

**2.4-2.4.3.2** Furniture selected shall have rounded and eased edges.

**2.4-2.4.3.3** Furniture selected shall be upholstered with impervious materials in locations where infection control and incontinence are a concern.

### **2.4-2.4.4 Window Treatments and Privacy Curtains**

**2.4-2.4.4.1** Privacy curtains and window treatments shall comply with NFPA 101.

**2.4-2.4.4.2** Window treatments shall be provided in resident areas to diffuse the daylight and control glare.

**2.4-2.4.4.3** Window treatments provided in resident accommodations shall be designed for operation by the resident.

**2.4-2.4.4.4** Operational requirements and the type of care provided shall dictate the need for privacy curtains.

### **APPENDIX (continued)**

- Seats should be firm, with seat depth and configuration that allow residents, participants, and outpatients to exit seating comfortably and safely without assistance.
- The angle of the seat and seat back should not hinder rising nor cause shoulder-forward or hip-forward slumping or sliding out of the seat.
- d. Space beneath a seat front should allow a user to pull back his or her heels far enough under the seat to assist with rising.
- e. Furniture should have eased or rounded edges and corners of no less than 3/8 inch radius to minimize risk of resident patient injuries.
- f. Furniture used in resident areas should be sturdy and stable to safely support resident transfer and weight-bearing requirements.
- g. Rolling furniture or equipment in resident areas should have locking rollers/casters for safety. However, seating that has casters on only two legs to allow for movement on carpeted flooring surfaces should not have locking casters.
- h. Chairs that provide opportunities to rock without compromising the ability to exit safely (e.g., with stable arm fronts) should be considered for their relaxation and exercise benefits.