

1.2-4.2 Users

The physical environment shall support the operation of the delivery of care model and the desired experience for residents, family members, visitors, and staff.

*1.2-4.3 Systems Design

The physical environment shall support organizational, technological, and building systems designed in response to the functional program, including the delivery of the care model and operational services.

*1.2-4.4 Layout/Operational Planning

The layout and design of the physical environment shall enhance operational efficiencies and the satisfaction of residents, families, and staff.

1.2-4.5 Physical Environment Elements

A1.2-4.3 Systems design. Information technology, medical technology, and/or staff use and cross training are issues that should be addressed in relation to the environment of care components.

A1.2-4.4 Layout/operational planning. Criteria for evaluation of the layouts should be consistent with the delivery of care model to allow each optional layout and operational plan to be reviewed in context.

A1.2-4.5.1 Light. Provision of natural light should be considered wherever possible in the design of the physical environment.

- a. Access to natural light should be provided no farther than 50 feet from any resident activity area, visitor space, or staff work area. To the extent possible, the source of such natural light should also provide opportunities for exterior views.
- b. Window sill height should not exceed 3 feet (.91 meter) above the floor and should be above grade.
- c. Access to natural light should be available without entering private spaces (i.e., staff should not have to enter a resident room to have access to natural light). Examples of such access include windows at the ends of corridors, clerestory windows in corridors, skylights into deep areas of the building in highly traveled areas, transoms, and door sidelights.
- d. In residential health, care, and support occupancies, dining areas, lounges, and activity areas should be designed to include natural light.

A1.2-4.5.2 Views of and access to nature

- a. Siting and organization of the building should respond to and prioritize unique natural views and other natural site features.

The physical environment shall be designed in response to the functional program, including the intended delivery of care model, and shall address the key elements listed below:

*1.2-4.5.1 Light

Use and availability of natural light and illumination shall be addressed in the design of the physical environment.

*1.2-4.5.2 Views of and Access to Nature

Residential health, care, and support facilities shall provide accessible outdoor space or a suitable alternative for residents, visitors, and staff. Such spaces shall allow for visual observation by staff based on the population served.

*1.2-4.5.3 Signage and Wayfinding

- b. Direct physical access to the outdoors (e.g., a garden, local park, adjacent green space) and views of nature and indoor gardens/atria should be provided. When direct access is not possible, alternatives include indoor gardens with natural light (atria), roof gardens, and green roofs.
- c. Outdoor respite areas should be provided for direct care and support staff.
- d. The abilities of the care population served (e.g., level of acuity, level of physical frailty, dementia issues) should be considered in designing outdoor spaces or alternatives.
- e. Opportunities for both active and passive interactions with nature should be provided in outdoor space(s), including exercise and play or other types of physical activity and therapies (e.g., physical, occupational, horticultural).
- f. Wayfinding and/or views should be provided to encourage residents to visit and return from outdoor garden(s) and/or atria.
- g. Access to both sun and shade, with trees and/or built shade structures, should be provided. Shady places are particularly important for residents who are photosensitive.
- h. Water features. Where provided, open water features should be equipped to safely manage water quality to protect occupants from infectious or irritating aerosols. See Section 2.1-3.6.3 (Outdoor Water Features) and appendix section A2.4-2.2.13 (Decorative water features) for additional information and requirements.
- i. For additional information on landscape and gardens, see appendix section A2.1-3.6.1 (Landscape features).

A1.2-4.5.3 Signage and wayfinding

- a. Entry points to all residential health, care, and support facilities should be clearly identifiable from all major exterior circulation

APPENDIX