

3.5 Freestanding Urgent Care Facilities

1 General Considerations

1.1 Applicability

This section applies to facilities that provide urgent care to the public but are not part of licensed hospitals, are not freestanding emergency services, or do not provide care on a 24-hour-per-day, seven-day-per-week basis.

1.2 Site

1.2.1 Signage

1.2.1.1 The facility shall post signs that clearly indicate the type and level of care offered and the hours of operation (if not 24 hours per day, seven days per week).

1.2.1.2 The facility shall post directional signs and information showing the nearest emergency department that is part of a licensed hospital.

1.2.2 Parking

1.2.2.1 Not less than one parking space shall be provided for each staff member on duty at any one time, and no fewer than two spaces shall be provided for each examination and each treatment room.

1.2.2.2 Additional spaces shall be provided for emergency vehicles.

1.2.2.3 Street, public, and shared lot spaces, if included as part of this standard, shall be exclusively for the use of the urgent care facility.

1.2.2.4 All required parking spaces shall be convenient to the urgent care entrance.

2 Diagnostic and Treatment Locations

2.1 Examination and Treatment Rooms

In addition to the requirements of Section 3.1-2.1, the following shall be provided:

2.1.1 Examination Rooms

2.1.1.1 Number. At least two examination rooms shall be provided.

2.1.1.2 Space requirements

- (1) Area. The examination rooms shall have a clear floor area of 120 square feet (11.15 square meters) excluding vestibule, toilet, closet, and fixed casework (treatment room may also be utilized for examination).
- (2) Clearances. Room arrangement shall permit a minimum clearance of 3 feet 6 inches (1.07 meters) at each side, head, and foot of the bed.

2.1.2 Procedure Room

At least one procedure room with the following characteristics shall be provided.

2.1.2.1 Capacity. Setup of the room to accommodate more than one patient shall be permitted.

- (1) Utilities and services shall be provided for each patient.
- (2) Provisions shall be included for patient privacy.

2.1.2.2 Space requirements

- (1) Where a procedure room is set up for multi-patient use, each patient area shall have a minimum clear area of 250 net square feet (23.23 square meters) excluding vestibule, toilet, closet, and fixed casework.
- (2) Room arrangement shall permit a minimum clearance of 3 feet 6 inches (1.07 meters) at each side, head, and foot of the bed.

2.1.2.3 Scrub stations. Hands-free scrub stations shall be located at each procedure room.

2.1.3 Observation Facilities

Facilities shall be provided for holding urgent care patients until they can be discharged or transferred to an appropriate hospital.

2.1.3.1 Number. Use of one or more examination/treatment rooms for this purpose shall be permitted.

2.1.3.2 Facility requirements. Size, type, and equipment shall be as required for anticipated patient load and lengths of stay.

2.1.3.3 Functional requirements. Each observation bed shall permit the following:

- (1) Direct visual observation of each patient from the nurse station, except where examination/treatment rooms are used for patient holding. View from the duty station may be limited to the door.
- (2) Patient privacy
- (3) Access to patient toilets
- (4) Secure storage of patients' valuables and clothing
- (5) Dispensing of medication
- (6) Bedpan storage and cleaning
- (7) Nourishment area (see Section 2.1-2.3.5). Meal provisions shall be made for patients held for more than four hours.

2.2 Imaging Facilities**2.2.1 Standards**

Standards stipulated in Section 3.1-2.2 shall be met during all hours of operation.

2.2.2 Facility Requirements

Radiographic equipment shall be adequate for any part of the body including, but not limited to, fractures.

2.2.3 Support Areas for Patients

Separate dressing rooms are not required for unit(s) used only for emergency procedures.

2.3 Laboratory**2.3.1 Standards**

See Section 3.1-2.3 for applicable standards.

2.3.2 Facility Requirements

In addition, immediate access to blood for transfusions and provisions for cross-match capabilities shall be provided.

2.4 Support Areas for Diagnostic and Treatment Locations**2.4.1 A Nurse Control and Workstation**

2.4.1.1 This shall accommodate charting, files, and staff consultation activities.

2.4.1.2 It shall be located to permit visual control of clinical area and its access.

2.4.1.3 Communication links with the examination/treatment area, procedure room, reception control, laboratory, radiology, and on-call staff shall be provided.

