2.5 Specific Requirements for Behavioral and Mental Health Hospitals

Appendix material, intended to be advisory only, is offset and begins with the letter “A” following the corresponding requirement.

2.5-1 General

2.5-1.1 Application

*2.5-1.1.1 This chapter shall apply to a behavioral and mental health psychiatric hospital intended for the care and treatment of inpatients who do not require acute medical services.

A2.5-1.1.1 See Section 2.2-2.12 (Behavioral and Mental Health Psychiatrie Patient Care Unit) for behavioral and mental health psychiatric units in general hospitals.

2.5-1.1.2 The behavioral and mental health psychiatric hospital shall meet the standards described in this chapter and the standards in Part 1 of these Guidelines as amended in this section.

2.5-1.1.3 The requirements in Chapter 2.1, Common Elements for Hospitals, and Chapter 2.2, Specific Requirements for General Hospitals, shall apply to the behavioral and mental health psychiatric hospital as cross-referenced in this chapter.

2.5-1.2 Reserved

2.5-1.3 Site

2.5-1.3.1 – 2.5-1.3.3 Reserved

2.5-1.3.4 Parking

2.5-1.3.4.1 Parking for behavioral and mental health psychiatric hospitals shall comply with the requirements in Section 1.3-3.4.1 (Parking—General) and the specific requirements in this section.

2.5-1.3.4.2 In the absence of local requirements governing parking, the following shall be provided:

(1) At least one space for each employee normally present during one weekday shift plus one space for every five beds, or a total of 1.5 spaces per patient. Reduction of this ratio shall be permitted in compliance with Section 1.3-3.4.3.

(2) Additional parking to accommodate outpatient or other services provided on site

2.5-1.4 Shared Services

2.5-1.4.1 Where the behavioral and mental health psychiatric facility is part of another facility, or where different behavioral and mental health psychiatric patient populations share the same facility, shared ancillary and clinical services shall be permitted when these shared services are located and configured to accommodate programmatic requirements for safety, security, and other clinical considerations.

*2.5-1.5 Environment of Care
A2.5-1.5 Environment of care. The majority of persons who attempt suicide suffer from a treatable mental disorder or a substance abuse disorder or both. Patients of The inpatient population in behavioral and mental health psychiatric treatment facilities are considered at high risk for suicide; therefore, the environment should avoid physical hazards while maintaining a therapeutic environment. However, although a safe environment is critical, no environment can be entirely free of risk. The built environment, no matter how well designed and constructed, cannot be relied upon as an absolute preventive measure. Staff awareness of the environment, the latent risks of that environment, and the behavior risks and needs of the patients served in that environment is absolutely essential. Different organizations and different patient populations will require greater or lesser tolerance for risk.

2.5-1.5.1 Therapeutic Environment Environmental Safety and Prevention of Harm

*2.5-1.5.1.1 2.5-1.5.1.3 (1) For information on behavioral health patient injury and suicide prevention risk assessments, see Section 1.2-4.6 (Behavioral and Mental Health Risk Assessment).

2.5-1.5.1.2 2.5-1.5.1.3 (2) Special Consideration for harm injury and suicide prevention shall be given in designing architectural details and selecting surface materials and building system equipment as specified in See sections 2.5-7.2 (Architectural Details, Surfaces, and Furnishings) and 2.5-8 (Building Systems) for requirements.

*2.5-1.5.1.3 2.5-1.5.1.1 Hidden alcoves and blind corners or areas shall be avoided.

A2.5-1.5.1.3 # Therapeutic environment Environmental safety and prevention of harm. The facility should provide a therapeutic environment appropriate for the planned treatment programs.

a. The environment of a behavioral and mental health psychiatric hospital should be characterized by a feeling of openness with emphasis on natural light. In every aspect of building design and maintenance, it is essential to base determinations on the potential risk to the specific patient population served.

b. The openness of the nurse station will depend on the planned treatment program. Consideration should be given to acoustic and visual privacy requirements and also to staff safety. See appendix section A2.5-2.2.8.2 (Open nurse stations) for factors to consider when using open nurse stations.

2.5-1.5.1.4 2.5-1.5.1.2 Means for visual observation (e.g., electronic surveillance) of patient care unit corridors, dining areas, and social areas such as dayrooms and activity areas shall be provided.

2.5-1.5.2 Security

*2.5-1.5.2.1 The design shall provide the level of security needed for the specific type of service or program provided as well as for the age level, acuity, and risk of the patients served (e.g., geriatric, acute behavioral and mental health psychiatric, or forensic for adult, child, and adolescent care). See Section 1.2-4.6 (Behavioral and Mental Health Risk Assessment) for requirements.

A2.5-1.5.2.1 See Section 2.5-2.2.3 (Outdoor Areas) for security requirements for these areas.
2.5 Specific Requirements for Behavioral and Mental Health Hospitals

*2.5-1.5.2.2 Perimeter security. Where provided, perimeter security shall meet the following requirements:

A2.5-1.5.2.2 The owner or designer should consult with the authorities having jurisdiction regarding the acceptability of the intended perimeter security system.

(1) A perimeter security system shall be designed to:

(a) Contain patients within the patient care unit or treatment areas outside the unit until clinical staff and/or hospital security can escort them to an adjacent compartment or an exit stair.

(b) Prevent elopement and contraband smuggling

(c) Include provisions for monitoring and controlling visitor access and egress.

*(2) Openings in the perimeter security system (e.g., windows, doors, gates) shall be controlled by locks (manual, electric, or magnetic) when required by the safety risk assessment.

A2.5-1.5.2.2 (2) Perimeter locks

a. Manual locks. Manual locks should have a normal lock function on the inpatient unit side.

b. Electric locks. Electric locks should have a fail secure function with a key override on emergency power with battery backup to prevent loss of security during power failure. These locks may also be equipped with card or proximity readers to ease staff access.

c. Magnetic locks. Use of magnetic locks on double egress doors and other doors is permitted. Magnetic locks should be on emergency power with battery backup and must have a key override to ensure security during power failure. These locks may also be equipped with card or proximity readers to ease staff access.

(3) Use of security cameras and other security measures consistent with the safety risk assessment shall be permitted in addition to the security perimeter requirements above.

2.5-1.5.2.3 Patient safety and suicide prevention [Moved to Section 2.5-1.5.1]

(1) For information on psychiatric patient injury and suicide prevention risk assessments, see Section 1.2-4.6 (Behavioral and Mental Health Risk Assessment).

(2) Special consideration for injury and suicide prevention shall be given in designing architectural details and selecting surface materials and building system equipment as specified in sections 2.5-7.2 (Architectural Details, Surfaces, and Furnishings) and 2.5-8 (Building Systems).

2.5-2 Patient Care Units

2.5-2.1 General

2.5-2.1.1 New Construction

Patient care units in behavioral and mental health psychiatric hospitals shall meet the minimum design
requirements described herein.

2.5-2.1.2 Renovation

For renovation of patient care units in existing facilities, see Section 1.1-3 (Renovation) for further guidance when compliance with the Guidelines is impractical.

2.5-2.1.3 Accommodations for Care of Individuals of Size

Where accommodations for care of individuals of size are provided, they shall meet the requirements in Section 2.1-2.3 (Accommodations for Care of Individuals of Size).

2.5-2.2 General Behavioral and Mental Health Psychiatric Patient Care Unit

2.5-2.2.1 General

2.5-2.2.1.1 Access control shall be provided for all entrances to a general Behavioral and Mental Health Psychiatric Patient Care Unit.

2.5-2.2.1.2 The primary access point to a locked unit shall be through a sally port when the need for elopement prevention is indicated by the behavioral and mental health section of the safety risk assessment (see Section 1.2-4.6).

A sally port is the space between two locked doors that must be traversed to enter the unit. When an individual enters the unit, the first door is unlocked to gain access to the sally port and the second door remains closed and locked. Only when the first door has closed and is locked does the second door open. This arrangement prevents patients from bolting out of the unit when the door closest to the unit is opened; it also eliminates tailgating. The sally port should be long enough and the door wide enough to accommodate passage of a bed or laundry cart.

2.5-2.2.2 Patient Bedroom

Each bedroom shall meet the following standards:

2.5-2.2.2.1 Capacity. Maximum room capacity shall be two patients.

2.5-2.2.2.2 Space requirements. Patient bedrooms shall have a minimum clear floor area of:

(1) 100 square feet (9.29 square meters) for single-patient rooms

(2) 80 square feet (7.43 square meters) per bed for multiple-patient rooms

2.5-2.2.2.3 Window. Each patient bedroom shall have a window(s) in accordance with sections 2.1-7.2.2.5 (Windows in patient rooms) and 2.5-7.2.2.5 (Windows).

2.5-2.2.2.4 Patient privacy. Section 2.1-2.1.2 (Patient Privacy) shall not apply to Behavioral and Mental Health Psychiatric patient bedrooms.

2.5-2.2.2.5 Reserved

2.5-2.2.2.6 Patient toilet room
2.5 Specific Requirements for Behavioral and Mental Health Hospitals

(1) **Location**

(a) Each patient room shall have access to a directly accessible toilet room without having to enter a corridor.

(b) Omission of this direct access requirement shall be permitted in specific patient bedrooms where the use of corridor access is part of the hospital’s written clinical risk assessment and management program.

(2) One toilet room shall serve no more than two patient bedrooms and no more than four patients.

(3) The toilet room shall contain a toilet and a hand-washing station.

(4) **Toilet room doors**

(a) Where indicated by the safety risk assessment, toilet room doors shall be equipped with keyed locks that allow staff to control access to the toilet room.

(b) Where a swinging door is used, it shall meet the following requirements:

(i) The door to the toilet room shall swing outward or be double-acting.

(ii) The door to the toilet room shall not create a positive latching condition that will support a ligature condition.

(c) Where indicated by the safety risk assessment, replacing the toilet room door with other means of providing visual privacy shall be permitted.

(5) Where a toilet room is required to be ADA- or ANSI-compliant, it shall meet the following requirements:

(a) Thresholds shall be designed to facilitate use and to prevent tipping of wheelchairs and other portable wheeled equipment by patients and staff.

(b) Grab bars shall be designed to be ligature resistant and facilitate use (i.e., be graspable).

(c) Each entry door into a patient toilet room required to be ADA- or ANSI-compliant shall provide space for health care providers to transfer patients to the toilet using portable mechanical lifting equipment.

(6) Where a shower is provided, it shall meet the requirements in this section.

(a) See Section 2.5-7.2.2.6 (Patient toilet room/bathing facility hardware and accessories) for requirements.

*(b) Showers shall be designed to be free of shower curtains.

_A2.5-2.2.6 (6)(b)_ Shower curtains simultaneously provide an attachment point and a ligature in the form of the curtain. “Breakaway” curtains can be manipulated so the holding weight of all the fasteners can be added together, contributing to anoxia, which does not require the person’s entire body weight be supported. Additional information can be found in the FGI Beyond Fundamentals library in a white paper titled “Common Mistakes in Designing Psychiatric_
2.5 Specific Requirements for Behavioral and Mental Health Hospitals

Hospitals” posted at www.fgiguidelines.org.

*2.5-2.2.2.7 Patient bathing facilities. A bathtub or shower shall be provided in the patient care unit for each six beds not otherwise served by bathing facilities at patient bedrooms.

A2.5-2.2.2.7 Patient bathing facilities. Bathing facilities should be designed and located to limit travel distance to no more than 150 feet (45.72 meters) from any patient room.

2.5-2.2.2.8 Patient storage. Each patient shall have in his or her room a separate wardrobe, locker, or closet for storing personal effects.

(1) Storage shall be provided for personal effects in each patient’s bedroom. Shelves for folded garments shall be used instead of arrangements for hanging garments.

(2) Storage shall be available for a daily change of clothes for seven days.

*2.5-2.2.3 Outdoor Areas

Where outdoor areas are provided, they shall meet the following requirements:

A2.5-2.2.3 Outdoor areas are not required; however, if patient care programs require them to be provided, they should be arranged to prevent confused patients from wandering outside of designated patient areas. Plants selected for use should be types that will not grow large enough to facilitate elopement or concealment.

2.5-2.2.3.1 Fences and walls. Fences and building walls forming secure outdoor space serving a locked patient care unit shall be designed to:

(1) Hinder climbing

(2) Be installed with tamper-resistant hardware

(3) Have a minimum height of 14 feet (4.27 meters) above the outdoor area elevation or be angled in where the height exceeds 10 feet (3.05 meters) and is less than 14 feet (4.27 meters).

(4) Be anchored to withstand the body force of a 350-pound (158.76-kilogram) person

2.5-2.2.3.2 Gates or doors. Where provided, gates or doors in the fence or wall shall:

(1) Swing out of the outdoor area

(2) Have the hinge installed on the outside of the outdoor area

(3) Be provided with a locking mechanism that has been coordinated with life safety exiting requirements

2.5-2.2.3.3 Trees and bushes shall not be placed adjacent to the fence or wall.

2.5-2.2.3.4 Plants selected for use shall not be toxic.

2.5-2.2.3.5 Lighting

(1) Luminaires accessible to patients shall have tamper-resistant proof lenses.
2.5 Specific Requirements for Behavioral and Mental Health Hospitals

(2) Luminaires shall not be accessible to patients.

(3) Poles supporting luminaires shall not be capable of being climbed.

2.5-2.2.3.6 Security cameras. Where provided, security cameras shall: view the

(1) Allow views of the entire outdoor area and shall.

(2) not be Be inaccessible to patients.

(3) Preclude views into indoor privacy-sensitive areas.

2.5-2.2.3.7 Furniture. Where provided, furniture shall be secured to the ground. Furniture shall not be placed in locations where it can be used to climb the fence or wall.

2.5-2.2.3.8 Elevated courtyards or outdoor areas located above the ground floor level shall not contain skylights or unprotected walkways or ledges.

2.5-2.2.3.9 Panic alarm system. A panic alarm system shall be provided.

2.5-2.2.4 Special Patient Care Rooms

2.5-2.2.4.1 Reserved

2.5-2.2.4.2 Airborne infection isolation (AII) room

(1) The need for and number of required AII rooms in the behavioral and mental health psychiatric hospital shall be determined by an infection control risk assessment (ICRA).

(2) Where required, the airborne infection isolation room(s) shall comply with the requirements of Section 2.1-2.4.2 (AII Room).

2.5-2.2.4.3 Seclusion room. A seclusion room shall be provided. See Section 2.1-2.4.3 (Seclusion Room) for requirements.

2.5-2.2.4.4 Quiet room. A quiet room shall be provided for a patient who needs to be alone for a short period of time but does not require a seclusion room.

A2.5-2.2.4.4 Quiet room. This room is intended for voluntary use and should not be capable of locking in the patient. It may have anti-ligature features but is not intended to be abuse resistant. The quiet room walls should have a minimum STC 45 rating. Background noise from the HVAC system should be a maximum of NC 40. An acoustical tile ceiling or wall panels should be part of the interior finishes, and a solid core door with a perimeter sound seal at the bottom should be considered.

(1) A minimum of 80 square feet (7.43 square meters) shall be provided.

(2) Use of the visitor room in Section 2.5-2.2.10.1 (Visitor room) for this purpose shall be permitted unless it is already being used as a consultation room under the exception in Section 2.5-2.2.8.16 (Consultation room).

2.5-2.2.5 – 2.5-2.2.7 Reserved
2.5 Specific Requirements for Behavioral and Mental Health Hospitals

2.5-2.2.8 Support Areas for the Behavioral and Mental Health Patient Care Unit

2.5-2.2.8.1 General

(1) Application. All support areas for the behavioral and mental health patient care unit shall meet the requirements in this section.

(2) Location

(a) Support areas listed in this section shall be located in or readily accessible to each patient care unit unless otherwise noted.

(b) Arrangement and location of these support areas to serve more than one patient care unit shall be permitted. However, unless otherwise noted, at least one such support area shall be provided on each patient care floor.

*2.5-2.2.8.2 Administrative center or Nurse station. See Section 2.1-2.8.2 (Administrative Center or Nurse Station) for requirements.

2.5-2.2.8.2 Open nurse stations. Where open nurse stations are used, means to communicate with security personnel and other staff members in the event of an emergency should be provided. As well, an area should be provided adjacent to the nurse station that a staff member can access quickly for safety.

2.5-2.2.8.3 Documentation area. A separate charting area with provisions for acoustic and patient file privacy shall be provided.

2.5-2.2.8.4 Offices for staff

2.5-2.2.8.5 Multipurpose room. Location of these space(s) either in the behavioral and mental health psychiatric patient care unit or immediately accessible to it shall be permitted.

2.5-2.2.8.6 Reserved

2.5-2.2.8.7 Hand-washing station. See Section 2.1-2.8.7 (Hand-Washing Station) for requirements.

2.5-2.2.8.8 Medication safety zone. See Section 2.1-2.8.8 (Medication Safety Zones) for requirements.

2.5-2.2.8.9 Nourishment area. Use of one or a combination of the following shall be permitted to support food service in the unit:

(1) A nourishment station

(2) A kitchenette designed for patient use with staff control of heating and cooking devices

(3) A kitchen area in the unit with the following:

(a) Hand-washing station

(b) Secured storage

(c) Refrigerator

(d) Facilities for meal preparation and/or service
2.5 Specific Requirements for Behavioral and Mental Health Hospitals

2.5-2.2.8.10 Ice-making equipment. See Section 2.1-2.8.10 (Ice-Making Equipment) for requirements.

2.5-2.2.8.11 Clean workroom or clean supply room. See Section 2.1-2.8.11 (Clean Workroom or Clean Supply Room) for requirements.

2.5-2.2.8.12 Soiled workroom or soiled holding room. See Section 2.1-2.8.12 (Soiled Workroom or Soiled Holding Room) for requirements.

2.5-2.2.8.13 Equipment and supply storage. Location of the storage areas listed below in behavioral and mental health psychiatric patient care units shall be permitted where they will not present a risk to the patient population as indicated in the safety risk assessment.

(1) Clean linen storage. See Section 2.1-2.8.13.1 (Clean linen storage) for requirements.

(2) Reserved

*(3) Wheelchair storage space

A2.5-2.2.8.13 (3) Where storage space for wheelchairs must be located outside the behavioral and mental health psychiatric patient care unit, provisions should be made for access as needed for disabled patients and individuals of size.

(4) Emergency equipment storage. Emergency equipment storage shall be provided in accordance with Section 2.1-2.8.13.4 (Emergency equipment storage).

(5) Administrative supplies storage

2.5-2.2.8.14 Environmental services room

(1) See Section 2.1-2.8.14 (Environmental Services Room) for requirements.

(2) Location of this room in the patient care unit shall be permitted when it will not present a risk to the patient population.

2.5-2.2.8.15 Reserved

2.5-2.2.8.16 Consultation room

(1) A minimum of one consultation room shall be provided for every 12 beds or fewer. Separate

(2) The consultation room(s), with shall have a minimum clear floor area of 100 square feet (9.29 square meters) each, shall be provided at a room-to-bed ratio of one consultation room for each 12 psychiatric beds or fewer.

(3) The room(s) shall be designed for acoustic and visual privacy. See Table 1.2-6 (Design Criteria for Minimum Sound Isolation Performance Between Enclosed Rooms) for acoustic requirements.

(4) Use of the visitor room in Section 2.5-2.2.10.1 (Visitor room) for this purpose shall be permitted.

2.5-2.2.8.17 Conference room. A conference and treatment planning room shall be provided for use by the behavioral and mental health psychiatric patient care unit.

2.5-2.2.8.18 Space for group therapy. Combination of the space for group therapy with the quiet activity space noted in Section 2.5-2.2.10.2 (Social spaces) shall be permitted where the unit accommodates no
more than 12 patients and at least 225 square feet (20.90 square meters) of enclosed private space is available for group therapy activities.

2.5-2.2.9 Support Areas for Staff

Support areas shall be provided in accordance with Section 2.1-2.9 (Support Areas for Staff).

2.5-2.2.9.1 Staff lounge facilities

2.5-2.2.9.2 Staff toilet room(s)

2.5-2.2.9.3 Storage for staff. Securable closets or cabinet compartments for the personal effects of nursing personnel shall be immediately accessible to the nurse station. At a minimum, these shall be large enough for purses and billfolds.

2.5-2.2.10 Support Areas for Patients and Visitors

2.5-2.2.10.1 Visitor room. A visitor room with a minimum floor area of 100 square feet (9.29 square meters) shall be provided for patients to meet with friends and family.

2.5-2.2.10.2 Social spaces

(1) At least two separate social spaces, one appropriate for noisy activities and one for quiet activities, shall be provided.

(2) Space requirements

(a) The combined area of these spaces shall have a minimum of 25 square feet (2.32 square meters) per patient with at least 120 square feet (11.15 square meters) for each of the two spaces.

(b) Dining area

(i) 20 square feet (1.86 square meters) per patient shall be provided for dining.

(ii) Use of the social space for dining activities shall be permitted where an additional 15 square feet (1.39 square meters) per patient is added.

(3) Location of dining facilities in a central area off the patient care unit shall be permitted.

2.5-2.2.10.3 Patient laundry facilities. Patient laundry facilities with a washer and dryer shall be provided.

*2.5-2.2.10.4 Patient storage facilities

A2.5-2.2.10.4 Including a distribution window to allow for distribution and collection of hygiene and other items without opening and closing the storage room door may improve security.

(1) A staff-controlled secured storage area shall be provided for patients’ effects that are determined to be potentially harmful (e.g., razors, nail files, cigarette lighters).

(2) Combination of this storage area with the clean workroom or clean supply room in Section 2.5-2.2.8.11 (Clean workroom or clean supply room) shall be permitted.
2.5 Specific Requirements for Behavioral and Mental Health Hospitals

*2.5-2.2.10.5 Visitor storage facilities. A space for locked storage of visitor belongings shall be provided.

A2.5-2.2.10.5 This storage is needed so those visiting a locked unit cannot smuggle contraband items or items patients could use to pose harm to themselves or others in the unit.

2.5-2.3 Child Behavioral and Mental Health Psychiatric Patient Care Unit

2.5-2.3.1 General

Child behavioral and mental health psychiatric unit patient areas shall be separate and distinct from any adult psychiatric unit patient areas. The requirements of Section 2.5-2.2 (General Behavioral and Mental Health Psychiatric Patient Care Unit) shall apply to child units with the following exceptions:

2.5-2.3.2 Patient Bedroom

2.5-2.3.2.1 Capacity. Maximum bedroom capacity shall be four children.

2.5-2.3.2.2 Reserved

2.5-2.3.2.3 Patient toilet room

(1) Each patient shall have access to a toilet room, either from the patient room or from the corridor outside the patient room.

(2) Where access is provided via a corridor, the following requirements shall be met:

   (a) The toilet room shall be located in the patient care unit.

   (b) The toilet room shall be located no more than 150 feet (45.72 meters) from the bedroom.

2.5-2.3.3 Activity Areas

2.5-2.3.3.1 Space requirements

(1) The combined area for social activities shall have 35 square feet (3.25 square meters) per patient.

(2) Where a separate dining space is provided, it shall have a minimum of 15 square feet (1.39 square meters) per patient.

(3) The total area for social activities and dining space shall have a minimum of 50 square feet (4.65 square meters) per patient.

2.5-2.3.4 Outdoor Areas

Where outdoor areas for play and therapy are provided, see Section 2.5-2.2.3 (General Behavioral and Mental Health Psychiatric Patient Care Unit—Outdoor Areas) for requirements.

2.5-2.3.5 – 2.5-2.3.7 Reserved

2.5-2.3.8 Support Areas for the Child Behavioral and Mental Health Psychiatric Patient Care Unit

Storage space shall be provided for toys, equipment, extra cribs and beds, and cots or recliners for parents
who may stay overnight.

2.5-2.4 Alzheimer’s and Other Dementia Patient Care Unit

2.5-2.4.1 Application

The requirements of Section 2.5-2.2 (General Behavioral and Mental Health Psychiatric Patient Care Unit) shall apply to Alzheimer’s and other dementia units with the following exceptions:

2.5-2.4.2 Patient Bedroom

2.5-2.4.2.1 Space requirements. Patient bedrooms shall have a minimum clear floor area of:

(1) 120 square feet (11.15 square meters) in single-patient rooms

(2) **100** 200 square feet (9.29 18.58 square meters) **per patient** in multiple-patient rooms

2.5-2.4.2.2 Reserved

2.5-2.4.2.3 Linen storage.

(1) Each patient bedroom shall have storage for extra blankets, pillows, and linen.

(2) **This storage shall be permitted to be outside of the patient bedroom.**

2.5-2.4.3 – 2.5-2.4.6 Reserved

2.5-2.4.7 Special Design Elements

2.5-2.4.7.1 Door openings. Door openings to patient bedrooms shall have a minimum clear width of 45.5 inches (1.16 meters).

2.5-2.4.7.2 Nurse call system. Where a call system is provided, it shall meet the requirements in Section 2.5-8.5.1 (Call Systems).

2.5-2.4.8 Support Areas for Alzheimer’s and Other Dementia Patient Care Units

2.5-2.4.8.1 – 2.5-2.4.8.2 Reserved

2.5-2.4.8.3 Wheelchair storage. Storage space for wheelchairs shall be provided in the patient care unit.

2.5-2.4.9 Reserved

2.5-2.4.10 Support Areas for Patients

2.5-2.4.10.1 Social spaces. The requirements of Section 2.5-2.2.10.2 (Social spaces) shall apply, except that the combined area for social activities shall have a minimum of 30 square feet (2.79 square meters) per patient.

2.5-2.4.10.2 Bathing facilities. At least one accessible bathtub in a locked room shall be provided in each dementia patient care unit.

2.5-2.5 Geriatric Patient Care Unit

2.5-2.5.1 General
Where a geriatric behavioral and mental health unit is provided, patient care areas shall be separate and distinct from adult or child patient care areas. The requirements of Section 2.5-2.2 (General Behavioral and Mental Health Patient Care Unit) shall apply to the geriatric patient care unit, except as amended in this section.

2.5-2.5.2 Patient Room

2.5-2.5.2.1 – 2.5-2.5.2.5 Reserved

2.5-2.5.2.6 Patient toilet room

(1) Each patient shall have a toilet room directly accessible from the patient room.

(2) The toilet room shall have adequate room for staff to assist the patient.

(3) The toilet room shall meet the requirements in Section 2.1-2.2.1.2 (Fall-safe provisions).

2.5-2.5.2.7 Bathing facilities. At least one accessible bathtub in a locked room shall be provided in each geriatric patient care unit.

2.5-2.5.3 – 2.5-2.5.6 Reserved

2.5-2.5.7 Architectural Details, Surfaces, and Furnishings

2.5-2.5.7.1 Architectural details

(1) Doors. Door openings to patient bedrooms shall have a minimum clear width of 48 inches (1.22 meters).

(2) Handrails. Where provided, handrails shall meet the requirements of Section 2.1-7.2.2.10 (Handrails).

2.5-2.5.7.2 Finishes

(1) Flooring shall be slip-resistant with matte or non-glossy finish.

(2) Wall base assemblies shall match the color of the wall and contrast with the color of the floor.

2.5-2.5.8 Support Areas for Geriatric Patient Care Units

2.5-2.5.8.1 Wheelchair storage

(1) This storage shall be located to prevent tampering to wheelchairs.

(2) This area shall be secure and accessible only by staff.

2.5-2.65 Forensic Behavioral and Mental Health Psychiatric Patient Care Unit

2.5-2.65.1 General

2.5-2.65.1.1 The requirements of Section 2.5-2.2 (General Behavioral and Mental Health Psychiatric Patient Care Unit) shall apply to forensic units.
2.5-2.65.1.2 Forensic units shall have security vestibules or sally ports at the unit entrance.

2.5-2.65.1.3 Areas for children, juveniles, and adolescents shall be separate from adult areas.

2.5-2.65.2 Space Requirements

Specialized program requirements may indicate the need for additional treatment areas, police and courtroom space, and security considerations.

2.5-3 Diagnostic and Treatment Areas

2.5-3.1 Examination Room

*2.5-3.1.1 Where examination rooms are provided, they shall comply with Section 2.1-3.2.2 (Single-Patient Examination Room), except as noted in this section.

A2.5-3.1.1 Where the presence of two staff members is required in behavioral and mental health psychiatric examination room(s), space for a chair for a second staff person should be provided.

2.5-3.1.2 Location

2.5-3.1.2.1 Examination rooms shall be permitted to serve several patient care units.

2.5-3.1.2.2 Examination rooms shall be permitted to be located on a different floor than the patient care unit.

2.5-3.2 Imaging Services

Provision of imaging services is not required in a behavioral and mental health psychiatric hospital. However, where radiology services are provided, the imaging suite shall comply with the requirements in 2.2-3.4 (Imaging Services).

2.5-3.3 Rehabilitation Therapy

Spaces where rehabilitation therapy services are provided shall comply with the requirements in Section 2.6-3.1 (Rehabilitation Therapy).

2.5-3.4 Specialty Therapy Locations

*2.5-3.4.1 Transcranial Magnetic Stimulation Room

Where a transcranial magnetic stimulation (TMS) room is provided, it shall meet the requirements in this section.

A2.5-3.4.1 Transcranial magnetic stimulation (TMS) room

A TMS therapy is a noninvasive form of brain stimulation in which a changing magnetic field is used to cause electric current at a specific area of the brain through electromagnetic induction. This therapy is useful for clients experiencing depression, post-traumatic stress, or other disorders.
b. Depending on the type of stimulator equipment provided in the TMS room, radiofrequency (RF) shielding may be necessary to control interference.

c. Consideration should be given to providing light dimming controls in the TMS room to promote patient relaxation.

2.5-3.4.1.1 Space requirements. The TMS room shall have a minimum clear floor area of 80 square feet (7.43 square meters).

2.5-3.4.1.2 Reserved

2.5-3.4.1.3 Documentation area. Accommodations for documentation shall be provided.

2.5-3.4.1.4 – 2.5-3.4.1.6 Reserved

2.5-3.4.1.7 Hand-washing station. A hand-washing station shall be provided in the TMS room in accordance with Section 2.1-3.8.7 (Hand-Washing Station).

2.5-3.4.2 Electroconvulsive Therapy

2.5-3.4.2.1 General

*(1) 2.5-3.4.2.1 Application

A2.5-3.4.2.1 (1) Equipment used in this treatment modality may be portable and can be used in a variety of medical facilities, provided the minimum requirements in this section are met.

(a1) Where electroconvulsive therapy (ECT) is provided in the behavioral and mental health psychiatric hospital, the requirements in this section shall be met, with the exception noted in (2) below.

(b2) Where a behavioral and mental health psychiatric unit is part of a general hospital (Section 2.2-2.12—Behavioral and Mental health Psychiatric Patient Care Unit), all the requirements in this section shall be permitted to be accommodated in a room that complies with the requirements in one of the following:

(ia) Section 2.5-3.4.2.2 (2) (ECT Treatment Room)

(iib) Section 2.2-3.3.2 (Procedure Room)

(iic) Section 2.2-3.3.3 (Operating Room)

(2) 2.5-3.4.1.2 Size, location, and layout. The size, location, and configuration of the ECT treatment, recovery, and support areas shall reflect the type of patients to be treated, whether this is an inpatient or outpatient service, and the projected volume of patients.

2.5-3.4.2.2 ECT Treatment Area

(1) 2.5-3.4.2.2 General. The ECT treatment area shall be permitted to be a single ECT treatment room or a suite of ECT treatment rooms.

(2) 2.5-3.4.2.2 ECT treatment room
2.5 Specific Requirements for Behavioral and Mental Health Hospitals

(a4) Space requirements. Each ECT treatment room shall have a minimum clear floor area of 200 square feet (18.58 square meters) with a minimum clear dimension of 14 feet (4.27 meters).

(b2) Hand-washing station. A hand-washing station shall be provided in accordance with Section 2.1-2.8.7 (Hand-Washing Station).

(c3) Documentation area. Accommodations for written or electronic documentation shall be provided.

2.5-3.4.2.3 Pre- and Post-Treatment Patient Care Areas

(1) 2.5-3.4.3.1 General.

(a) Where ECT services have low-volume throughput, use of the ECT treatment room for pre-treatment patient care and post-treatment recovery shall be permitted.

(b) Where pre- and post-treatment patient care area(s) are provided, they shall meet the requirements in Section 2.1-3.4 (Pre- and Post-Procedure Patient Care) as amended in this section.

(2) 2.5-3.4.3.2 Pre-treatment patient care area. Where a pre-treatment patient care area is provided, the number of patient care stations shall be determined by the following:

(a4) Number of ECT treatments performed

(b2) Anticipated staffing levels

(3) 2.5-3.4.3.3 Recovery area. Where a recovery area is provided, the number of patient care stations shall be determined by the following:

(a4) Number of ECT treatments performed

(b2) Types of anesthesia used

(c3) Average recovery periods

(d4) Anticipated staffing levels

2.5-3.4.2.4 – 2.5-3.4.2.6 Reserved

2.5-3.4.2.7 Special Design Elements for ECT Treatment and Recovery Areas

(1) 2.5-3.4.7.1 HVAC system. See ANSI/ASHRAE/ASHE 170: Ventilation of Health Care Facilities for ventilation requirements for the ECT treatment room.

(2) 2.5-3.4.7.2 Electrical systems. Emergency electrical service that meets the requirements in Section 2.5-8.3.3.1 (Essential electrical system) shall be provided in:

(a4) The ECT treatment room

(b2) The recovery area, where provided

(3) 2.5-3.4.7.3 Medical gas requirements

(a4) See Table 2.1-3 (Station Outlets for Oxygen, Vacuum, Medical, and Instrument Air Systems in Hospitals) for station outlet requirements.
(b2) All medical gases used shall meet the requirements of NFPA 99: *Health Care Facilities Code*.

(d) **2.5-3.4.2.4** Communication systems. Nurse call devices shall be provided as required in Table 2.1-2 (Locations for Nurse Call Devices in Hospitals).

### 2.5-3.4.2.8 Support Area for ECT Treatment and Patient Care Areas

(1) – (12) **2.5-3.4.8.1—2.5-3.4.8.12** Reserved

(13) **2.5-3.4.8.13** Emergency equipment storage

(a) Space shall be provided in the treatment area for storage of emergency equipment (e.g., a CPR cart).

(b) This emergency equipment storage space shall be permitted to serve more than one ECT treatment room.

### 2.5-3.4.2.9 Reserved

#### 2.5-3.4.2.10 Patient Support Areas

Where waiting areas and patient toilet rooms are provided, their number and size shall be determined by the following:

(1) **2.5-3.4.10.1** Number of ECT treatments performed

(2) **2.5-3.4.10.2** Average recovery periods

(3) **2.5-3.4.10.3** Anticipated staffing levels

### 2.5-3.4.3 Intensive Outpatient and Partial Hospitalization Program

**A2.5-3.4.3** Intensive outpatient and partial hospitalization (IOP/PHP) programs are treatment programs used to address behavioral or mental health diagnoses that do not require inpatient care or round-the-clock supervision. The programs are sometimes used in conjunction with inpatient programs to help clients adapt and cope more smoothly and seamlessly.

**A2.5-3.4.3.1 General.** Where an Intensive Outpatient and Partial Hospitalization Program (IOP/PHP) treatment program is provided, the requirements in Section 2.2-2.12.1 (Behavioral and Mental Health Patient Care Unit—General) shall be met.

**A2.5-3.4.3.1** Acuity levels in IOP/PHP are typically lower than in an acute inpatient unit. The requirements of 2.2-2.12.1 (Behavioral and Mental Health Patient Care Unit—General) should be coordinated with the planned IOP/PHP treatment programs to determine the appropriate requirements of the behavioral and mental health safety risk assessment.

### 2.5-3.4.3.2 IOP/PHP treatment areas

(1) Quiet room. Where a quiet room is provided to support a patient who needs to be in a quiet area accompanied by staff for a short period of time, the requirements in this section shall be met.

(a) The quiet room shall have a minimum of 80 square feet (7.43 square meters).
(b) The quiet room shall have direct line of sight to/from the nurse station.
(c) The quiet room door shall have a vision panel.

*(2) Group therapy room. One group therapy room that meets the requirements in this section shall be provided for every 12 occupants (staff and patients) or major faction thereof.

A2.5-3.4.3.2 (2) Group therapy room. Two doors should be provided for each group therapy room to improve staff and patient safety.

(a) The group therapy room shall have a minimum clear floor area of 225 square feet (20.90 square meters).
(b) Where a swinging door is used, it shall swing outward or be double-acting.
(c) The door(s) to the group therapy room shall have a vision panel.

*(3) Activity room

(a) Where a room(s) is provided to accommodate music, art, and/or movement therapies, a minimum of 225 square feet (20.90 square meters) shall be provided.

(b) Where the IOP/PHP treatment program has fewer than 12 participants, the group therapy room in Section 2.5-3.4.3.2 (2) shall be permitted to serve as the activity room.

A2.5-3.4.3.2 (3) Activity room

a. Additional sound attenuation should be considered for a room that supports music therapy.

b. Provision of a utility sink and counter top for cleaning and drying art supplies should be considered for an art therapy room.

(4) Consultation room. Where the IOP/PHP treatment program provides individual counseling and/or consultation, at least one consultation room that meets the requirements in Section 2.5-2.2.8.16 (Consultation room) shall be provided.

(5) Transcranial magnetic stimulation (TMS) room. Where a TMS room is provided for the IOP/PHP program, it shall meet the requirements in Section 2.5-3.4.1 (Transcranial Magnetic Stimulation Room).

2.5-3.4.3.3 Support areas for IOP/PHP treatment areas

(1) General

(a) The support areas in this section shall be provided for the IOP/PHP treatment areas.

(b) Sharing of these support areas with other clinical services in the behavioral and mental health hospital shall be permitted.

(2) Nurse station
2.5 Specific Requirements for Behavioral and Mental Health Hospitals

(a) A nurse station for IOP/PHP staff work shall be provided.

(b) The nurse station shall have a duress master station.

(c) Where feasible, visual observation of all traffic into the IOP/PHP treatment area shall be provided from the nurse station.

(3) Documentation area. Accommodations for documentation shall be provided.

(4) – (7) Reserved

(8) Medication safety zone. Where medications are dispensed in the IOP/PHP program, the requirements in Section 2.1-2.8.8 (Medication Safety Zones) shall be met.

(9) Nourishment area. Use of one or a combination of the following shall be permitted to support food service for the IOP/PHP program:

(a) A nourishment station

(b) A kitchenette with the following:

   (i) Staff-controlled heating devices

   (ii) Hand-washing station

   (iii) Secured storage

   (iv) Refrigerator

(c) A dining area

(10) – (12) