



**Heart of the Rockies Regional Medical Center  
Salida, CO**

**Facility Master Planning**

**Emergency Department Unit Facility Evaluation:**

Supervisor name: Katie Kowalski

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No. of Exam Rooms: 11 total room

No. of B.H. Treatment Rooms: 1

No. of Seclusion Rooms: 1

**A. The design of the ED Unit effectively contributes to safety, productivity, and efficiency.**

1. The design of the existing patient/ family ED Entrance Portal, from drive-up to building entry, provides a safe, legible, and functional public access point for emergency services.

*Comment: Access is safe. Parking is far from building. There is no patient drop*

*Off area near a door (except ambulance bay).*

2. The design of the ED's patient registration sequence: registration/ triage/ waiting/ emergency services, provides an efficient, properly sized, and well-organized flow and experience for patients, family, and staff.

*Comment: Registration is less than an efficient design. There is no good flow*

*From front door, to PFS reg area to WR chairs. It is too small for more than 6 patients and their families as we have had to take space from it to make triage, offices and registration. There is little to no privacy for patients.*

3. Existing exam, BH holding, trauma and procedure room capacity, type, and functionality meet the current and projected Functional Program and service district census requirements of the medical center's ED. An established ED expansion of services plan and equipment replacement schedule is in place and available for review.

*Comment: It currently meets our census requirements about half the time. I don't think it will meet projected numbers in 5-10 years.*

4. The design of the unit is flexible enough to accommodate significant changes in work processes.  
*Comment: No, difficult to make any significant changes to the current work process*
- 
5. The design of the unit supports the maintenance of a neat and orderly care environment.  
*Comment: Additional storage would assist in maintenance of a neat and orderly care environment.*
- 
6. The design of the unit optimizes staff time at the bedside in direct patient care.  
*Comment: Yes – although 4 of 11 room are very small*
- 
7. The design of the unit encourages and supports teamwork.  
*Comment: yes*
- 
8. The design of the unit supports multi-disciplinary care collaboration.  
*Comment: Yes*
- 
9. Line of sight connections between peers are easily maintained within the unit.  
*Comment: Mostly*
- 
10. The unit design fosters an organized, efficient, and calming environment.  
*Comment: No. Need additional storage rooms. Would be wonderful to have a space for calming environment for staff like a zen room*
- 
11. Hand washing sinks throughout the unit are easily accessible and appropriately located.  
*Comment: Yes*
- 
12. Linkages to other units (corridors, stairs, and elevators) are efficient and convenient.  
*Comment: Mostly*
- 
13. Linkages to diagnostic and treatment services (surgery, imaging, etc.) by corridor, stair, or elevator are efficient.

Comment: Yes

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14. The locations of clinical information system (computer) workstations are flexible and convenient to support patient care.

Comment: *We work on wheeled work stations which are flexible. The nurses station is minimally flexible, but it is convenient to support patient care. The nurses station gets full easily especially when we have adequate staff. The wheeled work stations are currently in the hallway often blocking part of passage.*

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15. There is appropriate work and meeting space for physicians and others involved in the care process.

Comment: *No. The providers currently share a small workstation with the nursing staff. They need their own station / documentation room*

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16. There are convenient places for visitors to wait/gather other than in the patient room.

Comment: *No, the WR is too small to host many visitors along with patients.*

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17. Family and visitor waiting spaces provide for adequate rest and privacy.

Comment: *No. small, not restful, no privacy*

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18. The design of the unit accommodates current and projected Emergency Patient Census and provides an optimal staff/ work/ patient flow environment.

Comment: *No. Rapid growth in the facility and in our area will quickly outgrow our environment.*

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19. The design of the unit accommodates departmental equipment requirements and equipment storage.

Comment: *No. We lack equipment storage.*

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**B. The size, shape and location of the following support spaces promote efficiency for their intended use.**

1. Clean Supply: *No, extremely small*
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2. Medication Room: *Could be a bit larger*
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3. Equipment Storage: Do not have at all
4. Clean Linen Storage: Currently located within the tiny clean supply room
5. Soiled Linen and Utility Room(s): Sufficient
6. The unit secretary workstation is strategically located to support unit functions.  
Comment: Yes – Doubles as RN work station
7. Respiratory Therapy Storage:  
Comment Sufficient. Other storage close by in RT department.
8. Staff locker/lounge and toilet facilities are conveniently located within the unit.  
Comment: Yes
9. Lounge provisions (size and design) have a calming, stress-reducing impact on staff.  
Comment: The 'lounge' is small. Only fits lockers a small desk and a fridge/microwave. It is not large enough for even a 2 person table. Lacking a calming, stress reducing space. Would love to have enough space for "zen" as well as personal affects. Even just a place to sit down and eat would be great.
10. Appropriate meeting and education space is provided within or adjacent to the unit.  
Comment: No meeting /education space currently

**C. Provide a patient exam room setting that is functionally efficient and effective for delivering patient care.**

1. Does the room minimize the time, motion (staff) and effort necessary for patient care?  
Comment: No, too small. Difficult to have more than the patient and 2 staff at a time in half of our rooms. The small room does not minimize motion, as you have to reach across or walk around the bed to get to any supplies.
2. Does the room support patient and staff safety? (If so, describe features.)  
Comment: Yes
3. Does the room optimize direct and indirect patient activities and tasks while helping to reduce medical errors, falls and hospital-acquired infections? (Describe features.)

*Comment: mostly*

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4. Is the space easy to maintain, clean and quickly reconfigure as needed?

*Comment: Easy to maintain. Too small to reconfigure anything if needed.*

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5. Does the room support optimum health outcomes and health status for patients, families and staff? (Give specific examples.)

*Comment: Not sure*

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6. Is sufficient space provided at the bed to allow 360-degree access during codes and for repositioning patients in the bed?

*Comment: Yes, however only in 4 rooms*

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7. Does each exam room have adequate nurse servers and/ or storage that is efficiently located?

*Comment: No*

---

8. By staff observation of surveyed facility, do patients positively respond to patient exam room design and ambiance?

*Comment: Mostly*

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9. The design achieves an appropriate balance between patient visibility and patient privacy.

*Comment:*

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10. The design of the exam room supports efficient work processes for care givers.

*Comment:*

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11. The exam rooms are flexible and sized to accommodate complex critical care equipment.

*Comment: 4 of them, yes*

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12. Patient toilet facilities are adequately sized to accommodate both patient and an assistant when needed.

*Comment: Yes*

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**D. Provide a setting for positive patient, family and staff experiences.**

1. Does the room optimize individual needs for:

comfort Mostly

control of views No

personal space for patient & family \_\_\_\_\_

privacy No, very minimal

technology not enough room to be in rooms

lighting okay

entertainment non available

information board yes

thermal comfort not able to change in rooms. Not able to change throughout department. Centrally located in facility.

2. Is the room organized to minimize conflicting patient, family and staff needs?

Comment: mostly

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**E. Life Safety, Regulatory Compliance, Existing-non-Conforming conditions.**

1. Within the existing Emergency Department of the medical center, there are currently no known and/ or documented Life Safety, Regulatory Compliance or Existing-non-Conforming conditions and deficiencies that the A/E Design Team would need to be aware of and address in the Facility Master Plan and upcoming design and improvement projects within the medical center.

Comment: Potential ligature issues in room 10.

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2. If yes to Item E. 1 above, please provide comments and copies of all AHJ or Regulatory survey documentation articulating deficiencies and Existing-non-Conforming conditions for Design Team assessment and advisory recommendation.

Comment:

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**F. Security and Access Control**

1. Within the Emergency Department, existing security and access control systems, including: low-voltage (cameras – card readers - alarms), doors and door hardware,

operational protocols (codes and lock-down) and performance features, meet or exceed both medical center Functional Program and regulatory Codes-in-force requirements (NFPA/ IBC/ FGI).

*Comment: meets*

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#### **G. Other Issues and Conditions**

1. Item: Lack of office space

2. Item: \_\_\_\_\_

3. Item: \_\_\_\_\_



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**Facility Master Planning**

**Emergency Department Unit Facility Evaluation:**

Supervisor name: Katie Kowalski  
Supervisor e-mail: katie.kowalski@hrrmc.net  
No. of Exam Rooms: 9  
No. of B.H. Treatment Rooms: 1  
No. of Seclusion Rooms: 1

**A. The design of the ED Unit effectively contributes to safety, productivity, and efficiency.**

1. The design of the existing patient/ family ED Entrance Portal, from drive-up to building entry, provides a safe, legible, and functional public access point for emergency services.

Comment: ED entrance's drive up point  
Public Access Opportunity

2. The design of the ED's patient registration sequence: registration/ triage/ waiting/ emergency services, provides an efficient, properly sized, and well-organized flow and experience for patients, family, and staff.

Comment: when low pt. volume allows for  
bedside triage. Opportunity ★

3. Existing exam, BH holding, trauma and procedure room capacity, type, and functionality meet the current and projected Functional Program and service district census requirements of the medical center's ED. An established ED expansion of services plan and equipment replacement schedule is in place and available for review.

Comment: No for Exam rooms, supplies

4. The design of the unit is flexible enough to accommodate significant changes in work processes.

Comment: No - Small space



5. The design of the unit supports the maintenance of a neat and orderly care environment.

Comment: No - crowded work spaces, mobile work stations needed & equipment not in a central location

6. The design of the unit optimizes staff time at the bedside in direct patient care.

Comment: No several rooms not in line of sight for optimal flow.

7. The design of the unit encourages and supports teamwork.

Comment: docs; back to staff

8. The design of the unit supports multi-disciplinary care collaboration.

Comment: Crowded spaces

9. Line of sight connections between peers are easily maintained within the unit.

Comment: no

10. The unit design fosters an organized, efficient, and calming environment.

Comment: no alarms audible.

11. Hand washing sinks throughout the unit are easily accessible and appropriately located.

Comment: Yes - pt. rooms, work station

12. Linkages to other units (corridors, stairs, and elevators) are efficient and convenient.

Comment: Corridor yes, elevator is a distance. staff stairwell to MS OK

13. Linkages to diagnostic and treatment services (surgery, imaging, etc.) by corridor, stair, or elevator are efficient.

Comment: Good link to imaging direct Corridor to OR

14. The locations of clinical information system (computer) workstations are flexible and convenient to support patient care.

Comment: yes.

15. There is appropriate work and meeting space for physicians and others involved in the care process.

Comment:

No - no meeting space  
physician work space is limited  
despite re-work.

16. There are convenient places for visitors to wait/gather other than in the patient room.

Comment:

yes, space is convenient  
but small.

17. Family and visitor waiting spaces provide for adequate rest and privacy.

Comment:

no -  
visitors allowed in pt room

18. The design of the unit accommodates current and projected Emergency Patient Census and provides an optimal staff/ work/ patient flow environment.

Comment:

No; workflow opportunities

19. The design of the unit accommodates departmental equipment requirements and equipment storage.

Comment:

no - very low storage  
options.

**B. The size, shape and location of the following support spaces promote efficiency for their intended use.**

1. Clean Supply: Small

2. Medication Room: Small

3. Equipment Storage: N/A

4. Clean Linen Storage: > opportunity

5. Soiled Linen and Utility Room(s): > opportunity

6. The unit secretary workstation is strategically located to support unit functions.

Comment:

no unit secretary

7. Respiratory Therapy Storage:

Comment:

no he

8. Staff locker/lounge and toilet facilities are conveniently located within the unit.

Comment: yes

9. Lounge provisions (size and design) have a calming, stress-reducing impact on staff.

Comment: No very very small. No Calming space

10. Appropriate meeting and education space is provided within or adjacent to the unit.

Comment: no -

**C. Provide a patient exam room setting that is functionally efficient and effective for delivering patient care.**

1. Does the room minimize the time, motion (staff) and effort necessary for patient care?

Comment: Small room 2 doors

2. Does the room support patient and staff safety? (If so, describe features.)

Comment: Trauma + Ortho rooms yes

3. Does the room optimize direct and indirect patient activities and tasks while helping to reduce medical errors, falls and hospital-acquired infections? (Describe features.)

Comment: no known concerns

4. Is the space easy to maintain, clean and quickly reconfigure as needed?

Comment: Can reconfigure trauma room space

5. Does the room support optimum health outcomes and health status for patients, families and staff? (Give specific examples.)

Comment: no known concerns

6. Is sufficient space provided at the bed to allow 360-degree access during codes and for repositioning patients in the bed?

Comment: Trauma + ortho room yes  
other rooms very tight but beds do  
more.

7. Does each exam room have adequate nurse servers and/ or storage that is efficiently located?

Comment: yes cabinets + drawers

8. By staff observation of surveyed facility, do patients positively respond to patient exam room design and ambiance?

Comment: no identified concerns  
doors + curtains are closed for privacy

9. The design achieves an appropriate balance between patient visibility and patient privacy.

Comment: no - doors closed  
unable to see pts.

10. The design of the exam room supports efficient work processes for care givers.

Comment: no specific concerns

11. The exam rooms are flexible and sized to accommodate complex critical care equipment.

Comment: Trauma + Ortho rooms yes

12. Patient toilet facilities are adequately sized to accommodate both patient and an assistant when needed.

Comment: no concerns.

**D. Provide a setting for positive patient, family and staff experiences.**

1. Does the room optimize individual needs for:

comfort medium

control of views. no

personal space for patient & family no

privacy OK

technology OK

lighting OK

entertainment OK

information board OK

thermal comfort OK

2. Is the room organized to minimize conflicting patient, family and staff needs?

Comment: no space is tight

**E. Life Safety, Regulatory Compliance, Existing-non-Conforming conditions.**

1. Within the existing Emergency Department of the medical center, there are currently no known and/ or documented Life Safety, Regulatory Compliance or Existing-non-Conforming conditions and deficiencies that the A/E Design Team would need to be aware of and address in the Facility Master Plan and upcoming design and improvement projects within the medical center.

Comment: Equipment storage is a concern.

2. If yes to Item E. 1 above, please provide comments and copies of all AHJ or Regulatory survey documentation articulating deficiencies and Existing-non-Conforming conditions for Design Team assessment and advisory recommendation.

Comment: no specific deficiency.

**F. Security and Access Control**

1. Within the Emergency Department, existing security and access control systems, including: low-voltage (cameras – card readers - alarms), doors and door hardware, operational protocols (codes and lock-down) and performance features, meet or exceed both medical center Functional Program and regulatory Codes-in-force requirements (NFPA/ IBC/ FGI).

Comment: OK

**G. Other Issues and Conditions**

1. Item: \_\_\_\_\_

2. Item: \_\_\_\_\_

3. Item: \_\_\_\_\_