2.4.2 Poison Control Center

A poison control center with immediately accessible antidotes and a file of common poisons shall be provided.

2.4.2.1 Communication links with regional and/or national poison centers and regional EMS centers shall be provided.

2.4.2.2 This service may be part of the nurse control and workstation.

2.4.3 Equipment Storage

2.4.3.1 Location for CPR emergency cart. A CPR emergency cart shall be provided. It shall be located away from public circulation areas but immediately accessible to all areas, including entrance and receiving areas.

2.4.3.2 Wheelchair and stretcher storage. In addition to wheelchair storage, a holding area shall be provided for stretchers within the clinical area, away from traffic and under staff control.

2.5 Support Areas for Staff

Facilities for on-call medical staff shall be provided.

3 Administrative and Public Areas

Administrative and public areas shall conform to the standards in Section 3.1-4, with the following additions.

3.1 Public Areas

3.1.1 Entrances

3.1.1.1 Entrances shall be well marked, illuminated, and covered to permit protected transfer of patients from ambulance and/or automobile.

3.1.1.2 The urgent care entrance shall have vision panels to minimize conflict between incoming and outgoing traffic and to allow for observation of the unloading area from the control station.

3.1.1.3 Accessibility

- (1) Convenient access to wheelchairs and stretchers shall be provided at the urgent care entrance.
- (2) If a platform is provided for ambulance use, a ramp for wheelchairs and stretchers shall be provided in addition to steps.

3.1.2 Lobby and Waiting Areas

These shall satisfy the following requirements:

3.1.2.1 Reception

Reception and information functions may be combined or separate. These areas shall meet the following requirements:

- (1) These areas shall provide direct visual control of the urgent care entrance and access to the treatment area and the lobby. Urgent care entrance control functions shall include observation of arriving vehicles.
- (2) Control stations normally include a triage function and shall be in direct communication with medical staff.
- (3) A public toilet with hand-washing stations shall be provided.
- (4) A convenient telephone shall be provided.

3.1.2.2 Waiting area(s)

- (1) Urgent care waiting area
 - (a) This shall include provisions for wheelchairs.
 - (b) This shall be separate from the area provided for scheduled outpatient service.
- (2) Diagnostic imaging waiting area. If the urgent care facility ICRA determines that the diagnostic imaging waiting area requires special consideration to reduce the risk of airborne infection transmission, public waiting areas shall be designed, ventilated, and maintained with available technologies such as enhanced general ventilation and air disinfection techniques similar to inpatient requirements for airborne infection isolation rooms. See the CDC “Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health Care Settings” (full reference at 1.1-7.5.1).

3.1.3 Interview Facilities

Initial interviews may be conducted at the triage reception/control area.

3.1.3.1 Facilities for conducting interviews on means of reimbursement, social services, and personal data shall include provisions for acoustical privacy.

3.1.3.2 These facilities shall be permitted to be separate from the reception area but must be convenient to the urgent care service waiting area.

3.2 Administrative Areas

3.2.1 Offices

For standards concerning general and individual offices, see Section 3.1-4.2.2.

3.2.2 Multipurpose Rooms

Multipurpose room(s) shall be provided for staff conferences. This room may also serve for consultation.

3.2.3 Storage

For standards concerning general storage, see Section 3.1-4.2.4.

3.2.4 Support Areas for Staff

For standards concerning special storage for staff, see Section 3.1-4.2.5.

4 Construction Standards

4.1 General Standards for Details and Finishes

4.1.1 Doors to Patient Care Rooms

4.1.1.1 Door(s) to urgent care patient care rooms serving stretcher-borne patients shall not be less than 4 feet (1.22 meters) wide.

4.1.1.2 All other doors to patient service areas shall be not less than 3 feet (91.44 centimeters) wide.

5 Building Systems

5.1 Plumbing

See Section 3.1-7.1 for applicable plumbing standards.

5.2 Heating, Ventilating and Air-Conditioning Systems

See Section 3.1-7.2 for applicable mechanical standards.

5.3 Electrical Systems

See Section 3.1-7.3 for applicable electrical standards.