

**Section 2**

General Principles



# General Principles

## 1. General Design Issues

### Background

**Legal** Minimise the risk of accidents, injury and damage to property by well-considered planning, finishes and detailing.

**Accreditations** Design to ensure accreditation capability on occupation of facility.

**Disabled access** Afford people with disabilities the same rights, choices and opportunities as others in the community to enable them to lead fulfilling lives.

**Energy** Plan to reduce demand on non-renewable energy resources. Buildings should be designed, constructed, equipped and managed to optimise energy savings.

**Appropriate design** The design of facilities should achieve a high level of performance in function, amenity and aesthetics in the context of the design objectives.

**Heritage issues** The Government is committed to upholding the principles of the Burra Charter and to the preservation of unique and significant built environments in their custody.

**Special group requirements** Do not design facilities that are so specific as to exclude acceptance by particular ethnic or cultural groups.

**Maintenance** The success or failure of any project is greatly dependent on the maintenance it receives after completion. Regularity of maintenance and care with its execution will be reflected in the appearance of the facility for its useful life.

**Staff development** All staff must be afforded the opportunity for training and educational development. Demands of staff schedules may require on-site provision for this.

**Flexibility** Facilities have some spaces which are not in constant use. Especially where facilities are grouped, such spaces may be in demand by occupants from other facilities. These parts of facilities require design for such events (for example: physiotherapy gymnasiums).

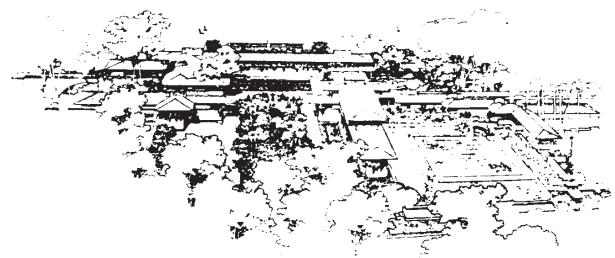
**Individuality and identity** Create a sense of place and identity for each sub-unit of a facility by employing elements unique for that part of the complex even where separate sub-units are basically identical. Follow through with landscape design.

**Security** Employ real and/or symbolic barriers where intrusion by unwanted persons needs discouragement. Many fears are perceived rather than real. The effect on the individual is the same. Each design may require a safety audit to determine hazards which may give rise to these fears and to recommend strategies for allaying them.

**Aboriginal people in secure facilities** History has shown that Aboriginal people are vulnerable to effects of confinement and may inflict injury on themselves including suicide attempts. Their special needs may necessitate consultation with Aboriginal and Torres Strait Islander groups and other key stakeholders. For example some

groups of aboriginal people state a need for specific or adequate space for cultural gathering.

**People of non-English speaking background in secure facilities** The probability of responses to confinement based on ethnic background considerations will require consultation with ethnic leaders, religious leaders and family members to develop strategies appropriate to the particular needs of the consumer.



*Building forms express access points and identify sub-units while creating a sense of space.*



*A strong entrance statement for wayfinding.*

# general principles

## Design Objectives

*Desired Outcomes*

- Provide safe, hygienic buildings.**
- Achieve accreditation appropriate to facility.**
- Provide same opportunities and choices for disabled persons that ambulant persons enjoy.**
- Maximise energy efficiency.**
- Provide humane and responsive design for consumers and staff.**
- Conserve designated buildings in accordance with Government Heritage policies.**
- Incorporate needs of special groups such as Aboriginal and Torres Strait Islander people and people from non-English speaking (NES) backgrounds.**
- Extend useful life and give functionality to buildings throughout life.**
- Allow continuing education and development of staff appropriate to needs of consumers.**
- Enable certain spaces required for special reasons to be used for other purposes also.**
- Ensure various sub-units of building are easily identifiable and unique within unit.**
- Take into account the needs of consumers. Ensure access to various parts of the facility is available to those who need it. Maximise natural surveillance.**

## Standards and Policies

*Policies for compliance to achieve Desired Outcomes*

- Legal** Comply with Build Code of Australia (Building Act 1992).
- Accreditations** Comply with Planning and Environment Act.
- Disabled access** Comply with BCA and Disability Services Act.
- Energy** Comply with Workplace Health and Safety.
- Appropriate design** Comply with Australian Standard for mobility and access AS1428.
- Heritage issues** Comply with Heritage Act.
- Staff development** Allocate sufficient space for needs.
- Security** Safety audit prepared by security firm or police.

## Design Guidelines

*Strategies for achieving Desired Outcomes*

- Accreditations** Comply with requirements for accreditation.
- Disabled access** Achieve barrier-free access for the mobility impaired.
- Energy** Site, orientate and utilise building to optimise environmental advantages.
- Appropriate design** Apply design principles appropriate for comfort, privacy, safety, security and visual satisfaction of occupants.
- Heritage issues** Minimise effect on building fabric when redeveloping.
- Special group requirements** Involve special groups in design at PDP and design stages.
- Maintenance** Establish Quality Assured maintenance program.
- Staff development** Provide spaces within all buildings for staff training and to foster communication.
- Flexibility** Employ space dividers/movable walls. Provide outside access for users from other facilities.
- Individuality and identity** Ensure some uniqueness sufficient to differentiate similar sub-units from each other. Communal outdoor space for each sub-unit should specifically express each sub-unit.
- Security** Minimise number of entries to facility. Design vehicular and pedestrian circulation so that no ambiguities occur. Include opportunities for surveillance without infringing privacy.
- Aboriginals in secure mental health facilities** Consult with expert design consultants and Aboriginal and Torres Strait Islander groups.
- People of NES background in secure mental health facilities** Consult with expert design consultants and NES background community groups.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

- Legal** Minimum standard of design complies with latest relevant Australian Standard for Building and Planning Design.
- Disabled access** To AS1428.
- Energy** Employment of energy efficiency principles.
- Maintenance** Maintenance manuals to be prepared for each completed building.
- Flexibility** Folding walls for rooms. Screens may suffice for some spaces. Entry space and parking/loading areas.
- Individuality and identity** Externally, vary roofs and express access points to outside with roof projections and treat as an entrance. Internally, create transition points and change colours, textures, ceiling heights between sub-units.
- Security** Entry statements. Bollards and gates. Surveillance of access points from spaces frequently occupied or well-trafficked areas of site. Well-lit, well-used entries and short pathways direct to car parking and streets.
- Aboriginals in secure mental health facilities** Family group participation required. Access to open view of sky and vegetation.
- People of NES background in secure mental health facilities** Family group participation. Religious requirements and beliefs satisfied.

# general principles

## 2. Siting and Site Selection

### Background

**Topography** Exploit natural features of a site to give the facility individual character. Existing structures may also help give definition or character. Site buildings in a layout appropriate to the nature of the slope of the ground and views.

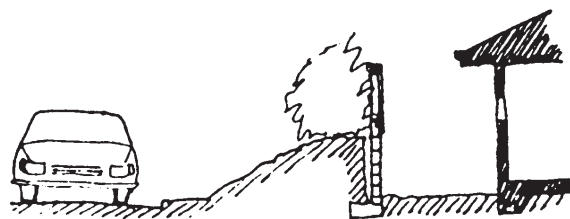
**Groups of buildings** In the absence of any overriding criteria, group like spaces and buildings for servicing, economy, structural efficiency or aesthetic cohesion of the group.

**Quietness and serenity** Disturbing sights and sounds may have detrimental effects on consumers and on occupants of the more reflective spaces.

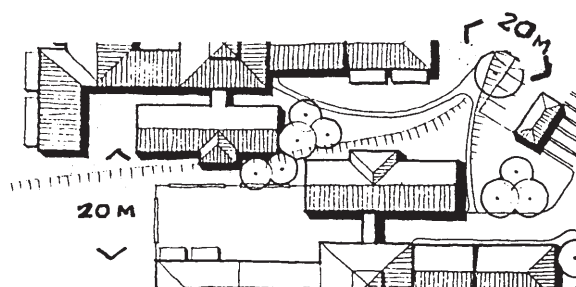
**Separation and individual usage** Sub-units which do not relate directly to consumer services require separate buildings. This reduces building bulk and servicing, and circulation requirements are lessened (for example: gardener's facilities).

**Outlook and views** Most occupants base their notions of attractiveness on what they can see from their windows.

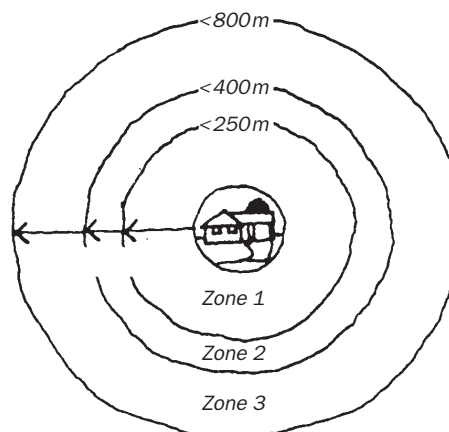
**Proximity to services** Ease of access to shops and essential services is essential for facilities intended to provide for people with impaired mobility.



Noise abatement measures must be employed where impacts of noise are likely to adversely affect the lives of the residents.



Separate the different sub-units of a facility.



Zone 1: Public transport, public telephone, post box.

Zone 2: Local shop, public park, playground.

Zone 3: Emergency services, shopping centre, post office, bank, place of worship, doctor's surgery, public library, school, recreational facility (or 15 minute bus ride to these facilities).

# general principles

## Design Objectives

*Desired Outcomes*

**Optimise utilisation of site.**

**Group buildings in the most economic, efficient and aesthetically pleasing way.**

**Ensure a quiet and serene site.**

**Ensure separation and individuality of buildings.**

**Keep occupants in touch with the outside world.**

**Provide access to shops, services, transport and community facilities**

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Topography** Situate building away from external sources of nuisance and adverse climate conditions. Facilitate pedestrian access. Utilise site features as design elements.

**Grouping of buildings** Group buildings close to each other for efficiency of service circulation. Keep number of small-scale buildings to a minimum.

**Quietness and serenity** Avoid heavily trafficked road and railway sites.

**Separation and individual usage** Separate buildings used for different purposes with landscape buffers between buildings.

**Outlook and views** Ensure outlooks from buildings are of non-disturbing activities.

**Proximity to services** Locate close to regional shopping centres.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Topography** Location of often occupied spaces away from nuisance source. Retention of significant trees, rocky outcrops, fences, walls etc.

**Grouping of buildings** The grouping of similar serviced areas, similarly structured spaces and small-scale buildings under one roof.

**Quietness and serenity** Landscape buffers, heavy planting or earth mounds used as acoustic buffers. Internal views created.

**Separation and individual usage** Minimum of 20 metres separation from other building types.

**Outlook and views** Cars driving, people walking, a park, water or some other activity can be seen beyond site.

**Proximity to services** Within level walking distances as follows:

< 250 m of public transport

< 400 m of local shopping

< 800 m of post office, bank, place of worship

# general principles

## 3. Site Layout

### Background

**Open outdoor space** Each open outdoor space should convey a clear indication as to its purpose, focus, extent, who might occupy it and how it is accessed. This is achieved by its dimensions and proportions, type of planting, how enclosed, relationship to pedestrian and vehicular movement, landscape features, lighting etc. Each outdoor space should have a unique character.

**Ambulance entry** Direct access to unit is required for consumers arriving as involuntary patients via ambulance or police. The emergency vehicle requires under-cover access away from public access points.

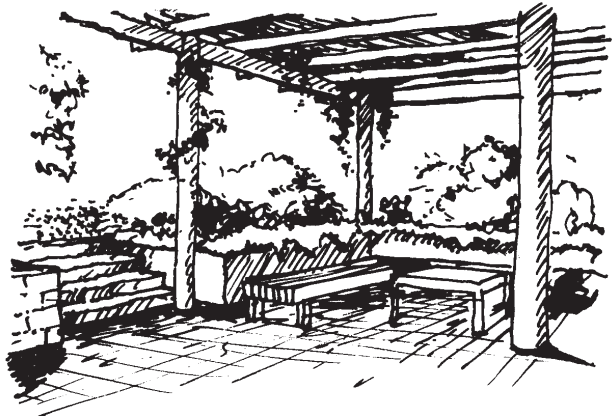
**Covered outdoor space** Outdoor space will only be used if oriented for comfortable daytime temperature. Exclude summer sun with suitable treatment for space.

**Pleasing environment** The total visual milieu of a facility is an important part of occupant satisfaction.

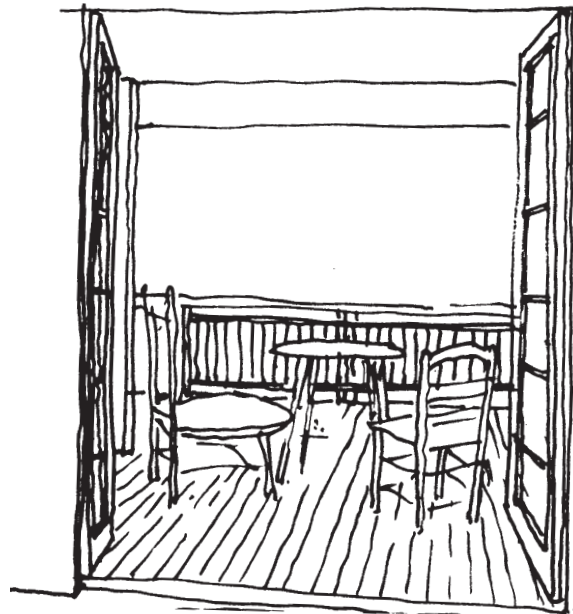
**Spatial hierarchy** People will not use or travel comfortably through a space which shows signs of ambiguity of use, territoriality, delineation and identity.

**Community identity** Occupants must feel comfortable in the facility environment away from the critical eye of outsiders so they can pursue their objectives with confidence.

**Pedestrian movement** Footpath systems should accommodate predictable patterns, volumes and activities of pedestrian circulation and preserve privacy of bedrooms and quiet spaces.



*Useable covered outdoor space.*



*Direct access from a bedroom to verandah or balcony.*



*Visually pleasing and identifiable forms used to create functional outdoor spaces.*



# general principles

## Design Objectives

*Desired Outcomes*

**Provide useable outdoors space.**

**Provide discreet police and ambulance entry.**

**Provide useable and easily accessible covered space outdoors.**

**Provide visually pleasing units.**

**Clearly delineate public space, community space and private space.**

**Engender a feeling of security and a sense of community within unit.**

**Provide safe and purposeful access for pedestrians.**

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Open outdoor space** Ensure access from communal areas and differentiate proportions and size.

**Ambulance entry** Provide separate ambulance bay and laneways adjacent to building entry.

**Covered outdoor space** Have partially enclosed spaces that can be accessed from bedrooms.

**Pleasing environment** Consider variety of spaces and forms, and pleasant views.

**Spatial hierarchy** Ensure clear distinction between public streets and on-site open space. Locate communal space so that it is obviously for residents only.

**Community identity** Enhance by discouraging access to site by outsiders.

**Pedestrian movement** Make well-delineated pathways wide enough for two people to pass. Locate to preserve privacy of interior spaces.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Open outdoor space** Seating, shade and opportunities for privacy.

**Covered outdoor space** Verandahs 2.5 m minimum width and balconies 3.0 m minimum dimension.

**Pleasing environment** Cohesive mix of roof shapes, thoughtful landscape treatments, useful layouts and functional outdoor spaces.

**Spatial hierarchy** Courtyard or patio space between public or communal open space and sub-unit interior.

**Community identity** Create relatively narrow and unobtrusive site entries. Make thresholds deliberate and obvious.

**Pedestrian movement** 1.2 m wide for most uses. Wider at access points. Keep 3.0 m clear of unscreened windows of bedrooms and quiet spaces.

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## 4. On-site Parking

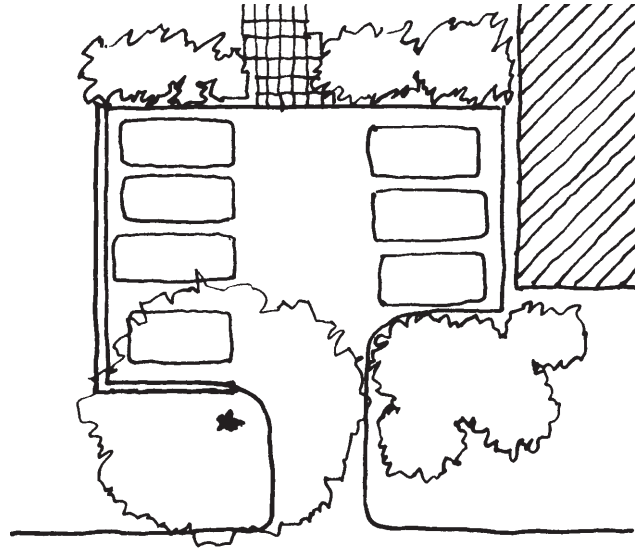
### Background

**Car park numbers** Car parking requirements will be site specific depending on such factors as availability of reliable public transport, proximity to staff catchment area, attractiveness of other methods of travel (by bicycle, on foot etc.) and co-location with other facilities.

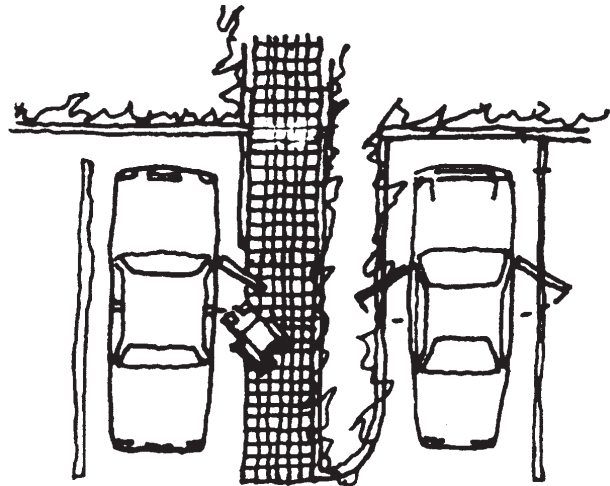
**Car park layout** Large parking lots have a way of taking over the landscape, creating unpleasant places and having a depressing effect on open space around them. People feel dominated by the cars, and separated from the pleasure and convenience of being near their cars.

**Turning and egress** Vehicular access and parking arrangements should respect the need for an uninterrupted network of safe landscape spaces.

**Car park dimensions** People using the car park will include staff, visitors and the mobility impaired. Because of regularity of use, staff may not require as much space as a visitor who, in turn, does not have the problems of accessing a vehicle that a disabled person might have.



*Small lots reduce the impact of cars. They should be easily accessed, secure and partially shaded.*



*Car parks for disabled may share 1.2m wide pedestrian path.*



# general principles

## Design Objectives

*Desired Outcomes*

**Provide adequate parking for visitors, consumers and staff.**

**Provide shade protection, security and ease of access to facilities.**

**Provide safe, effective turning and maintain vision lines.**

**Provide dimensions that allow for ease of access to front, rear and side of car in safety.**

## Standards and Policies

*Policies for compliance to achieve Desired Outcomes*

**Car park numbers** Comply with the policies of the local hospital.

**Turning and egress** AS2890.

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Car park numbers** Provide 0.5 parking bays per staff member or bed, 0.1 per resident, except where public transport difficulties mitigate. Provide bays for people with disabilities: 0.1 per disabled and 0.1 per expected visitor.

**Car park layout** Provide trees between parking bays, install lighting and ensure visual links to facility. Car park must not dominate complex or compromise privacy.

**Turning and egress** Landscape site to enhance safety. Use traffic-calming strategies for driveways.

**Car park dimensions** Ensure each parking bay is appropriate for intended use.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Car park numbers** Australian Standard.

**Car park layout** Locate car parks away from sleeping areas and outdoor communal areas. Allocate less than 10% of site for car parking. Provide small parking lots each with 8 cars or less.

**Turning and egress** Low plantings at intersections and corners. Slow points at regular intervals.

**Car park dimensions** Comply with AS2890.1 Class 2 User. Comply with AS1428 for Disabled Users.

# general principles

## 5. Landscape Treatments

### Background

**Landscape plantings** Treat landscape as an intrinsic part of site design and thus plan with occupant satisfaction in mind. In selecting plant materials, keep the actual use of every section of the site in mind.

**Gardens** Some consumer groups have cultural backgrounds which place importance on tending gardens and tilling soil. A continuing connection with these activities may be a source of great comfort.

**Pedestrian spaces** Include spaces for circulation, walking for leisure, spending time in and specific activities.

**Grassed areas** When considering the inclusion of a grassed area, decide whether or not the purpose is mainly for appearance or for an activity.

**Indigenous and existing vegetation** Where existing mature trees have been retained, plant complementary species that are in keeping with the design character and are native to area.

**Private and public outdoor space** As use of external spaces is an integral part of rehabilitation and therapy programs within each facility, direct access from a variety of internal spaces is important.

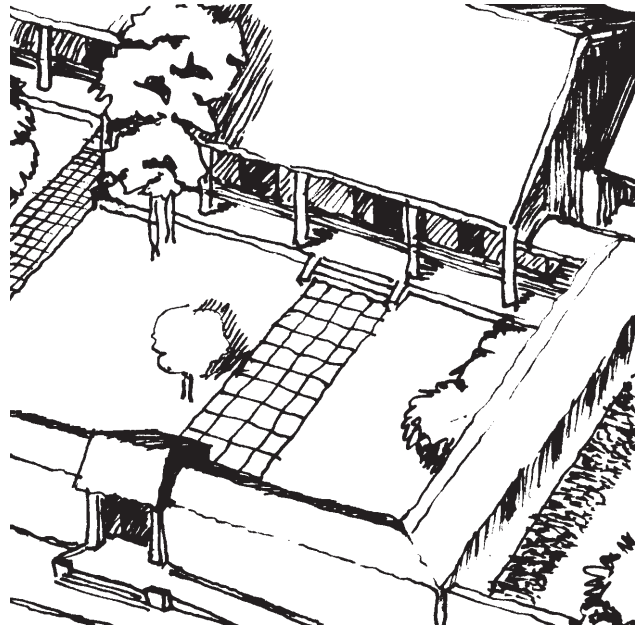
**Indoor plants** Proximity to plants, and availability of plants in rooms may be as beneficial to some occupants as access to outdoors.

**Access to outdoor spaces** It is important all occupants be given the choice of accessing all parts of the site allowable under their circumstances.

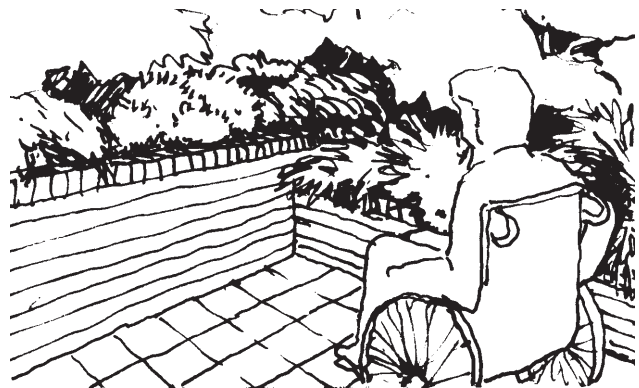
**Plant maintenance** Landscape plant maintenance involves more than mowing lawns. It also involves caring for gardens and the plants in them. Plants need periodic pruning, thinning out, replacement, treatment, transplanting, watering and fertilising. Gardens may need weeding, mulching and soil conditioning. Lawns also need fertilising, weeding, edging and spraying.

**Outdoor furniture** Seating is the most important element in encouraging outdoor use. Locate seating in the most comfortable position where it will be used, and use types appropriate to the activity (eating, lounging etc.). Incorporate other items which will enhance the outdoor experience and create points of interest. Plan to take advantage of the variety of outdoor spaces provided.

**Safety** Safety is paramount for all persons and Queensland Health have a duty of care for all in their employ and care. Landscape elements are most likely to provide a hazard for ongoing safety. Edges of gardens, steps, plant types, mulch and detritus, and water retention all have an effect on the hazard level of an area.



*Protected pedestrian circulation.*



*Place raised garden beds close to accommodation.*

# general principles

## Design Objectives

*Desired Outcomes*

**Provide planting appropriate to purpose, site conditions and accepted norms.**

**Encourage use of gardens and tending by patients.**

**Encourage use of comfortable outdoor places, and safe circulation.**

**Provide grassy trafficable areas for ambulant patients and visitors.**

**Retain existing significant vegetation wherever possible.**

**Provide outdoor spaces, patios and garden courts of green domestic style, and regularly maintain outdoor furniture.**

**Allow all residents to experience plants.**

**Provide convenient access from indoors.**

**Provide and maintain plants in a healthy and cared-for state.**

**Have useable outdoor areas which are clean and tidy and ready for use at all times, and under shade.**

**Select and locate plants consistent with user safety.**

## Standards and Policies

*Policies for compliance to achieve Desired Outcomes*

**Grasses areas** Comply with AS1428.

**Safety** Consult local authority noxious plant lists.

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Landscape plantings** Complement character of naturally occurring vegetation in locality. Be responsive to climate conditions including solar access, shading, wind screening and seasonal variations.

**Gardens** Take account of preferences of users including social and cultural preferences, disabilities and age.

**Pedestrian spaces** Protect from adverse site conditions. Provide safe, direct, continuous barrier-free pathways.

**Grassed areas** Locate in accessible areas and design to be useable.

**Indigenous and existing vegetation** Integrate existing vegetation and topography with new planting and altered land forms.

**Private and public outdoor space** Locate outdoor spaces close to areas from which access is convenient and desirable. Use plants of scale appropriate to space created.

**Indoor plants** Locate in areas where residents may be bedridden or isolated for extended periods of time.

**Access to outdoor spaces** Ensure that doors open with minimum effort and doorways are barrier-free.

**Plant maintenance** Select plants for area, quality, suitability for conditions and ease of maintenance. Ensure survival during extended periods of dry weather.

**Outdoor furniture** Provide suitably located comfortable seating. Provide some furniture that facilitates extended use. Encourage use all year round. Place unusual and interesting features in areas to be well used. Regularly maintain.

**Safety** Next to paths, avoid species which shed leaves in the wet season or whose leaves or secretions are likely to cause a hazard to pedestrians.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Landscape plantings** Plant species complementary to existing species in the locality. Plant tree specimens from largest possible containers. Use plants to structure outdoor space.

**Gardens** Provide raised garden beds for disabled and aged, close to their accommodation.

**Pedestrian spaces** Privacy screens, wind protection, solar access, shade appropriate to use. Hard, non-slip, well-drained surface.

**Grassed areas** Regular maintenance program in place. Pop-up sprinklers preferred for watering.

**Indigenous and existing vegetation** Selection of species that complement existing species.

**Private and public outdoor space** Nearest indoor spaces to be bedrooms and communal areas, especially dining and living rooms. Access points should be nearest those least mobile. Surveillance by staff must be possible during their daily routines.

**Indoor plants** Plants are in intensive care and isolation/secure areas.

**Access to outdoor spaces** Doors have stay-open functions or automatic operation. Locks do not lock automatically on closing. Doorways have barrier-free thresholds.

**Plant maintenance** Selection of hardy species from reputable sources. Installation of watering system.

**Outdoor furniture** Movable furniture and fixed furniture, preferably made from timber, located in varying configurations including around a table and towards views. Refuse containers near doors, junctions with pedestrian paths, and tables. Shade structures that allow sun in winter and shade in summer, or umbrellas. Outdoor bulletin board and drinking fountain. Aviary, fish pond, fountain, artwork as appropriate to residents' needs.

