtures in residential accommodation

1	2	3	4	5	6	7	8
Population	**Number of sanitary fixtures to be installed**						
	Males				**Females**		
number of people	**Toilet pans**	**Urinals**	**Wash-hand basins**	**Baths**	**Toilet pans**	**Wash-hand basins**	**Baths**
≤ 8	1	1	1	1	2	1	1
≤ 20	1	2	2	2	3	2	2
≤ 40	2	3	3	3	4	3	3
≤ 60	3	4	4	4	6	4	4
≤ 80	4	6	5	5	9	5	5
≤ 100	4	8	6	6	12	6	6
≤ 120	5	9	6	6	14	7	7
≤ 140	5	10	7	7	15	8	8
≤ 180	5	11	8	8	16	8	8
> 180	Add 1 sanitary fixture to the above for every 50 persons						

Table 6 — Provision of sanitary fixtures for personnel

1	2	3	4	5	6
Population[a]	**Number of sanitary fixtures to be installed**				
	Males			**Females**	
number of people	**Toilet pans**	**Urinals**	**Wash-hand basins**	**Toilet pans**	**Wash-hand basins**
≤ 15	1	1	1	2	1
≤ 30	1	2	2	3	2
≤ 60	2	3	3	5	3
≤ 90	3	5	4	7	4
≤ 120	3	6	5	9	5
> 120	Add 1 sanitary fixture to the above for every 100 persons			Add 1 sanitary fixture to the above for every 50 persons	Add 1 sanitary fixture to the above for every 100 persons
NOTE If the facilities provided in a shopping complex can be conveniently situated so that they are available to the personnel and the public and visitors, it might not be necessary to provide separate facilities for the personnel in individual shops. The minimum number of facilities provided should then be the total required in accordance with this table for the total number of personnel in the shops within the complex who make use of these facilities.					

[a] Population is the number of personnel only of a particular sex in an occupancy. The total number of personnel will, in some cases, be the total population obtained from Regulation **A21**, the public and visitors being very few in number. In other cases the proportion of personnel to the public and visitors will have to be established. The total number of personnel in a shopping complex, or in any particular shop, may be taken as 10 % of the total population for such complex or shop calculated in terms of Regulation **A21**.

HOSPITAL DESIGN GUIDE

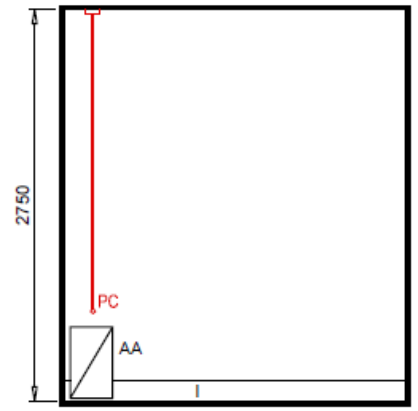
services legend

- 600x600mm LBR recessed fluorescent light
- Over door nurse call light
- Light switch: Essential supply
- Emergency nurse call pull switch
- Nurse call cancel button
- Motion detector
- Nurse call cancel
- Emergency nurse call pull cord
- Smoke detector
- Exhaust air point
- Stainless steel non vision type telescopic door grille. If ommited undercut door
- Stainless steel non vision type telescopic door grille. If ommited undercut door

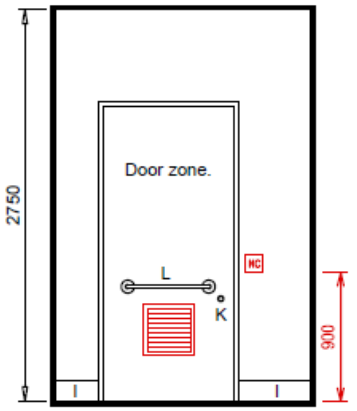
architectural legend

A. Concealed cistern, Wall mounted WC with pneumatic single flush actuator
B. Whb with wrist action taps.
C. Support rails
D. Vandal proof toilet roll holder
E. Paper towel dispenser
F. Soap dispenser
G. Mirror
H. Double clothes hook
I. Skirting
J. Wall mounted bin.
K. Assisted Indicator Lock.
L. Pull handle.
M. Pneumatic assisted toilet flush button optional as per design

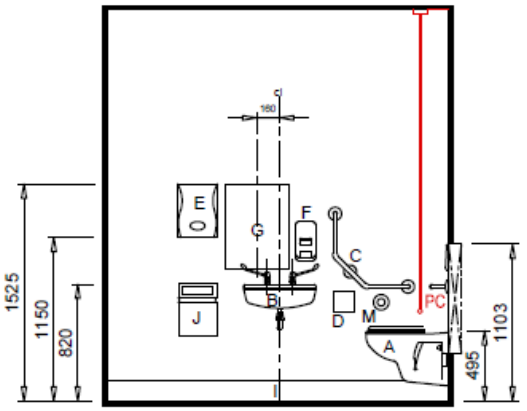
AA. Lidded waste bin.



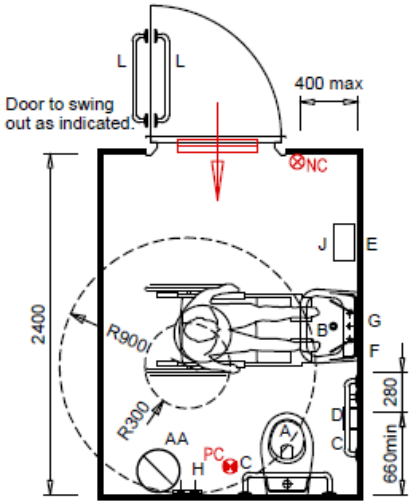
elevation 1



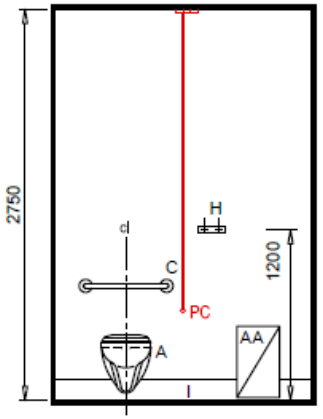
elevation 2



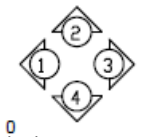
elevation 3



plan



elevation 4



PATIENT TOILET

CLINIC COMPONENT #4: PROCEDURE ROOM

R158

2.21 PROCEDURE ROOM is a room in which certain restricted procedures can be performed without making use of general anaesthetics. This room may be situated outside the operating suite.

12. PROCEDURE ROOM

12.1 If supplied, this room shall be situated outside the demarcated area of the operating suite.

12.2 The minimum size of this room must be 12 m^2.

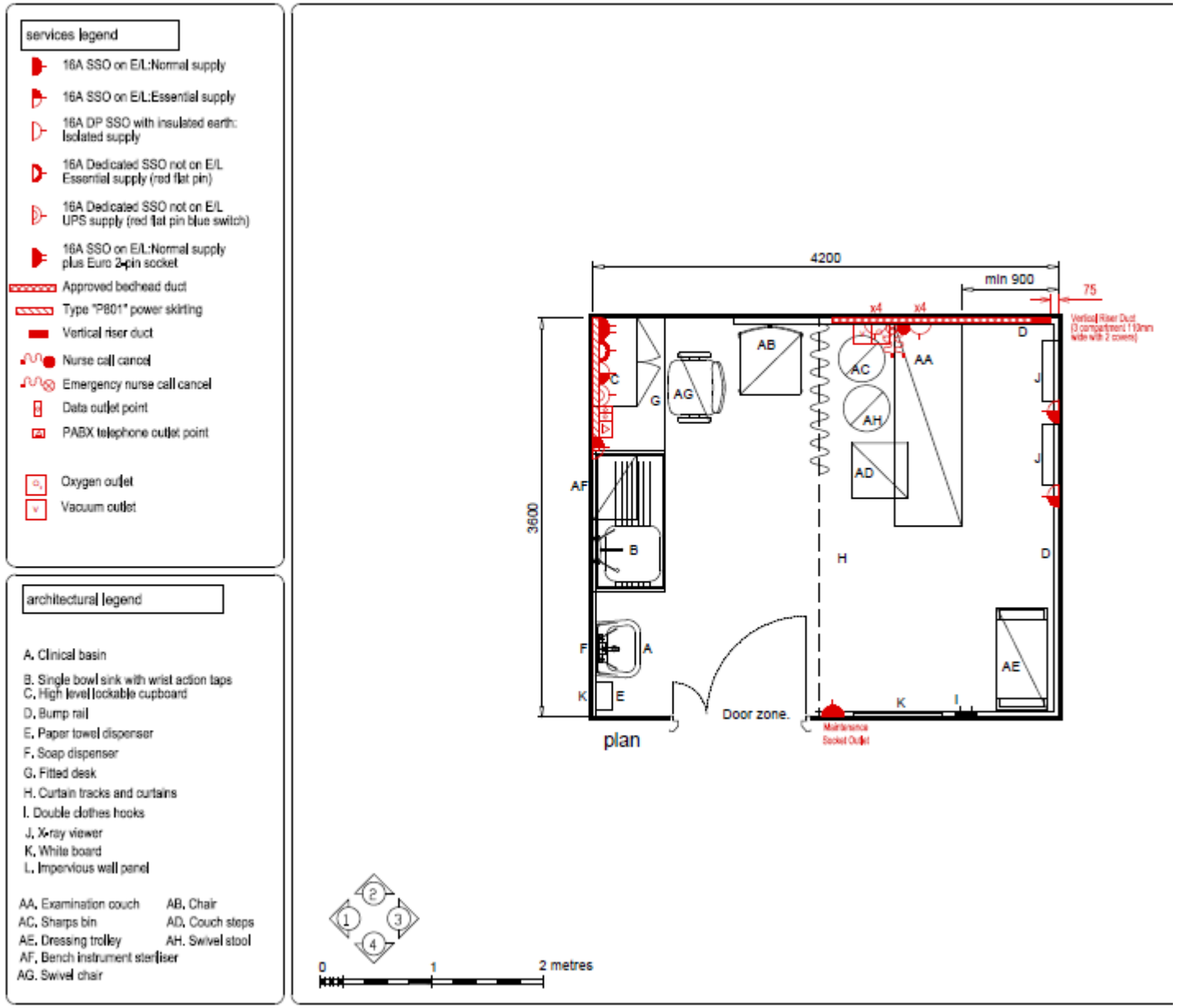
12.3 Oxygen and vacuum must be supplied.

12.4 A minimum of 6 electrical switched socket outlets must be supplied.

12.5 A clinical basin must be provided.

CLINIC COMPONENT #4: PROCEDURE ROOM

HOSPITAL DESIGN GUIDE



PROCEDURE ROOM

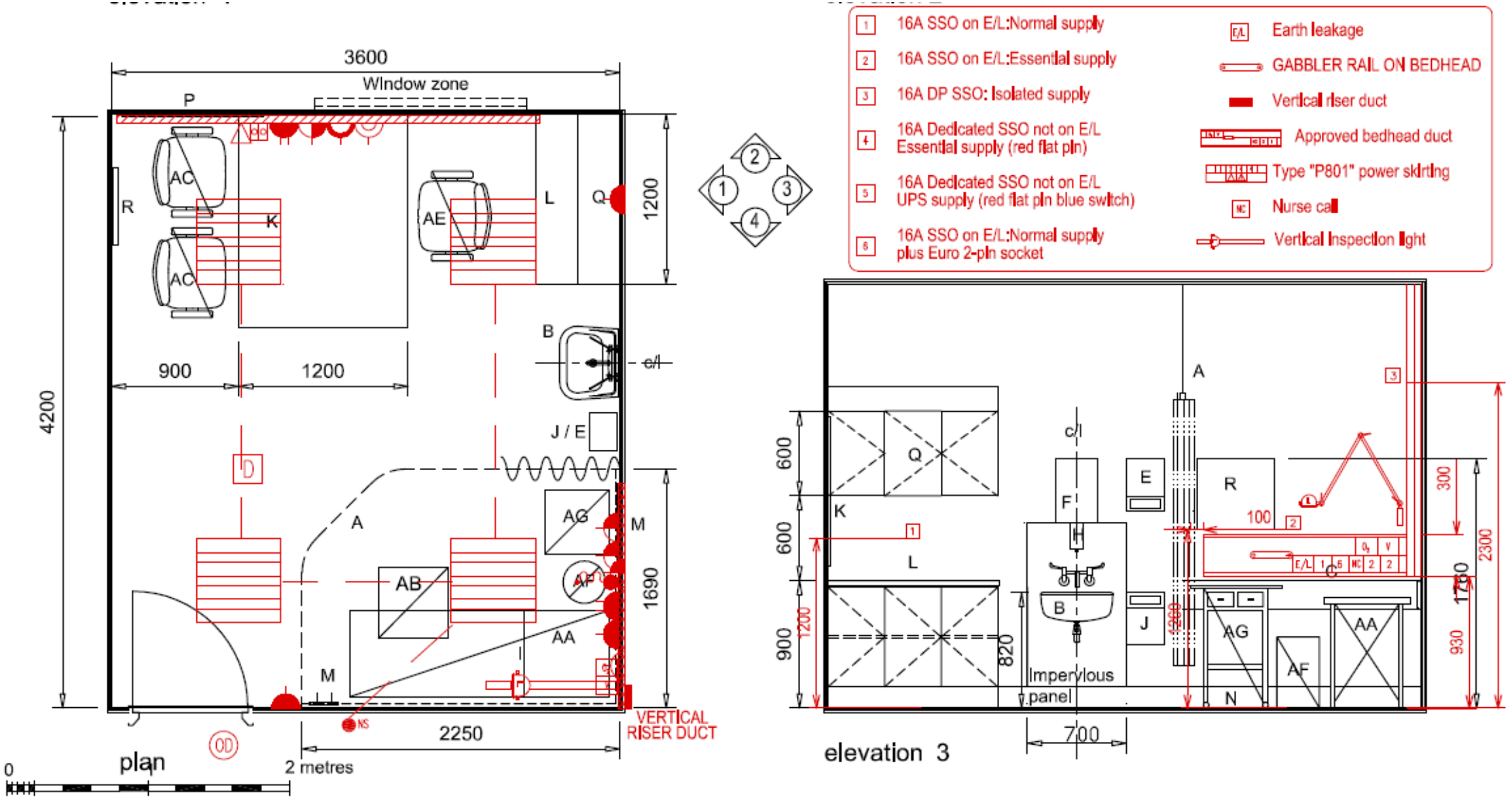
CLINIC COMPONENT #5: CONSULTING ROOM

R158

14.2.1.3 Consulting Room

A facility for private interviews by members of the multi-professional team shall be available in every nursing unit.

CLINIC COMPONENT #5: CONSULTING ROOM



CONSULTING ROOM

CLINIC COMPONENT #6: DIRTY UTILITY ROOM

R158

5.1.7 A dirty utility room/area with a minimum floor area of 5 m^2 or 7 m^2 if used in combination with either a cleaner's room or a soiled linen and waste room, and 9 m^2 if used in combination with both. A wash hand basin, a sluice sink and wall mounted bed pan and urinal racks are minimum requirements. A bed pan washer/disposal unit and a domestic sink may be substituted for the sluice sink;

CLINIC COMPONENT #6: DIRTY UTILITY ROOM

R158

6.4.3 **Service Accommodation**

The following service accommodation must also be provided:

6.4.3.1 Dirty utility room: Must have a minimum size of 5 m².

The following must be provided:

- Sluice sink and slop hopper or combination sluice unit;
- Wash hand basin

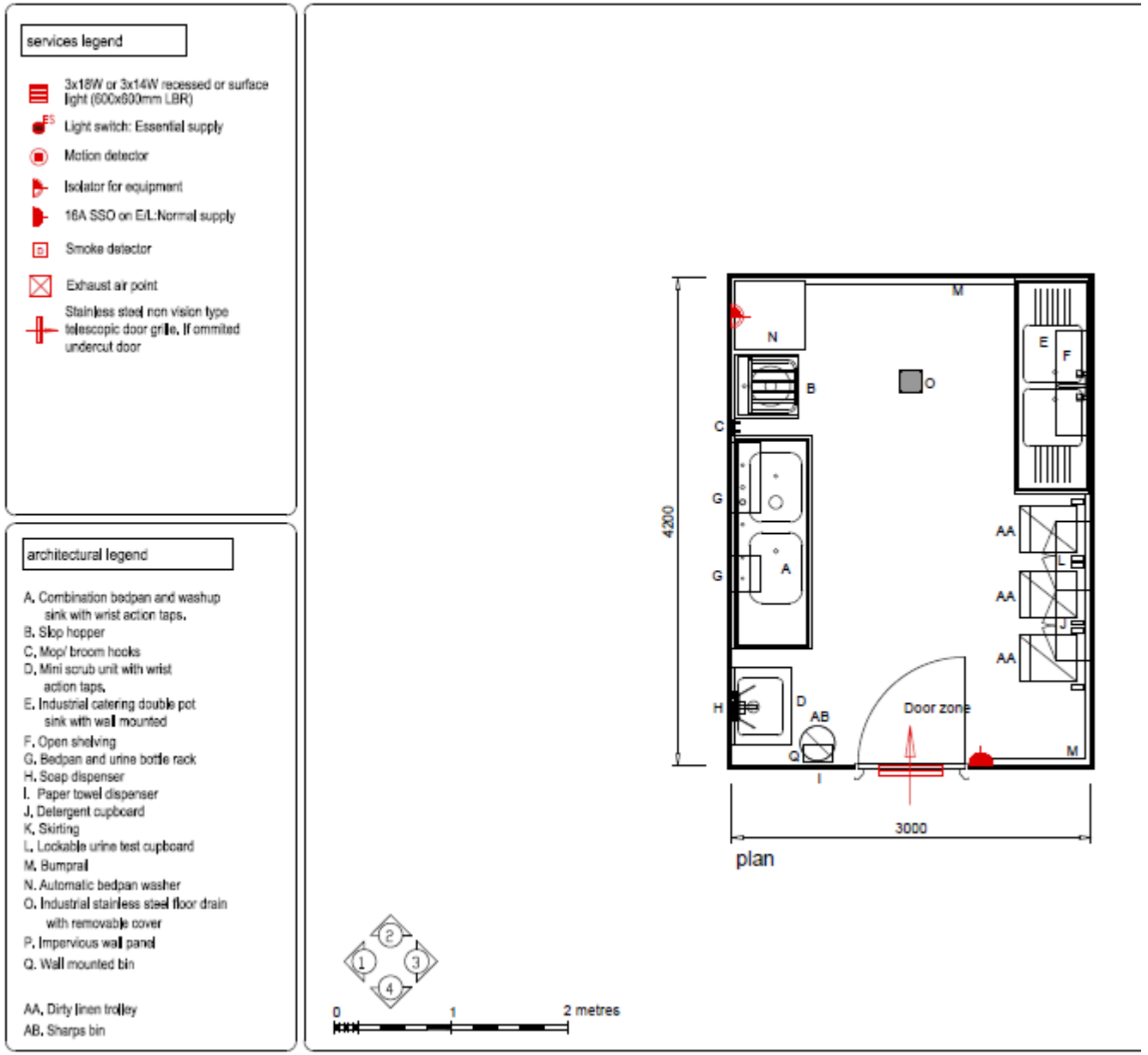
6.4.3.2 If this room is also used for the collection and temporary storage of soiled linen and waste the minimum floor are will be 7 m² or 9 m² if also used for a cleaners' room. Dirty linen containers must be provided.

6.4.3.3 Cleaners' room which may be combined with the dirty utility room, then the area will be 7 m² or 9 m² if also used for soiled linen. The following must be provided:

- Shelves for cleaners' materials
- Low sink with suitable tap height for bucket filling
- Hooks for mops

CLINIC COMPONENT #6: DIRTY UTILITY ROOM

HOSPITAL DESIGN GUIDE



DIRTY UTILITY ROOM

DIRTY UTILITY ROOM

https://www.youtube.com/watch?v=BV72K8j5YSc

https://www.youtube.com/watch?v=zsns2FYC_c8

PHARMACY – R158

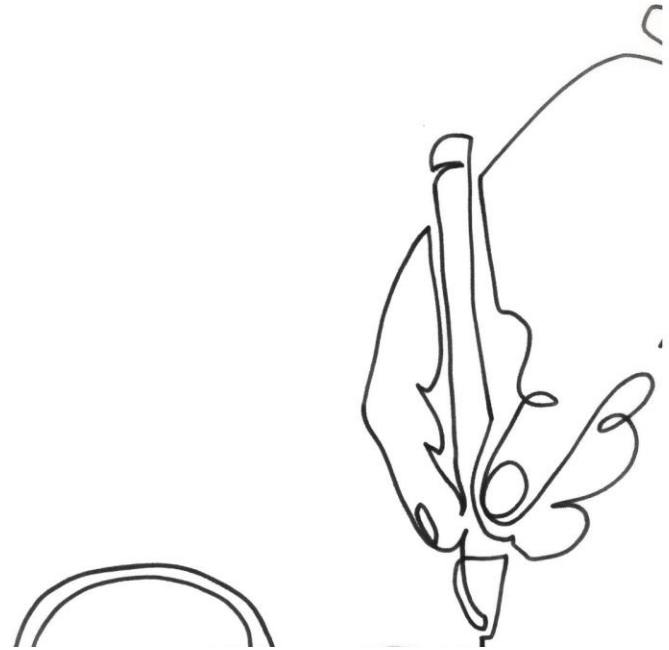
11. PHARMACY

11.1 This pharmacy must be designed to allow for an area where dispensing is done. This area must be easily accessible to wards, operating suites and patients. Access must be allowed to patients in a wheelchair. (See NBR).

11.2 A safe area for storage of drugs must be provided:

- Special attention must be given to security. All windows and doors must be secured.
- This area must have restricted access.
- An outside entrance for deliveries must be provided, again with attention to security.
- Storage of drugs must be done in accordance with manufactu

11.3 Safety and Fire regulations – see NBR



4.1.2.5 The Storage of Pharmaceutical Products

Pharmaceutical products must be stored in accordance with Pharmacy Act 1974 (Act 53 of 1974) as well as the Medicines and Related Substances Control Act 1965 (Act 101 of 1965) or any regulation in terms of the Act. The temperature within the pharmacy must be monitored and recorded on a regular basis. All drugs must be stored in accordance with the manufacturer's recommendations.

If ambient temperatures exceed limitations, air conditioning or refrigeration must be supplied in accordance with the requirements.

THE PHARMACY ACT (Act 53 of 1974)

CHAPTER 2

GUIDELIES FOR PHARMACY PREMISES, FACILITIES AND EQUIPMENT

Jump to Chapter 2, Page21

THE PHARMACY ACT (Act 53 of 1974) *...continued*

2.1 APPEARANCE OF PHARMACY PREMISES

(a) The design and layout of the pharmacy must permit a logical flow of work, effective communication and supervision and ensure effective cleaning and maintenance and must minimise the risk of errors, cross-contamination and anything else which would have an adverse effect on the quality of the products.

(b) All parts of the premises must be maintained in an orderly and tidy condition.

Components:

1. Patient entrance
2. Dispensing counter
3. Private consultation area
4. CCMDD
5. Ward collection
6. Manager's office
7. Secure delivery area
8. Waste area
9. Security
10. Schedule 6 drugs

2.2 SAFETY OF PREMISES

Working conditions must be so arranged as to protect the safety of the public and people working on the premises.

2.3 CONDITION OF PHARMACY PREMISES

(a) The walls, floors, windows, ceiling, woodwork and all other parts of the premises must:

(i) be kept clean; and

(ii) be kept in such good order, repair and condition as to enable them to be effectively cleaned and to prevent, as far as is reasonably practicable, any risk of infestation.

(b) Walls must be finished in a smooth, impervious, washable material.

2.4 CONSTRUCTION OF PREMISES

Construction of the premises should ensure that the entry of insects, animals (especially rodents) or birds is prevented and that the premises can be easily cleaned and disinfected.

2.5 ENVIRONMENT

(a) Storage of thermolabile medicines must be in accordance with the storage instructions of the manufacturer in a refrigerator that is regularly calibrated.

(b) Products must be protected from the adverse effects of light, freezing or other temperature extremes and dampness.

(c) Levels of heat, light, noise, ventilation, etc., must exert no adverse effects on personnel.

(d) All parts of the premises must have suitable and effective means of heating, lighting and ventilation. If windows are capable of being opened, they must be securely locked when the pharmacy is closed.

(e) Background music or other broadcasts in the pharmacy must not be played at such a volume so as to cause distraction.

THE PHARMACY ACT (Act 53 of 1974) *...continued*

2.7 STORAGE AREAS

(a) Storage areas should have sufficient shelving constructed from an impervious, washable material for the keeping of medicines above floor level.

(b) Storage areas for pharmaceuticals must be self-contained and secure.

(c) Storage areas should be large enough to allow orderly arrangement of stock and proper stock rotation.

2.8 SECURITY

(a) Careful consideration needs to be given to the overall security of the pharmacy. It must be lockable and as far as possible exclude any unauthorised entry.

(b) Pharmacists must ensure that unauthorised persons cannot by lawful means obtain access to the pharmacy outside of normal working hour.

(c) A security policy must be implemented which is designed to ensure as far as is reasonably practicable the safety of both staff and medicines, and should take account of local crime prevention advice.

(d) A health and safety procedure must be read and signed by all staff.

(e) Fire extinguishers must be checked regularly and all staff must know the fire procedure.

(f) Electrical equipment must be regularly maintained.

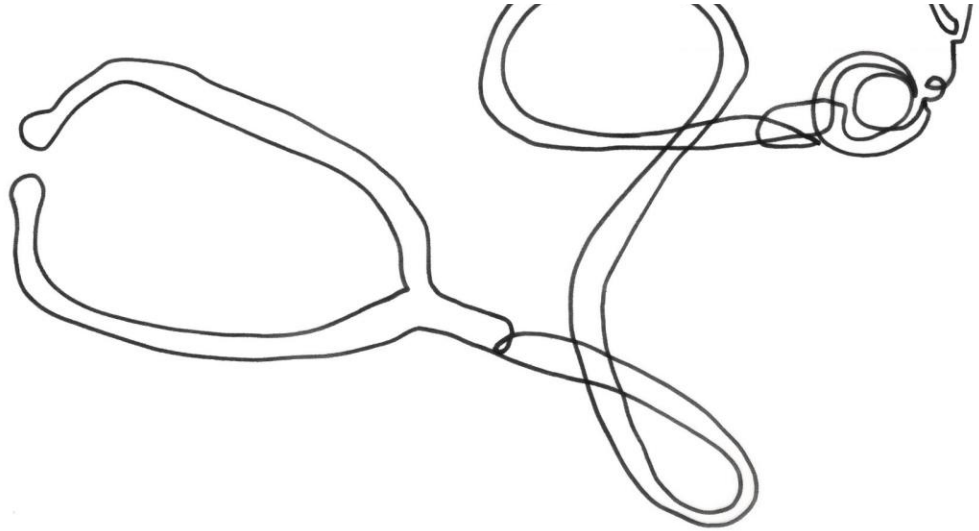
2.9 CONTROL OF ACCESS TO PHARMACY PREMISES

(a) The responsible pharmacist of a pharmacy must ensure that every key, keycard or other device, or the combination of any device, which allows access to a pharmacy when it is locked, is kept only on his/her person or the person of another pharmacist at all times.

(b) Schedule 1 to 6 substances shall be inaccessible to the public and shall not be supplied during the absence of the pharmacist.

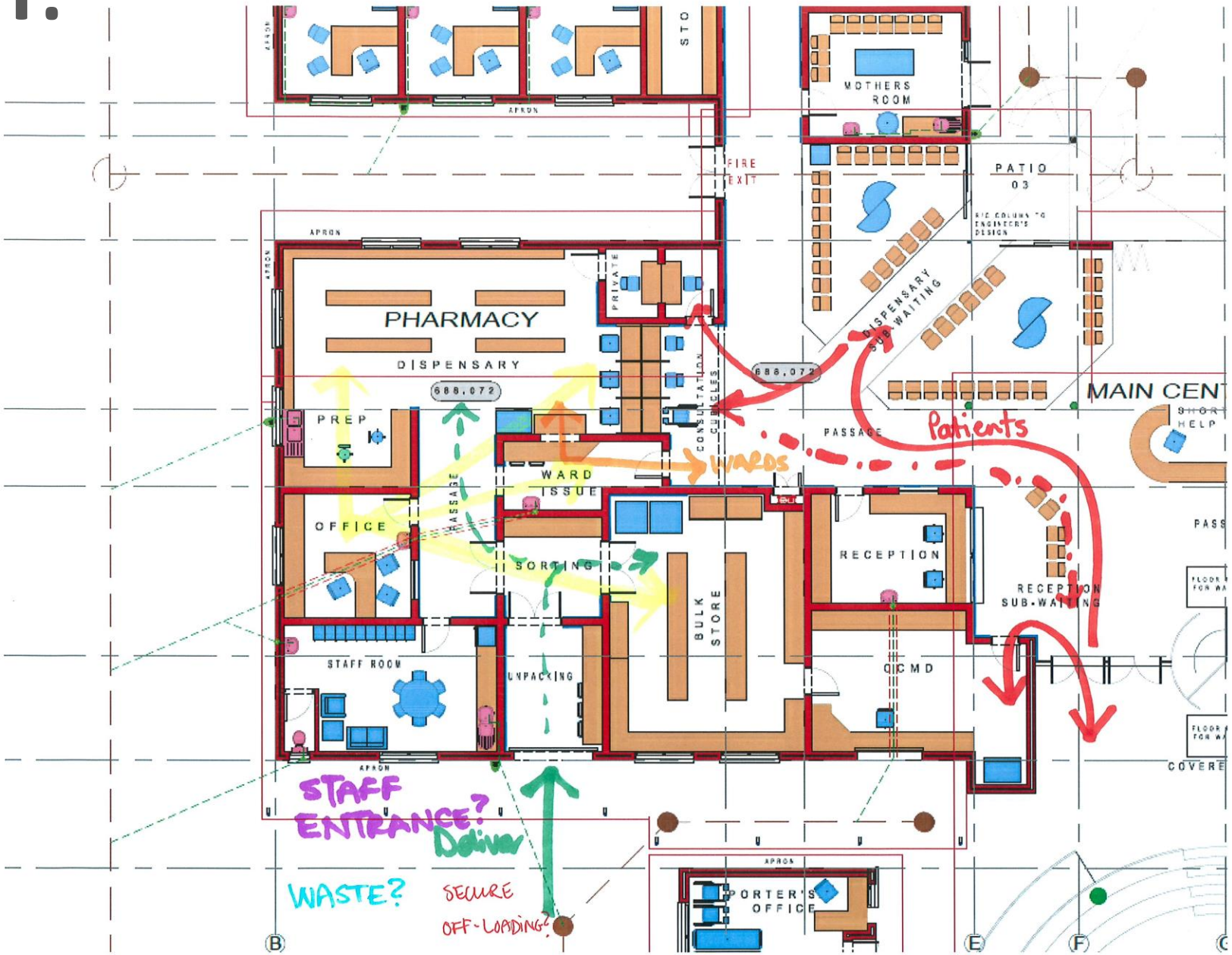
(c) Control of access to pharmacy premises must be of such a nature that only pharmacists or pharmacist interns and pharmacist's assistants under the direct personal supervision of a pharmacist, may handle medicine or scheduled substances in a pharmacy.

(d) Every pharmacy must, except in such circumstances and subject to such conditions as described in section 2 of Chapter 4 of these Good Pharmacy



PHARMACY:

EXAMPLE #1



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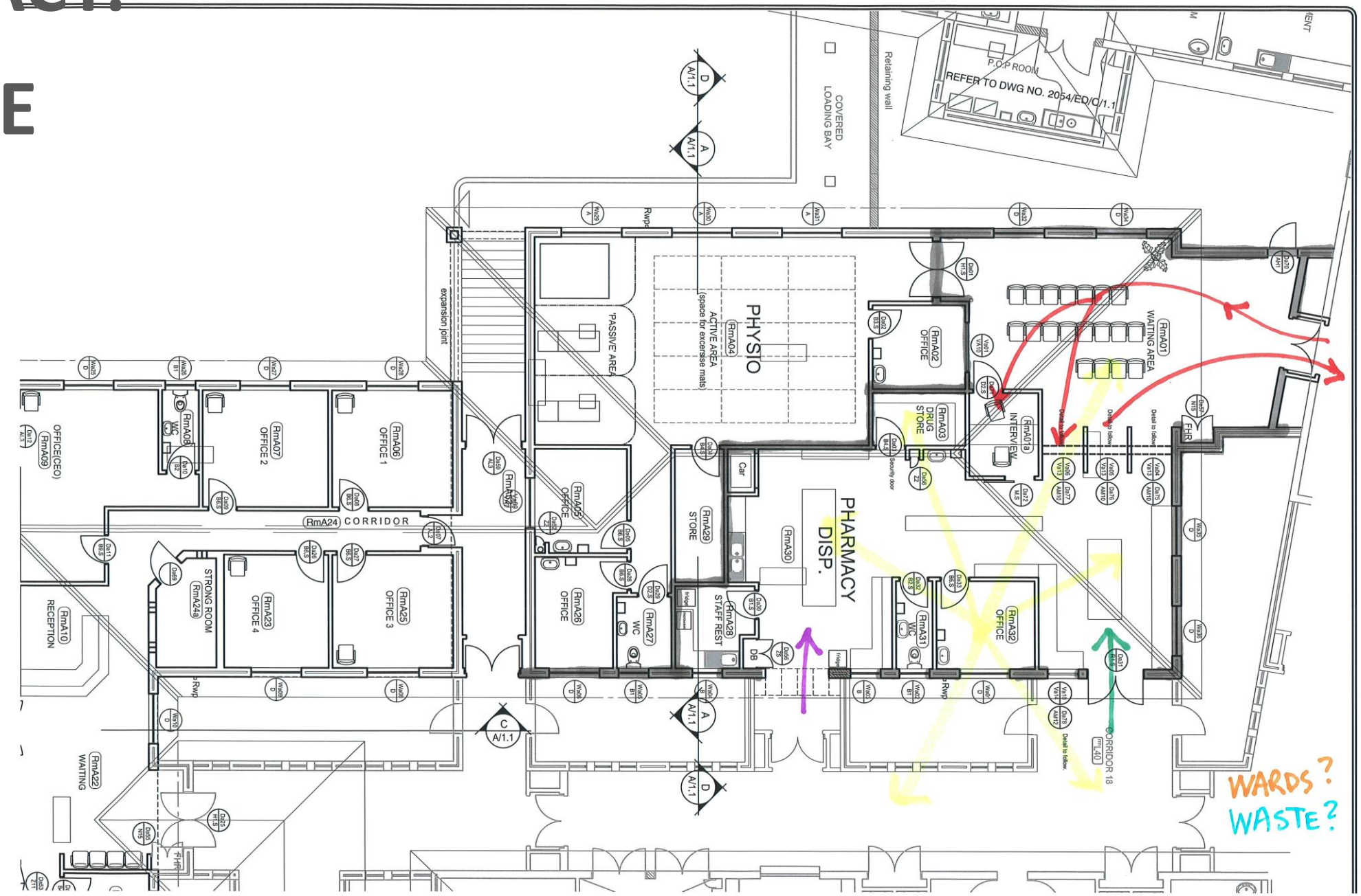
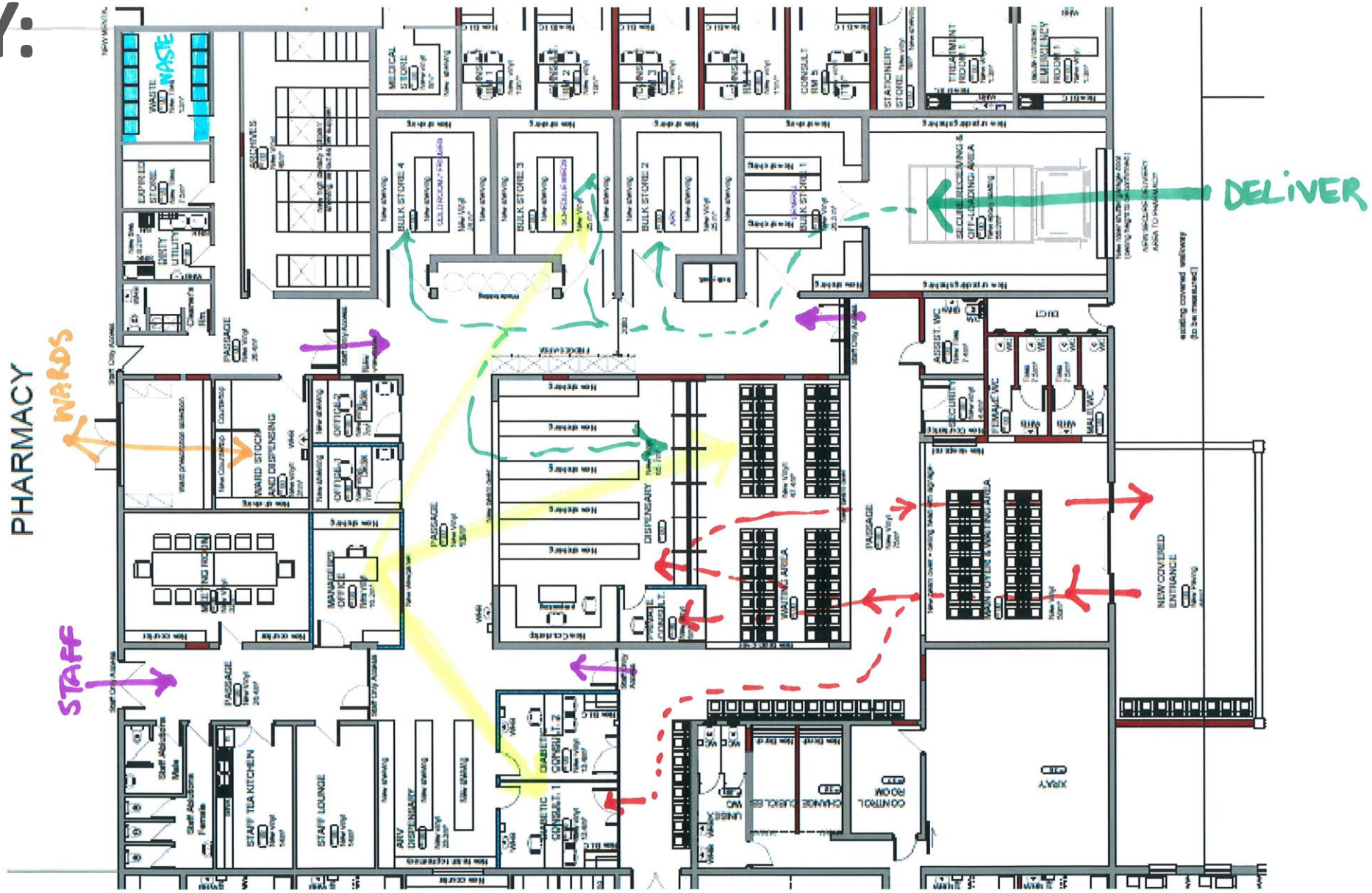


PHARMACY:

EXAMPLE #3



PHARMACY:

EXAMPLE

#4