

# Bourke Integrated Primary HealthCare Centre- (BIPHCC)

## Operational Plan

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Final | February 2025



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# Version Control

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V1.0	21 August 2023	Project Manager for review & distribution to BACHS
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# 1 Introduction

The Bourke Aboriginal Corporation Health Service (BACHS) is an Aboriginal Community Controlled Health Service (ACCHS) providing primary health care services initiated and operated by the local Aboriginal community to deliver holistic, comprehensive, and culturally appropriate health care to the community.

Their current facility is located at 61 Oxley Street, Bourke, NSW 2840. Australian Government, Department of Health funding of \$8 million has been provided from the Closing the Gap – Major Capital Works Program for the planning and construction of a new facility to be located on land at 88-96 Mitchel Street, Bourke. The site has an area of 2080sqm. An additional grant has been obtained to equipment the centre for the delivery of telehealth services.

This new centre will bring together the various geographically segmented primary health care services of the BACHS under one roof and allow for the expansion of services to service Bourke and the surrounding region.

This Operational Plan documents the planning principles, scope of services, and operational assumptions and requirements that have informed the facility planning and design for the new centre.

## 1.1 Acronyms

The following acronyms are used in this plan:

- ACCHS: Aboriginal Community Controlled Health Service
- AED: Automated External Defibrillator
- AGP: Aerosol Generating procedures
- BACHS: Bourke Aboriginal Corporation Health Service
- BIPHCC: Bourke Integrated Primary Health Care Centre (working title only – centre has yet to be named)
- EMR: Electronic Medical Record
- IAHP: Indigenous Australian Health Program
- MDT: multidisciplinary team
- PPE: Personal Protection Equipment
- PMS: Practice Management Software
- RACGP: Royal Australian College of General Practitioners
- Sqm: square metres

## 1.2 Reference Documents

The following reference documents have been used to inform the development of this plan:

- Australasian Health Facility Guidelines (AusHFG) with specific reference to Part B - Health Facility Briefing and Planning, 155 – Ambulatory Care and Community Health, Revision 7, September 2020
- RACGP, General Practice Business Toolkit - Module 2, Your practice premises - Designing your practice
- RACGP, Standards for general practices, 5<sup>th</sup> edition, Feb. 2023
- RACGP, Ventilation and air-circulation strategies in general practice , 2023

## 2 Background

### 2.1 Bourke Aboriginal Corporation Health Service

The Bourke Aboriginal Corporation Health Service (BACHS) is an Aboriginal Community Controlled Health Service (ACCHS) providing primary health care services initiated and operated by the local Aboriginal community to deliver holistic, comprehensive, and culturally appropriate health care to the community in Bourke and the Bourke region in remote NSW.

BACHS serves the local Aboriginal and Torres Strait Islander community of more than 800 individuals (as at the 2016 Census). In 2021 direct clinic services were provided to nearly 1500 client presentations, a 10% increase over the prior year. This represents an uptrend in delivery needs over previous years, despite challenges resulting from the COVID19 pandemic. Forecast service demand extrapolated to 2026, when the new unit opens, is forecast to be around 2,400 client presentations per annum as the population ages.

### 2.2 Case for Change

BACHS currently operates from two separate locations in Bourke and has for many years. The facility at 61 Oxley Street has housed the primary health care services for 35 years. The other site is a converted 3-bedroom house at 8 Sturt Street which accommodates additional auxiliary services and hosts allied health services for specific operational needs as required. Both sites are at functional capacity and are unable to be expanded beyond their current footprints to address service capacity constraints and respond to growth in service demand.

In addition to no longer being fit for purpose from a capacity and operational perspective, the aging facilities are beginning to require increased maintenance and upkeep to ensure patients receive an appropriate level of comfort when visiting the clinics.

The capacity issues are contributing to increased waiting times for patients booking appointments exacerbated by a growth in emergency or unforeseen presentations by clients who will not use alternate health service providers.

The development of a purpose-built facility on one site will enable the sustainable development of Aboriginal medical services to meet the growing demand in the region and create a 'one-stop shop' for the community'. Funding has been provided for Stage 1 of the project which will focus on accommodating primary health services and providing the base infrastructure for core operational facilities such as consultation rooms, waiting rooms, staff spaces including meeting rooms and administrative areas. Future stages will accommodate services not covered under IAHP.

A purpose-built facility will provide clinics which are culturally appropriate, safe, welcoming, and comfortable. It will also offer access to a range of health services in the one location which will facilitate integrated, client focussed care and improved health outcomes.

Provision of contemporary work environment will assist in the recruitment and retention of critical health staff and facilitate compliance with work health and safety policy requirements and continued accreditation with the Australian General Practice Accreditation Limited and the Royal Australian College of General Practitioners

## 2.3 Vision

The vision for the new Bourke Integrated Primary Health Care Centre (BIPHCC) is to improve and bring together all the primary health care services delivered by BACHS to improve Aboriginal health in the Bourke region.

As defined in the Constitution of the National Aboriginal Community Controlled Health Organisation (NACCHO):

*“Aboriginal health” means not just the physical well-being of an individual but refers to the social, emotional and cultural well-being of the whole Community in which each individual is able to achieve their full potential as a human being thereby bringing about the total well-being of their Community. It is a whole of life view and includes the cyclical concept of life-death-life.’*

## 2.4 Planning Principles

The planning principles for the BIPHCC were developed in by BACHS and the design team. These principles will be used to evaluate planning and design options at key milestones during the project development process.

### Principle 01

#### Bourke Appropriate

Through a process of designing with country the project will respond to the uniqueness of the town of Bourke and the specific cultural and functional needs of its community.

### Principle 02

#### Efficient, inclusive & flexible

Provide highly accessible, culturally appropriate spaces for the provision of holistic healthcare services.

### Principle 03

#### Plan for the future

Allow for the changing needs of the community by designing spaces which are adaptable and will allow for future expansion.

### Principle 04

#### Climate responsive & sustainable

Design for the Bourke climate, use passive design principles to increase thermal comfort and reduce operational costs. Reduce material use through simple forms and building envelope.



### 3 Description and Scope of Services

The BIPHCC will offer a comprehensive range of primary health care and specialised medical services for the local Aboriginal people provided by a combination of in-centre staff and visiting service providers. The centre will be designed to accommodate the following services.

Service	Staff (headcount)	Frequency	Design Requirement
<b>Permanently on-site</b>			
General Practitioner (GP)	2 GP's	5 days/ week	2 consult rooms
Nursing Services	2 nurses	5 days/ week	Access to 2 treatment bays & an interview room
Aboriginal Health Worker Services	4 including trainees	5 days/ week	Access to a treatment bay & an interview room
Program Services – Social & Emotional Wellbeing (SEWB), Alcohol & Other Drugs (AOD), Family Health e.g. Mums & Bubs, Mental Health including psychology	Up to 6 including trainees	As required	Access to treatment, interview & meeting/multipurpose space for centre-based activities including counselling
<b>Visiting services</b>			
Specialist Services – Cardiology, Endocrinology, ENT etc	Specialist, registrar plus nurse	2 days, Thursday-Friday, every 2-3 months	Access to bookable interview & consult room
Audiology – Healthy Ears	Audiologist	2 days, Thursday-Friday, every 2-3 months	Access to bookable interview room
Dietetics	Dietitian	Weekly	Access to bookable interview room
Dental	Dentist, Dental Nurse & Oral Hygienist	2 days, Thursday-Friday, every 2-3 months	Access to dental surgery with two chairs. Reusable equipment provided by contractor - autoclave required for sterilisation of kit on-site, as required
Podiatry	Podiatrist	2 days, Thursday-Friday, month	Access to bookable treatment room with podiatry/multipurpose chair. Reusable equipment provided by contractor - autoclave required for sterilisation of kit on-site, as required
<b>Non-Clinical Staff</b>			
Front of House/Reception	Included in office / workstation count below	5 days/ week	There are 2-3 drivers, they're not always there at the same time, if there are more than one in the clinic, others can wait in staff room or open plan office/ workstation area.



Service	Staff (headcount)	Frequency	Design Requirement
	device		
CEO	1	5 days/ week	
Office – Workstation / Administrative staff	8	5 days/ week	There are 8 workstations to cover peak office demand.
<b>Total</b>	32		Peak headcount

## 4 Model of Care and Operational Requirements

### 4.1 Operating Hours

- The centre will generally operate Monday to Friday from 0800 – 1700 hours with the option to provide weekend and evening services to meet specific service and program needs.

### 4.2 Client Access and Flow

- Client access to clinic services will be primarily managed through scheduled appointments with some capacity to see drop-in clients based on staff availability and clinical urgency.
- Clients and visitors will access the centre via the entry/waiting area and present to reception.
- Access to the clinic zone will be controlled by reception staff. Clients and family will remain in the waiting area until called through to the clinic zone by staff.
- Clients will typically be triaged by the nursing staff before seeing the GP or specialist.
- Public toilets and outdoor space will be available adjacent the waiting area for use by clients and visitors to the centre.
- Group /multi-purpose activity/meeting space will be accessible from public waiting area to streamline access and avoid the need for clients and visitors attending these areas to traverse the clinic zone.

### 4.3 Centre Operation and Management

- The BIPHCC will be an accredited general practice and operate in accordance with the Royal Australasian College of General Practitioners (RACGP) [Standards for general practices](#).
- Administrative staff and drivers will be centralised where possible to ensure continuous access to frontline services such as reception, enquiries, bookings, transport etc.
- Designated spaces (e.g. consult rooms, interview room, treatment bays) will be provided for use by centre-based GP's, practice nurses and aboriginal health workers.
- Bookable spaces (e.g. consult rooms, interview rooms, treatment rooms and group/meeting rooms) will be provided for scheduled activities including visiting specialist clinics, audiology, program activities including counselling and group work, board meetings, and training/education sessions etc.

### 4.4 Distressed and Agitated Clients

- Distressed or disruptive clients will be escorted to the interview room (if unoccupied) or a vacant consult/treatment room where they have privacy and can safely de-escalate with the support of one or more staff.
- Consider the provision of one or more interview/consulting rooms with direct access to the outdoors so that clients can sit outside if they wish or leave the centre without having to pass through the waiting room.
- Reception, interview, client meeting, consulting and treatment spaces will have a secondary egress door or pathway to prevent entrapment.

## 4.5 Emergencies and Distressed Clients

### Medical Emergency

- Should a client, visitor or staff member require emergency care an ambulance will be called using 000. Interim support and care will be provided by the on-site medical and nursing staff. A resuscitation trolley with equipment including an Automated External Defibrillator (AED) and medicines for use in medical emergencies will be maintained within the clinic zone in a central location.

### Personal Threat

- If staff are concerned or feel personally threatened by a person, they will activate the code black response plan. If it is safe to do so, they will remove themselves, consumers, and members of the public from the area or threatening situation.
- In addition to a secondary egress pathway, staff working in public access areas such as reception, interview, client meeting, consulting and treatment spaces will have access to a duress alarm (either fixed or personal) for use when they feel threatened. If safe to do so staff will activate the duress alarm and call NSW Police Emergency using 000.

## 4.6 Health Information Management

- An Electronic Medical Record (EMR) will be maintained for each patient of the BACHS. Medical records will be securely stored in the cloud.
- Authorised staff will have access to Practise Management Software (PMS) for entering and retrieving patient information and clinical decision support via desktop computers and/or mobile devices in relevant clinical and staff work areas.

## 4.7 Infection Control and Prevention

- Infection control and prevention provisions will be in accordance with the RACGP Standards for general practices, [Criterion GP4.1](#) Infection prevention and control, including sterilisation (for designated reusable dental and podiatry equipment).
- Standard and transmission based precautions will apply at all times, based on the assumption that all blood and body substances, including respiratory droplet contamination, are potentially infectious. Provisions will include:
  - Effective patient triage, appointment scheduling and streaming of patient flow to minimise the risk of transmission.
  - Access to hand hygiene, Personal Protection Equipment (PPE) when undertaking physical examinations, performing procedures, cleaning, dealing with spills and handling waste.
  - Clinical hand basins and PPE in all consult and treatment rooms.
  - A designated treatment room with exhaust to the outside for the isolation of infectious patients (or those suspected to be infectious) with access to toilet/shower facilities. This room will also be used for procedures with a heightened cross infection risk such as spirometry. Terminal cleaning of this room will follow use for isolation for infection control purposes.
  - An autoclave for the sterilisation of single use items used by the visiting podiatry and dental services managed in accordance with the standards for a non-accredited offsite sterilisation facility.
  - Designated clean storage space for single use sterile consumables.
  - Indoor ventilation that achieves a minimum of 6-8 air changes per hours, as stipulated in the [RACGP Ventilation Fact Sheet](#).

## 4.8 Medication Management

- Medications will be managed in accordance with the relevant RACGP Standards for general practices. Provisions will include:
  - A controlled access clinical utility/medication room with drug safe suitable for the storage of Schedule 4 and Schedule 8 medications, and a purpose designed vaccination refrigerator with temperature monitoring to facilitate cold chain management.
  - Cold chain management will require a back-up battery for the vaccination refrigerator and an external power generator.

## 4.9 Medical Gases

- Plumbed medical gases will not be required in the centre.
- Bottled oxygen will be required for emergency use only and will be stored on the resuscitation trolley.

## 4.10 Pathology

- A toilet will be provided for urine and specimen collection within the clinic zone.
- Pathology specimens that are collected by centre clinical staff will be picked up by a NSW Health Pathology courier for off-site processing. Results will be reported electronically via eMR.

## 4.11 Procedures

- Minor procedures include suturing of wounds, complex dressings, excisions etc that may require local anaesthetic (spray or injectables) will be undertaken in a procedure room designated for aseptic and sterile procedures. The room will also be available for the examination and treatment of bariatric patients and those using a wheelchair or mobility aid who may require a hoist for transfer to the examination trolley.

## 4.12 Cleaning

- Cleaning services will be undertaken by BACHS cleaning staff.
- A dedicated cleaner's room with cleaner's sink, handwash basin and storage for cleaner's trolley, cleaning equipment and cleaning materials is required.

## 4.13 Supplies

- Supplies will be delivered to the centre by couriers on behalf of contacted suppliers and received by reception staff.
- Reception staff will be responsible for ensuring that supplies are transferred to the appropriate storage area.
- Boxed consumables will be stored in the bulk store until required at point of use.
- A loading dock will not be required.

## 4.14 Waste Management

- Waste management will be in accordance with the RACGP Infection prevention and control guidelines.
- Waste will be segregated at the point of generation and placed in designated waste containers.

- Waste bins and receptacles will be emptied by cleaning staff.
- Bagged waste and receptacles for collection will be transferred by cleaning staff to an external bin enclosure for routine collection by contracted waste management services.
- The external bin enclosure will be locked and require a hose to wash down empty bins. The size and number of bins is to be confirmed during the design phase.

#### 4.15 Maintenance

- Incidental and scheduled maintenance of medical equipment, building plant and fabric will be undertaken by BACHS contractors.
- Consideration is to be given to the requirement for an on-site maintenance shed for the storage of tools, spare parts and materials.

#### 4.16 Work Health and Safety

- BACHS is responsible for the provision of a safe working environment as required by NSW Work Health and Safety legislation.
- The BIHCC should be designed, constructed, equipped and operated to achieve this.

#### 4.17 Staff Workspace

- A Clinical Hub will be provided within the clinic zone for use by clinic-based and visiting staff for between case write-up, case discussion and collaboration. It is assumed that centre-based GP will use the consult room for case write-up and administrative duties.
- Staff workspace for office-based functions such as administrative, managerial, clinical follow-up, and planning will be located within a secure staff only zone and designed to support both collaborative and focused, individual work.
- The staff zone will provide an enclosed office for Chief Executive Officer (CEO) and workstations for other staff to perform office-based activities. A small meeting room will be available for confidential discussions and group work activities. Utilities such as photocopying and scanning equipment, and staff amenities including a staff room, toilet, and shower facilities will also be provided.
- In addition to the CEO, staff workspace within the staff zone will be available for use by up to 12 centre-based staff including the practice manager, senior administrative officer, program manager, transport personal and other staff requiring a workspace for office-based activities assuming 60% occupancy (8 staff at any one time). Refer **Appendix 1: Organisational Chart** for staff profile.
- Staff performing office-based functions for more than 60% of their working day will be allocated a workstation with other staff having access to a non-allocated workstation as required.
- Board meetings, staff meetings, training and education activities involving more than 4 staff will undertake in a bookable multipurpose purpose/meeting room what will also be used for client activities.

## 5 Functional Relationships

### 5.1 External Relationships

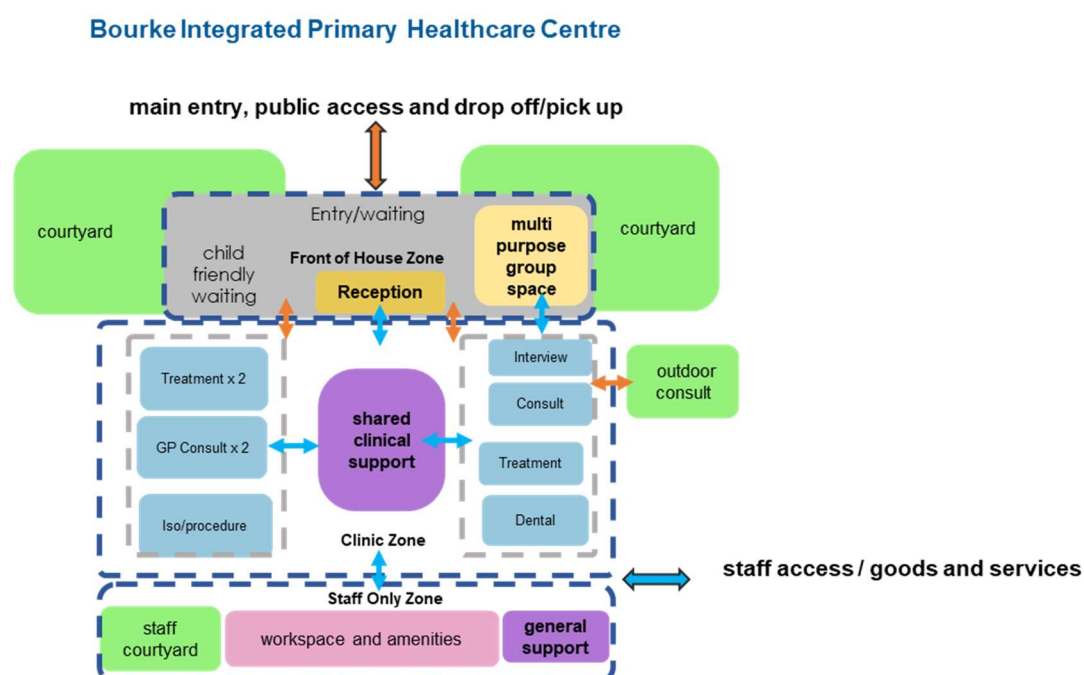
External functional relationships in the following table are prioritised as follows:

- Direct access (collocated with access via a horizontal or vertical route with minimal turns).
- Ready access (proximal vertical or horizontal access).
- Easy access (navigable access but proximity not critical).

Space	Priority	Comments
Drop off/pick up including accessible & ambulance parking	<b>Direct</b>	Movement of clients, carers, visitors and staff
Outdoor space	<b>Direct</b>	Movement of clients, carers family, visitors and staff to therapeutic outdoor space
Waste Enclosure (secure)	<b>Direct</b>	Movement of staff
BACHS Fleet Parking (secure)	<b>Ready</b>	Movement of staff
Staff Parking	<b>Ready</b>	Movement of staff
Public Parking	<b>Ready</b>	Movement of clients and visitors including those with strollers & mobility aids

### 5.2 Internal Relationships

Key functional groupings, adjacencies and flows to support optimal operation are depicted in the following diagram.



## 6 Design Requirements

### 6.1 Design Guidelines

The design of the facility should align with the guidance provided in RACGP Module 2 - [Design your practice](#).

Supplementary guidance on space requirements and fitout is provided in the Australasian Health Facility Guidelines (AusHFG), specifically [Part B 155 Ambulatory Care and Community Health](#) and [Standard Components](#).

### 6.2 General Requirements and Considerations

- A positive, safe and supportive environment that inspires confidence in the services provided and reflects a commitment to client centred care.
- Natural light and views of nature and the sky are important for the social and emotional welling of both clients and staff and are to be maximised.
- Flexible acoustically private spaces for consultation, assessment, treatment, and virtual care.
- Spaces that facilitate teamwork, collaboration, and integration including multidisciplinary team (MDT) consultations and remote patient review and management.
- Choice of both natural ventilation and air conditioning in client access areas, where clinically appropriate, and staff areas to be considered in terms of both environmental quality and sustainability.
- Second egress door for staff egress required in all rooms used for client consulting or meetings.

### 6.3 Information and Communications Technology (ICT)

ICT systems will be integral to the safe and efficient day to day operations of the centre. The following systems, infrastructure and hardware will be required:

- PMS (Communique and Titanium – dental) connectivity at point of care and in all staff work areas
- PMS to include EMR, electronic prescribing, clinical decision support, patient bookings, billings and claiming system, and telehealth.
- Centre-based staff call and duress systems.
- Wi-Fi connectivity to support the use of workstations on wheels (WOWs) & EFTPOS, bring your own devices (BYOD) for staff and clients, and portable telehealth devices.
- Videoconferencing connectivity in consult/treatment/interview rooms and the meeting/multipurpose room to support:
  - Telehealth/Virtual care
  - Multidisciplinary team meetings with clinicians and care partners located off-site
  - Staff education and profession development
  - BACHS management and Board meeting.
- Building Management System (BMS) to monitor critical systems, energy consumption etc.
- CCTV monitoring of designated public access areas such as entry points, waiting areas, corridors and car parks, and recording.



## 6.4 Safety

- Arrange furniture so that the clinician's chair is nearest to the door, so that if there is an aggressive or violent patient, there is a direct exit.
- Install duress alarms in all rooms/spaces accessed by clients and consider a second egress door in each interview/consulting or meeting room.
- Install power points with appropriate safety approval for clinical equipment and technology (e.g. power-adjusted examination beds, ECGs, examination lights, computers) and locate the power points where they are easy to access.

## 6.5 Specific Requirements and Considerations

Functional Sarea Area	Key Requirements
Entry and Drop off-Pickup	A weather projected entry and set down and pick-up area is required at the entrance to the centre with space for short-term parking for two vehicles and ambulance/emergency services parking. Space is to be allowed for turning of ambulance and transit vehicles.
Waiting Area	<p>First impressions on entering the centre will impact on the overall experience of the service by clients and visitors. The waiting space is to provide a welcoming and calm place, with natural light, views of nature and access to an outdoor area.</p> <p>A choice of seating types and arrangements is to be offered e.g. two seater sofas for parents with children or couples, chairs with arms for older people, clusters of seats for family groups. Bariatric chairs and space for mobility aids will also be required.</p> <p>The space is to include a family friendly area with a play space. Children's furniture and play equipment must be washable, safe and durable, and pose a choking or trip hazard.</p>
Reception	The reception area is to be immediately visible on entry to the centre. Staff in reception must have a view of the main entrance, waiting area and the controlled entry to the clinic zone.
Nursing Treatment Bays	<p>Locate closer to the entry to the Clinic zone to facilitate client from treatment bay to GP consult room following completion of nursing observations. Handwash bay required immediately adjacent treatment bays to allow staff use between and during patient consultations.</p> <p>Patient toilet/shower to be located adjacent the treatment bays to allow easy access for specimen collection. Direct access to the Clean store/medication room and the Pathology bay is also required to</p>

Functional Sarea Area	Key Requirements
	<p>minimise nurse travel when preparing for treatments and managing specimens.</p> <p>Refer to AusHFG Standard Component PBTR-MB Patient Bay – Medical Day Treatment for a suggested list of inclusions.</p>
Consult Rooms	<p>Natural light with an outlook that affords visual privacy. Acoustic privacy. Design to allow for clients with children including a stroller and those using a wheelchair or mobility aid.</p> <p>Standardised fitout to support safe staff egress and easy of restocking and allocation of rooms to clinical staff.</p> <p>Refer to AusHFG Standard Component CON Consult Room for a suggested list of inclusions.</p>
Interview Room	<p>Multi-functional space for counselling, audiology and management of distressed clients. To be located close to waiting area for ease of access. Acoustic isolation is required for both primary and audiology testing.</p> <p>Refer to AusHFG Standard Components INTF-MH Interview Mental Health for a suggested list of inclusions.</p>
Isolation /Procedure Room	<p>Environment suitable for undertaking aseptic and sterile procedures, the management of patient with a suspected infection and those with special needs such as a disability or bariatric condition. The flow of infectious patients to and from this room to minimise cross contamination will require careful consideration.</p> <p>Design considerations include: a ceiling mounted hoist, separate positive pressure air conditioning when undertaking aseptic procedures, negative air flow when performing aerosol generating procedures (AGPs) or managing patients who require isolation to reduce the airborne transmission infection, room exhaust to the outside, color corrected lighting and a ceiling mounted procedure light.</p> <p>Refer to AusHFG Part D – Infection Prevention and Control and Standard Components: PROC Procedure Room, CON-UN Universal Consultation Room for a suggested list of inclusions.</p>
Clean Store/Medication Room	<p>Controlled access room for secure storage of medications and clinical supplies. Space required for setting up to dressing trolleys etc.</p>

Functional Sarea Area	Key Requirements
	Refer to AusHFG Standard Component: CLN-MED Clean Store/Medication Room for a suggested list of inclusions.
Clean Up/Reprocessing Room	<p>Controlled access room with a sink and bench top autoclave for the reprocessing of reusable instruments. One way flow from dirty to clean essential.</p> <p>Refer to AusHFG Standard Component: CLUP-7 Clean-up Room for a suggested list of inclusions. Additional benching will be required for the autoclave.</p>
Meeting/Multipurpose Room	<p>Located to allow direct access from the waiting area and discrete access from the Clinic Zone. To have capacity for up to 26 people seated around a meeting table. Roll-in roll out storage to be provided close by for stackable furniture and chairs to allow easy set up for lecture style presentation and program group activities including crafts etc. Inclusion of an operable wall to be considered to allow space to be opened up to the waiting area for community meetings and events.</p> <p>Refer to AusHFG Standard Components: MEET-30 &amp; MEET-55 for a suggested list of inclusions.</p>
Servery/Kitchen	<p>Design and fitout to allow use for preparation of beverages by clients and staff attending activities in the multipurpose meeting room and use for cooking demonstrations by the dietician or community members.</p> <p>Refer to AusHFG Standard Components: PTRY Pantry and BEV Bay-Beverage for a suggested list of inclusions. Cook top and oven will need to be added.</p>
Staff Workspace	Workstations to be arranged in clusters to provide neighborhood for the various teams. Option of stand-up desks to be provided. Executive assistant to be located adjacent to the CEO and management team. Small meeting room to be designed to ensure privacy for sensitive discussions and to minimise disruption to the workspace when used for group work activities. Staff zone to include a staff room with beverage pantry, lockers and toilet and shower facilities.
Outdoor Courtyard	Accessible to the outdoors from the public waiting and multipurpose meeting space is required. The space is to include an enclosed play area, breakout areas for families or small groups to gather, a yarnning circle and a fire pit and space for quiet reflection and retreat. Landscaping to include

Functional Sarea Area	Key Requirements
	<p>native shade trees and awnings. Preference for courtyard to be at back or side of the building.</p>
Parking	<p>Shaded and secure parking is required for up to 10 BACHS fleet vehicles including two long wheel base vehicles. Space is to be allowed for turning of vehicles. Space is to be allowed for vehicle turning. Solar to be considered on the car park roof.</p> <p>Secure staff car parking is required on-site, with numbers to be advised by the Traffic Engineer.</p> <p>Public car parking, including accessible parking is required on-site, with numbers to be advised by the Traffic Engineer.</p>
Waste enclosure	<p>A secure, vermin proof waste enclosure with hard stand is required for the holding of waste bins and returnable receptacles awaiting collection by waste contractors. A hose &amp; drainage is required for bin washing etc. Space is to be allowed for vehicle turning and reversing.</p>

# Appendix 1 BACHS Organisational Chart