**Safety** Native species popular in the area.

# general principles

## 6. Fences and Walls

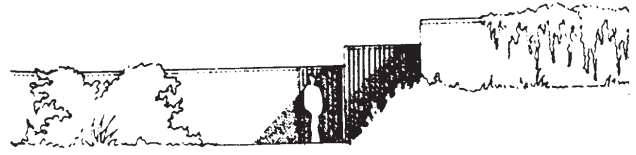
### Background

**Secure spaces** Confinement becomes easier to bear when the methods of confinement are subtle.

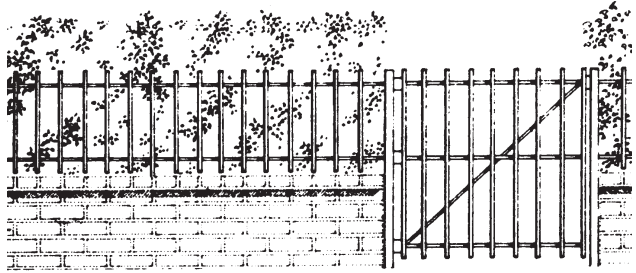
**Planting** Climbing plants soften the transition between ground and fence or wall while lending a close and subtle texture to the surface material.

**Spatial divisions** Separation of spaces does not need to be intrusive. It need only be a suggestion, and can fulfil other roles as well, such as using a low wall as a seat or as protection for a raised garden bed.

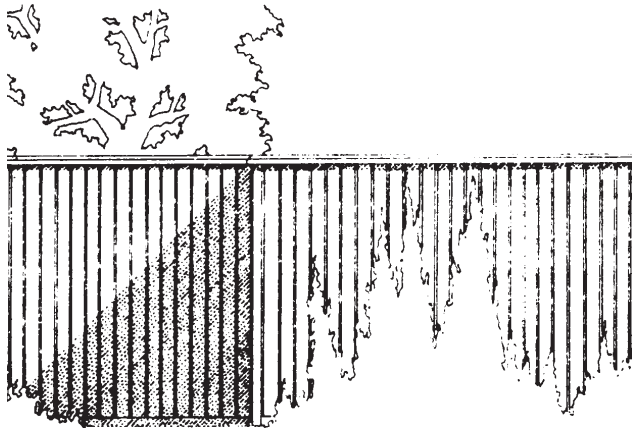
**Climate control** Walls and fences may contribute significantly to the micro-climate of the space they enclose. Careful design, placement and choice of materials can enhance desirable climate effects on outdoor space.



*Vary materials and articulate walls to reduce impact of long runs of fencing.*



*Fences should be robust, but domestic in scale.*



*Planting can be used to reduce the impact of fencing.*

# general principles

## Design Objectives

*Desired Outcomes*

**Avoid images of confinement and incarceration.**

**Soften appearance of fences.**

**Delineate and divide external spaces for specific uses.**

**Create an ideal micro-climate.**

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Secure spaces** Build walls and fences in domestic style with modulated appearance.

**Planting** Plant climbing plants close to walls and fences.

**Spatial divisions** Vary heights and materials. Design with variety of uses in mind.

**Climate control** Designs and materials need to suit the aspect in which they are placed.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Secure spaces** No barbed wire or galvanised chainwire.

**Planting** Delicate species of climbing plants that do not support a person's weight.

**Spatial divisions** Masonry walls for sitting on. Raised planting beds. Balustrades and openings in walls.

**Climate control** Permeable structure admits breezes. Solid walls protect from cold winds.

# general principles

## 7. Building Appearance

### Background

**Identity** Elements of domestic buildings can be adopted which provide security without dominating the architecture.

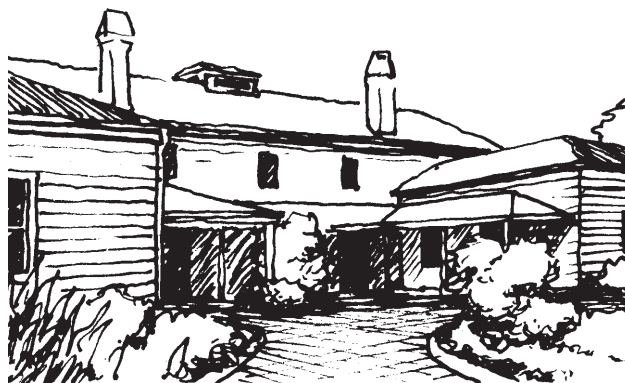
**Volume and bulk** Regardless of architectural style, most occupants prefer some degree of aesthetic complexity and variety.

**Form** Consumers would prefer facilities that do not stand out in the streetscape or neighbourhood but still retain character.

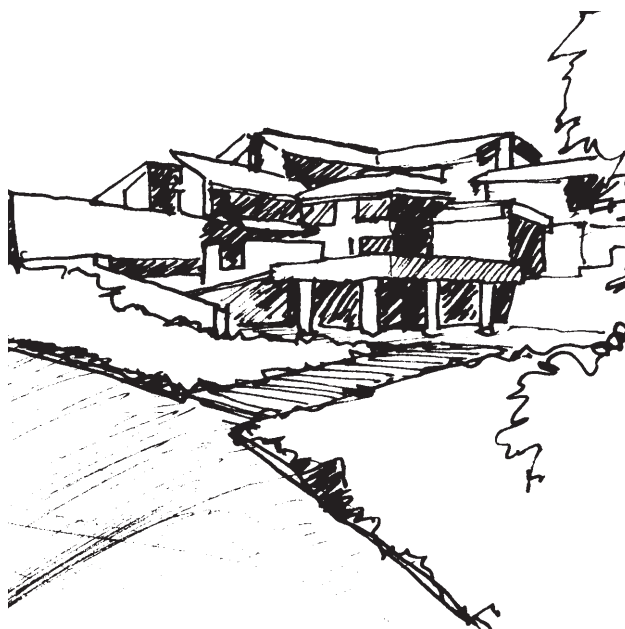
**Outdoor colours** Fashionable colours should be confined to parts of building that may be changed, but should only be used if local tastes are in alignment.

**Materials** Choose materials which will avoid stigmatisation of the facility; avoid those of an institutional nature or which are not homelike.

**Homeliness** Moving from one setting to another can be disconcerting, especially when there is little continuity between the settings. To make this transition as smooth as possible, the therapeutic environment should have a familiar frame of reference. Homeliness is difficult to define in architectural terms as it refers more to a state of recognition than aesthetic conditions. However, it is more likely that homeliness will be engendered where conditions of domesticity, symbols of generic residential quality and characteristics of a cultural standard of "home" are used.



*Provide home-like expression to building forms.*



*Break up building bulk and express sub-units.*

# general principles

## Design Objectives

*Desired Outcomes*

**Reflect scale of needs of consumers.**

**Fit building into surrounding context.**

**Ensure buildings are identifiable and of domestic symbolism.**

**Reflect local community and user cultural values.**

**Reflect domestic symbols and characteristics.**

**Reflect a caring, nurturing image of home, conducive to well-being and a feeling of familiarity as experienced with one's own home.**

## Standards and Policies

*Policies for compliance to achieve Desired Outcomes*

**Volume and bulk** Town plans.

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Identity** Buildings for consumers kept in high security require images of control such as plinths and garden fences and walls.

**Volume and bulk** Break up bulk of building into volumes which reflect those of prevailing structures.

**Form** Engender sense of community.

**Outdoor colours** Use popular and conservative colours.

**Materials** Build with components used in domestic construction.

**Homeliness** Clearly delineate transition progressing from large space to smaller spaces and between different use areas. Choice of furniture should not reflect institutional values. Building form, materials and facades must blend with surroundings and be appropriate to context especially in residential areas. Provide opportunities for occupants to personalise their spaces. Employ features which enhance a feeling of control over their immediate environment by residents, especially in their bedrooms. Break down volume of buildings into smaller parts.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Identity** All secure buildings facing public areas require fences and walls, and access to public areas should not be facilitated by design of building elements.

**Volume and bulk** Adherence to town-planning requirements of local authority where appropriate guidelines for development exist.

**Form** Use of domestic-scale spaces and detailing.

**Materials** Use of brick, block, timber and other 'homely' materials.

**Homeliness** Change in spatial dimensions, colours. Materials used to signify transition from one space to another. External finishes appropriate to scale. Texture and colour appropriate to environment and in sympathy with character of neighbourhood. Dominant external design features such as roof pitch, landscape treatments, driveways, front fences, gate posts should complement existing character. Provision for hanging pictures, furniture for placement of objects, open shelves for books and photographs.



# general principles

## 8. Security and Privacy

### Background

**Staff security** Arrangements for staff security must instill confidence in staff actions so that consumers are well aware of the care being given.

**Consumer security** Consumers should not feel that their privacy is unnecessarily compromised by constant observation, except in special areas set up for this purpose.

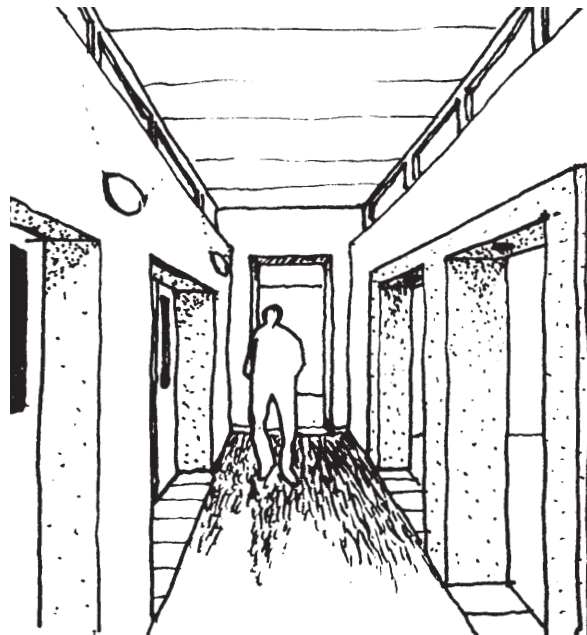
**Public security** A visual cue is a better method of discouraging access by the public than signs if a domestic feel to the environment is to be retained.

**Visual privacy** Having one's own bedroom or space where one can be undisturbed provides a sense of self and separateness from others.

**Gender privacy** To preserve dignity and enhance self-esteem, privacy in dressing and in the bathroom is essential.



*Transition from public to semi-public external space.*



*Strong territorial definitions.*

# general principles

## Design Objectives

*Desired Outcomes*

**Ensure staff well-being and safety.**

**Provide security as discreetly and benignly as possible.**

**Allow the public to safely find their way easily and obviously through facility.**

**Provide privacy level that reflects normal cultural practices.**

**Provide privacy appropriate for action and personal function.**

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Staff security** Provide staff with means of leaving dangerous area, calling for help and securing their immediate area.

**Consumer security** Avoid security installations where not necessary.

**Public security** Clearly define each sub-unit. Strongly delineate boundaries of spaces and provide transitions between.

**Visual privacy** Provide for sleeping, visiting relatives, consultants, group therapy sessions.

**Gender privacy** Provide sufficient toilets appropriate to each sex. The number of fixtures should allow choice of ablution times. Respond to residents' cultural background.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Staff security** Back doors to some spaces, reliable and accessible security call. Robust lockable doors, windows etc.

**Consumer security** Symbolic barriers in lieu of physical barriers, except where containment or restriction is required.

**Public security** Named spaces. Low ceilings in transition areas. Bulkheads to step ceilings. Location of doors in transitions.

**Visual privacy** Domestic-scale kitchens, dining spaces, living-spaces lockable only by staff.

**Gender privacy** Ideally, access to own facility from bedroom but no fewer than one ensuite for every two occupants, with preference for one bathroom for each occupant.

# general principles

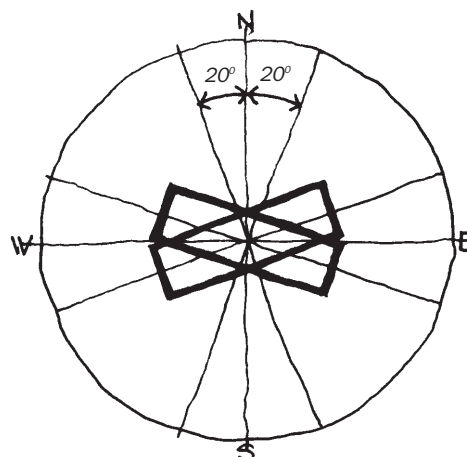
## 9. Climate

### Background

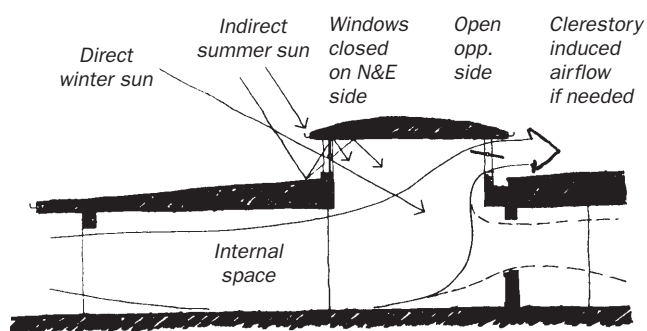
**Solar access** Building design and orientation must suit local climatic conditions. Respond to the needs for solar access. This is a major factor in reducing plant sizes for air-conditioning. In some areas of the building, natural ventilation may suffice if solar access principles are followed.

**Natural ventilation** Many people have an aversion to cooled air and mechanical air-conditioning systems. Often there is a graded acceptance depending on humidity, ambient, temperatures and individual requirements and desires. Air-conditioning is sometimes targeted as a cause of illness and spread of infection. It is possible that buildings designed for natural ventilation may perform better than those cooled mechanically. Users will be best served by attention to these design issues. Notwithstanding these issues, it is Queensland Health policy and culturally acceptable to have mechanically-cooled air.

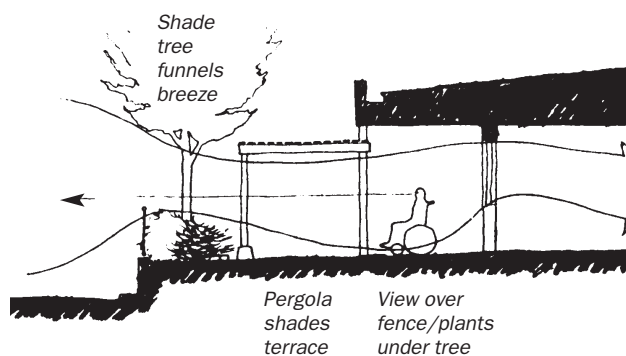
**Daylight** There is evidence to suggest that people need daylight to assist in the maintenance of the body's circadian rhythms and hence ensure good health.



*Desirable orientation for control of sun penetration.*



*Clerestory used to control light, sun and ventilation.*



*External elements used to improve human comfort levels and reduce impact of undesirable elements in landscape.*

# general principles

## Design Objectives

*Desired Outcomes*

**Ensure building design and orientation is appropriate for regional climate.**

**Building design should allow for natural ventilation.**

**Naturally light as many rooms as possible.**

**Where air conditioning is provided enable individual control.**

## Standards and Policies

*Policies for compliance to achieve Desired Outcomes*

**Natural ventilation** Air-condition public health buildings.

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Solar access** Follow principles of low energy and solar access in design, siting and construction.

**Natural ventilation** Site buildings for prevailing summer breezes and shelter from winter winds.

**Daylight** Reduce widths of buildings for daylight penetration.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Solar access** Long sides of building orientated within 20° east and west of north. Pergolas and screens used for sun control. Roof overhangs and awnings used for weather protection and sun control. Living spaces located on north side.

**Natural ventilation** Windows provided on all external walls for cross ventilation. Screen from cold winds with planting, fences, panels. Provide returns and wing walls to entrances.

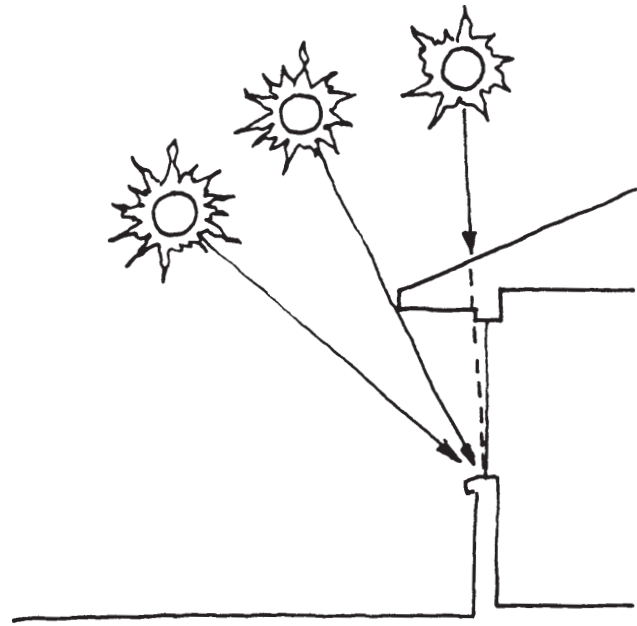
**Daylight** Buildings wider than 10 metres should have skylights or clerestories.

## 10. Energy Efficiency

### Background

**Heating and cooling** Heating and cooling provide the greatest loads of energy consumption. Cooling is especially significant in Queensland. The focus of recent governments and organisations on reducing the emission of greenhouse gases and saving of fossil fuels establishes an appropriate response to minimise energy consumption.

**Lighting** Energy efficiency can be established by attention to lighting policy, management and fitting types.



*The eaves overhang is used to control sun penetration at different times of the day and year.*

# general principles

## Design Objectives

*Desired Outcomes*

**Reduce heating/cooling loads in line with Energy Efficient Guidelines.**

**Provide efficient lighting where it is required.**

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Heating/cooling** Provide space heating/cooling only when required. Employ energy management systems for hot water and chilled water systems.

**Lighting** Use fittings appropriate to use.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Heating/cooling** System shut down when not in use or space not occupied. Economical tariffs used where possible.

**Lighting** Energy-efficient fittings and dimmers used where appropriate to tasks. Motion-sensitive switching used on security lighting near sleeping accommodation.

# general principles

## 11. Interior Design

### Background

**Non-institutional** People feel most comfortable when they are at home. Aspects of the home incorporated into a design will increase levels of consumer comfort and promote recovery.

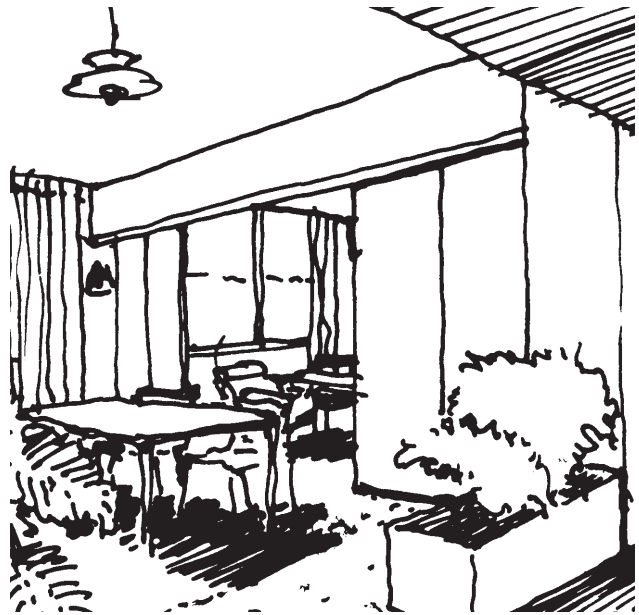
**Colours** Colours may affect the behaviour of some consumers and should be chosen for their beneficial psychological effect. Colour may also be used to differentiate the various functional areas.

**Volume and spaces** Vary volumes to suit function and occupancy. Vary ceiling heights with volumes as this will accentuate the relative importance placed on the particular space.

**Flexibility of use** Large spaces may not be in continual use and the requirement for many smaller areas can be accommodated by the use of flexible space-dividers and moveable walls. Also, some spaces may require specific proportions to allow for flexibility of furniture layouts. This is particularly so with consumer-controlled spaces such as bedrooms at the design stage some consideration should be given to some flexibility of rooms; for example: the possibility of combining two single bedrooms into one larger room or of converting two smaller activity spaces into a larger activity space. This may affect the types of walls used in construction in certain areas, and the activities proposed along those walls.

**Ambience** The ambience of any space is often related to design elements, of form, colour, light and fittings, but is often difficult to isolate in terms of any one element. The personalisation and domestication of space may be related to quite simple gestures, which have quite particular and individual characteristics. Homeliness and domesticity are more likely to be engendered through provision of domestic symbols, scale, form and design attitude that allows for personalisation of space. Avoid institutional use of fluorescent lights.

**Daylight** People need daylight. However, the quality of light governs the usability of one space over another. Light from two directions softens the features of people, furniture and the space itself, in contrast to the glare generated by light from one direction.



*Room dividers allow multi-use.*



*A homely feel is created in consumer spaces.*



# general principles

## Design Objectives

*Desired Outcomes*

**Avoid institutional ambience for living rooms and bedrooms.**

**Avoid colours that have detrimental effects on mood.**

**Ensure adequate volumes for peak occupancy.**

**Ensure users are comfortable with spaces under their control.**

**Provide domestic mood or symbols that are in keeping with cultural values of users.**

**Maximise use of natural light throughout.**

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Non-institutional** Promote domestic scale for furniture, spaces, furnishings. Provide sense of territory with personal spaces. Avoid over use of fluorescent lights.

**Colours** Use colour for therapeutic effects. Delineate functional areas with colour.

**Volumes and spaces** Ensure larger volumes have proportionately higher ceilings.

**Flexibility of use** Ensure large spaces are divisible. Room sizes, shapes and elements must allow varied furniture arrangements.

**Ambience** Shape, illuminate and colour indoor spaces to appear domestic. Provide opportunities to personalise some spaces. Allow control of lighting by occupant of space.

**Daylight** Avoid deep-plan residential areas. Ensure natural light falls into habitable rooms from more than one direction.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Non-institutional** Bedrooms to sleep one person with the possibility of two, with ensuite toilet facilities. Living to maintain maximum 0.6 m modules. Storage for personal belongings close to bedrooms.

**Colours** Purple, black and red to be avoided.

**Volumes and spaces** Express important spaces in volume. Varied ceiling heights.

**Flexibility of use** Room dividers to provide varying room sizes. Some blank walls in bedrooms to accommodate varying bed positions.

**Ambience** Soft, homely colours and lighting used. Alcove provided for each person in bedroom for hobbies etc. Bedside lamp and power outlet provided.

**Daylight** Windows in two walls, clerestory, skylights, and large windows opposite light-coloured walls.

## 12. Interior Elements

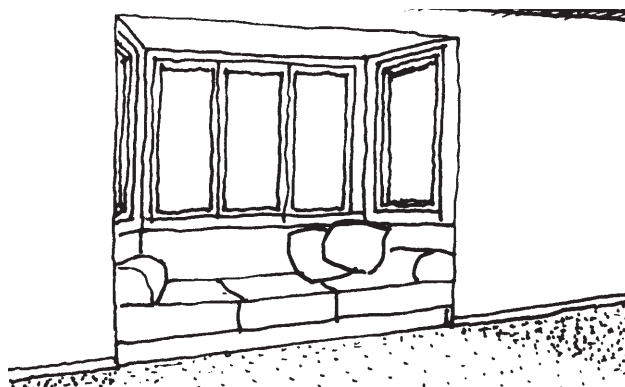
### Background

**Floors** Floors in particular provide images of institutional living because of the practice of having only one material type throughout. To avoid symbols of institutional buildings, floor surfaces and colours are most appropriately subjected to a variety of texture, type and colour.

**Ceilings** Ceilings can be provided in a variety of types and textures to provide different ambience and variety within spaces. Volumes and forms of ceilings can increase potential ventilation.

**Walls** Walls need to provide a variety of containment functions while still fulfilling the need for light, privacy, security and acoustic control. Different wall types have applicability for fire control, structural sufficiency (either as supporting or bracing walls) and for encasing services. Wheeled furniture and some consumer behaviour require robust surfaces and protection.

**Doors and windows** Doors and windows have different applicability in relation to use and position. Size of openings affects structural requirements and energy efficiency. Some special security options may need to be included.



*An alcove in a communal area allows two people to be together to converse or play.*



*Glazing between communal areas and circulation connects these spaces, creating interest and life.*

# general principles

## Design Objectives

*Desired Outcomes*

**Provide comfortable, decorative, serviceable floor finishes.**

**Provide ceilings which make people feel comfortable and secure.**

**Provide easily cleaned, damage-resistant, homely, sound-absorbent walls. Plan for flexibility.**

**Provide functional, well-proportioned, low-glare doors and windows.**

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Floors** Assess service conditions and err on domestic side of material selection.

**Ceilings** Vary ceiling height with floor area.

**Walls** Provide transparency to some walls to allow continuity of space. Use wall coverings which are non-institutional in appearance and feel. Separate structure and enclosure.

**Doors and windows** Position openings to suit internal space and relationships with outdoors. Let people see out while seated. Make doors difficult to damage.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Floors** Commercial quality carpet, non-slip tiles, cork tiles, parquetry. Maintenance program to ensure longevity.

**Ceilings** Minimum 3.0m height for multi-occupant spaces; minimum 2.4m height for single-occupant spaces; minimum 2.1m height for services spaces, alcoves, bathrooms etc.

**Walls** Glaze some sections of walls between communal spaces and circulation areas. Locate storage in walls. Use materials which allow removable infill between structural supports.

**Doors and windows** Wide low sills. Windows in alcoves in common areas. Deep reveals. Robust door jambs. Avoid horizontal rails at eye level (standing or seated). Glaze in small panes.

## 13. Interior Environments

### Background

**Acoustics** The provision of mental health care is often undertaken in private therapy sessions where acoustic requirements of spaces are paramount. Walls, doors, ceilings and windows may all need some measure of acoustic privacy control. The seclusion and acute care areas may require sound attenuation and reverberation control.

**Ventilation** Most spaces may be air-conditioned. However, some occupants may wish to open windows in some spaces in the event of air-conditioning maintenance. Un-air-conditioned spaces will need natural ventilation.

**Lighting** Use light to structure internal spaces, highlight points of interest and obviate detrimental effects such as a tunnel effect in corridors. Avoid the use of downlights in areas where consumers may be on stretchers, as light may shine in their eyes. Indirect lighting is the most desirable and should be used wherever possible.

**Cooling/heating** Queensland Health has a policy of air-conditioning all public buildings. It is a precondition that there is equitable accessibility for all consumers. The provision of air cooling is becoming more culturally acceptable in this state despite the debate about energy efficiency and ecological sustainability. It is possible that some areas of buildings do not require air cooling. Users need individual control of air cooling strategies, heating and ventilation control and fresh air.



*A concentration of light is used to create interest and focus within spaces.*



*A fireplace is used as a focus within a communal area while also heating the space.*

# general principles

## Design Objectives

*Desired Outcomes*

**Promote reduced ambient noise levels.**

**Promote daylight conditions.**

**Promote natural methods of ventilation where it will be effective.**

**Provide physically comfortable space.**

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Acoustics** Use absorptive surfaces wherever practical. Reduce reflective surfaces whenever possible.

**Lighting** Vary lighting levels to suit function of space. Allow user to manipulate lighting to suit task. Imitate daylight with artificial lighting.

**Ventilation** Use openable windows for all spaces. Provide effective cross ventilation.

**Cooling/heating** Provide responsive controls. Avoid hot and cold zones in building. Allow occupant to control temperature in some spaces.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Acoustics** Carpets on floors except in highly serviced areas and wet areas.

**Lighting** Pools of light at seats, entrances, stairs, passageways, and over tables to emphasise importance. Reduce glare.

**Ventilation** Spaces without an external wall may require mechanical ventilation.

**Cooling/heating** Fireplaces in communal living spaces may be an option. Localise climate control to space involved.

## Standards and Policies

*Policies for compliance to achieve Desired Outcomes*

**Cooling/heating** It is Queensland Government policy to air-condition all public buildings.

# general principles

## 14. Interior Fixtures and Fitments

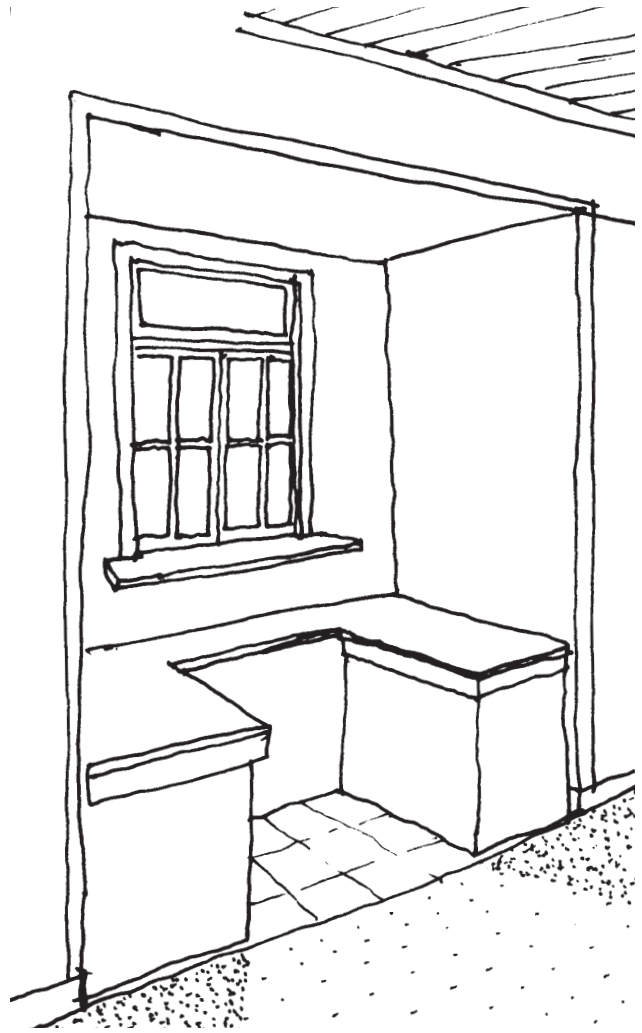
### Background

**Fixed furniture** Where functions of rooms are known and do not require flexibility, built-in and fixed furniture is preferred.

**Furnishings** Incontinence, accidental spillage and other acts may necessitate removal of cushions, covers, upholstery, bedding etc. for washing. Domestic-style fabrics may not protect furniture sufficiently. Water-resistant under-covers should be considered where water-resistant covers are inappropriate to use.

**Fixed equipment** Health-care rooms often require specific fixed equipment for efficient operation. The purchase and installation of fixed equipment is often a result of particular action taken during standardised purchase or inclusion. Where such equipment is required, the manufacturer's instructions and specifications are the appropriate starting point for design.

**Loose furnishings** Loose furnishings are often established during the operation of a facility. Where possible, attention should be given to choice and location in keeping with other design objectives.



*Seats are built into alcoves in communal areas.*

# general principles

## Design Objectives

*Desired Outcomes*

**Provide adequate, conveniently located, functional furniture.**

**Provide efficient, reliable, low-maintenance, space-saving, economical equipment.**

**Impart a comfortable, domestic atmosphere to interior spaces.**

**Provide easily maintained furnishings, with colours and textures of domesticity.**

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Fixed furniture** Provide close to areas where used. Locate to optimise usefulness.

**Fixed equipment** Ensure equipment is ideal choice for purpose within restraints of selection criteria.

**Loose furniture** Provide variety of loose furniture to provide choice for users.

**Furnishings** Provide variety in materials, textures and colours.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Fixed furniture** Built-in seats provided in alcoves. Built-in storage in walls between spaces requiring acoustic insulation. Open shelving for residents' use in bedrooms. Picture rails throughout.

**Loose furniture** Furniture chosen from different sources. Different styles of domestic furniture selected.

**Furnishings** Warm colours and soft textures chosen. All curtains in the residents' rooms to be operated by them.



# general principles

## 15. Signage and Art

### Background

**Emergency signs** Where special provision is made for emergency services, locate easily identifiable directives in clear view of the persons performing the service.

**Building complex identification** Way-finding in a complex is easier if the different spaces, both internal and external, are named. A graphic system should be consistent throughout the complex except where required to comply with law or statute.

**Artwork** Artwork can contribute to rehabilitation of consumers, and help stimulate staff. Choose artwork which generates favourable psychological responses in the occupants of the particular space.

abcdefghijklmnopqrstuvwxy

ABCDEFGHIJKLMNOPQRSTU

1234567890 ?!@#\$%^&\*()

*Use friendly lettering styles.*



*Display calming scenes appropriate to a therapeutic environment.*

# general principles

## Design Objectives

*Desired Outcomes*

**Ensure that each emergency service is readily identifiable.**

**Ensure that addresses can be easily found within the complex.**

**Contribute to ambience and well-being of residents by providing suitable artworks, that are culturally appropriate and therapeutic.**

## Standards and Policies

*Policies for compliance to achieve Desired Outcomes*

**Emergency signs** Comply with BCA AS1216, AS2786.

## Design Guidelines

*Strategies for achieving Desired Outcomes*

**Emergency signs** Provide clearly delineated circulation routes. Label spaces and facilities appropriate to service within.

**Building complex identification** Prominently display name of complex at major entry points. Name internal streets, buildings, courtyards and other identifiable common areas.

**Artwork** Avoid abstract or disturbing items and subjects. Provide inoffensive artwork appropriate to the various cultures represented by the residents.

## Performance Criteria

*Performance indicators for achieving Desired Outcomes*

**Emergency signs** Clear directions for emergency vehicles and personnel. Signage is easily read.

**Building complex identification** In large developments, maps should be located at major entry points and be easily read from a vehicle. Use weather- and vandal-resistant materials.

**Artworks** Change artworks in bedrooms to suit consumer in residence. Use mobile 'Art Cart' with a collection of appropriate works.

**Naming Strategy** Choose names and symbols that can be easily remembered by users from diverse cultural backgrounds.

# Glossary

# Glossary

**The following explanations are not provided for statutory purposes, but as a guide to terms which may not be readily clear to readers. The plain English meaning of words is generally intended throughout the document.**

**The key words shown underlined are directly referred to in the document.**

**accommodation and space standards** The strategies and information required for a particular space or room; also referred to as Room Data Sheets.

**acute** Recent onset of severe clinical symptoms of mental illness, with potential for prolonged dysfunction or risk to self and/or others. Treatment efforts focused upon symptom reduction. Expectation of substantial improvement.

**acute in-patient unit** A mental health facility for treatment of consumers with acute and immediate treatment requirements.

**appropriate design** The design outcome that reflects, cultural, management, clinical and building standards, relevant to this period in time and Queensland.

**assumptions** The items and rationales that derive from assumed criteria.

**asylum services** Extended in-patient services for the purpose of provision of specific mental health treatment and rehabilitation.

**Australian standards** The relevant and current Australian Standards for design or product.

**balcony** Any balustraded platform, 0.3 metres or more above adjacent finished ground level, either cantilevered or supported over open space, with access from the building via a door or window and with a minimum width of 1 metre and a maximum width of 2.7 metres.

**BCA** Building Code of Australia.

**building guidelines** The hitherto agreed Queensland Health policy on accommodation guidelines, building types and design principles for mental health facilities.

**carer** A person whose life is affected by virtue of his or her close relationship with a consumer, or who has a chosen and contracted caring role with a consumer.

**case management** The mechanism of ensuring access to and coordination of the range of services necessary to meet the identified needs of a person within the integrated mental health service. People with mental disorders requiring case management are usually living in the community and have long-term needs necessitating access to health and other relevant community services.

**communal open space** Useable public open space for recreation and relaxation of residents of a development which is under the control of a body corporate.

**community health centre** A building or facility for the provision of a centre for, and a symbol of, a community health service.

**community mental health** The provision of specialist mental health care from community-based services.

**concept plan** A plan showing in outline the overall development intentions for an urban housing development, including proposals for staging.

**consumer** A person using or having used a mental health service, or who would use a mental health service or program if one was accessible, affordable or appropriate.

**continuity of care** The provision of barrier-free access to the necessary range of health-care services over any given period of time, with the level of care varying according to individual needs.

**dB(A)** Decibels of the 'A-scale' – a set frequency-weighted scale of noise which allows for lack of sensitivity of the ear to sound at very high and very low frequencies.

**decentralising** The removal of services from one facility to a more remote facility in another region or sector.

**development area** An area identified as having potential for building development following strategic planning and study.

**development area plan** A plan which identifies the precise conditions for development in a Development Area.

**disability** Any restriction either long-term or episodic or lack of ability to perform an activity within the expected range for a human being.

**domestic** Scale, proportions, materials and ambience of a home imparted to a building, structure, space or item of furniture in the interest of conveying feelings of security, familiarity and comfort to users.

**economic evaluation** A feasibility study which recognises the inter-relationship of capital cost, recurrent cost, investment and return, and life cycle costs for individual facilities and services.

**engineering services** Those services associated with the maintenance and operation of the buildings, roads, infrastructure and services for a mental health facility.

**extended in-patient acquired brain injury unit** An in-patient mental health service for consumers with an acquired brain injury associated with a mental disorder or severe behavioural problems. To be located within a tertiary care facility for purposes of specific and long term treatment and rehabilitation.

**extended in-patient dual diagnosis unit** This service is for the group of mental health consumers with a mental disorder and concomitant intellectual disability, who, because of the nature of their condition, cannot be managed in a community or residential setting.

**extended in-patient treatment** Longer-term treatment provided where a severe level of impairment exists. Clinical symptoms may be stable although severe and unremitting. Treatment is focused on prevention of deterioration and reduction in impairments, with improvement expected over a longer period than in acute treatment settings.

**extended secure unit** Extended secure accommodation and treatment services for consumers required by the nature of their mental disorder to be held for long periods in a facility for the safety of both themselves and those with whom they may come into contact.

**facility guidelines** The strategies and general planning information that pertains to individual mental health buildings or facility types.

**frontage** The street alignment at the front of a lot and, in the case of a lot that abuts two or more streets, the boundary of which, when chosen, would enable the lot to comply with these provisions.

**frontage zone** The area of land between the building and the street.

**FTE** Full time equivalent, being reference to a hypothetical employee.

**functional plan** A plan describing the facility types, the area or site in which they will be situated, and estimates of staffing, residents, cost and recurrent cost.

**general principles** The strategies for successful design that apply generally to mental health facilities. Particular strategies are found in facility guidelines and accommodation and space standards.

**geriatric and confused elderly services** A residential service for the aged including those who may have difficulties with confusion, behaviour problems or frailty.

**ground services** Those services associated with upkeep of grounds and site features for a mental health facility.

**guideline** A statement or description of one or a number of design strategies which would normally achieve the objective. This is noted as Design Guidelines in the document.

# glossary

**habitable room** A room used for normal domestic activities that:

- includes a bedroom, living room, lounge room, music room, television room, kitchen, dining room, sewing room, study, playroom and sunroom; but
- excludes a bathroom, laundry, water closet, food storage pantry, walk-in wardrobe, corridor, hallway, lobby, photographic darkroom, clothes drying room, and other spaces of a specialised nature occupied neither frequently nor for extended periods.

**high security unit** Extended accommodation and treatment services for consumers required by law or by their condition to be held in a secure facility for long periods (possibly whole of life).

**hotel services** Those services required for the operation of a mental health facility, including patients' laundry, dining and food preparation, cleaning and other services associated with term residential care.

**indigenous people** Aboriginal and Torres Strait Islanders.

**infrastructure** A group of assets which the community owns through its government and which is essential to the well-being of the community. It includes human as well as physical services required for a residential area. Physical services include engineering, civil, hydraulic, electrical and mechanical services, roads and fire safety.

**infrastructure engineering** Engineering services, civil, hydraulic, electrical, mechanical, roads, fire safety.

**in-patient facility** A health facility to which consumers are admitted for a term of treatment, for a short, medium or long stay.

**integration** This refers to the process whereby a mental health service becomes coordinated as a single specialist network which links assessment, treatment and rehabilitation to ensure continuity of care.

**intellectually handicapped service** Specific services and treatment for the intellectually handicapped, normally provided by the Department of Families, Youth and Community Care.

**intersectoral linkages** Collaboration between mental health services and other relevant Commonwealth, State/Territory and local government programs and the private and community sector to ensure that the overall needs of people with mental disorders and mental health problems are effectively addressed.

**land parcel** A defined area of land that may be excised from a greater property as a subdivision.

**landscape plan** A plan or document outlining the extent, type and location of landscaping proposed for a development.

**land take** The amount of land required for a facility.

**limitations of study** Geographical and policy boundaries of the study.

**mainstreaming** This emphasises the importance of mental health services being an integral part of health, housing, social, welfare and recreational services, thereby helping to ensure that stigma is reduced and access to services by people with mental disorders and mental health problems is equivalent to that received by the rest of the community. Administration of the mental health service system will occur in the same way as other health and welfare services.

**masterplan** A plan that establishes the site, site relationships, facility type and situation, capital cost estimates and program for development.

**mental disorder** A recognised, medically diagnosable illness that results in the significant impairment of an individual's cognitive, affective or relational abilities.

**mental health** The capacity of individuals and groups to interact with one another and the environment in ways that promote subjective well-being, optimal development and use of cognitive, affective and relational abilities, and the achievement of individual and collective goals consistent with justice.

**mental health problem** A disruption in the interactions between the individual, the group and the environment, producing a diminished state of mental health.

**mental health services** Specialised health services which are specifically designed for the care, treatment and support of people with mental disorders.

**multi-disciplinary clinical team** The identifiable group of mental health personnel comprising a mix of professionals responsible for the treatment and care of persons with a mental disorder or a mental health problem.

**noise attenuation zone** The area within which measures should be taken to reduce the exposure of noise from external sources to acceptable levels.

**objectives (or element objectives)** Statements of the desired outcomes to be achieved in the completed development. These are noted as [Design Objectives](#).

**performance criteria** Criteria to be used in the preparation, submission and assessment of development proposals for measuring performance of the proposals against element objectives. These are noted as [Design Standards](#).

**policy** The required minimum design outcome for compliance with Queensland Health requirements. Policies are deemed binding on designers unless dispensations are formally sought and given. This is noted as [Design Policy](#).

**primary health-care services** The first level of contact with the health system. Primary health care blends personal care such as treatment, rehabilitation and therapeutic interventions with local efforts in the promotion of health and the prevention of illness. It provides services which are accessible, acceptable and affordable for the care of the main health problems of the community and is based on significant community participation.

**private open space** An area of land suitable for private outdoor living activities.

**program management** A system of management which involves the integration of planning, resourcing and evaluation processes to achieve stated outcomes. Minimum requirements are set out in Public Finance Standard 310.

**project definition plan** A document that establishes and defines the detail and measures for facility or building that is required by the client or user group.

**psychogeriatric** Older consumers suffering from a mental disorder and a condition related to ageing. The key identifying feature of this group is their need for both specialist mental health and geriatric services.

**psychogeriatric services** An extended in-patient service for mental health consumers co-located with geriatric (aged) care services.

**public open space** Land used or intended for use for recreational purposes by the public. Includes parks, public gardens, riverside reserves, pedestrian and cyclists access ways, playgrounds and sports grounds.

**public street** refer to *street*.

**rehabilitation** Key aim is the reduction of functional impairments that limit independence. Rehabilitation effort is focused on the disability dimension and the promotion of personal recovery. Expectation of substantial improvement over the short-to mid-term. Relatively stable pattern of clinical symptoms; emphasis on prevention of illness relapse.

**rehabilitation and extended treatment unit** An in-patient service for the group of mental health consumers who, because of the potential for rehabilitation and response to treatment, require admission over an extended period of time.

**secondary health services** The level of the health-care system which includes skilled and specialist care for more technical health problems, such as through regional hospitals and specialists.

# glossary

**security services** The service associated with the maintenance of security of a mental health facility, including provision of 'search and rescue' at large or AWOL consumers, technical and physical surveillance of property and assets, and the long-term maintenance and enhancement of security features.

**secure treatment unit** Services provided for consumers who on the basis of clinical assessment require treatment in a closed setting to ensure the safety of the person, the staff and the community.

**serious mental illness** A set of diagnosable disorders that result in significant impairment of an individual's cognitive, affective and relational abilities.

**services** Mental Health Services.

**setback** The minimum distance which a wall face or window is required to be from a property boundary or another window to a habitable room. It is measured as the horizontal distance between the proposed wall or window and the boundary or other window plus any amount greater than 600 millimetres that any eaves extend beyond the wall face.

**site analysis plan** A plan which demonstrates an appreciation of a site and its context to identify opportunities and constraints on site layout and design. The plan may include information on topography and services, orientation, existing building on site, vegetation on site, adjoining property conditions, views, noise sources and street character and context.

**site area** The area defined by natural or artificial features that can be used as a site.

**site development plan** A plan of the development showing its boundary, orientation and access, response to streetscape, floor plan and elevations of the proposed buildings.

**site** The lot(s) or defined area of land on which a facility stands or is to be erected.

**social justice** A framework which requires policy development to redress disadvantage and inequality through coordinated government action to ensure a fairer distribution of resources and opportunities using the principles of access, participation, equity and rights.

**standard** The statement that describes the design outcome required to achieve the objective. This is noted as the Design Standard.

**stay** Short stay is from overnight to several weeks; medium stay is from weeks to several months; long stay is months to possible permanent habitation.

**street** Any street, lane, footway, square, court, alley, right of way, driveway or passage incorporating the full width from property line to opposite property line as well as the street pavement and the verge.

**streetscape plan** The proportion of the development plan showing the visible components within a street (or part of a street) between facing buildings, including the form of buildings, setbacks, fencing, landscaping, driveway and street surfaces, utility services and street furniture such as lighting, signs, barriers and bus shelters.

**support services** Administration, staff amenities, kitchen delivery, laundry, hotel services, maintenance, security.

**terms of reference** The documents and information that specifically establish the parameters of the study and prescribe the limits of study and research.

**tertiary health services** The level of the health-care system which includes highly specialised care and programs.

**user** The expected population using the facility or space. This generally refers to the public, but can include employees and consumers.

**wayfinding** The ease with which one proceeds and is facilitated through an environment from one point of interest to another. Wayfinding systems include such components as basic layout of building and site, interior and exterior landmarks, views to outside, signs, floor and room numbering, spoken directions, maps, directories, logical progression of spaces, colour coding.

**window** Includes a roof skylight, glass panel, glass brick, glass louvre, glazed sash, glazed door, translucent sheeting or other device which transmits natural light directly from outside a building to the room concerned.

**youth** Young people between the ages of 13 and 18. Also referred to as 'adolescents'.

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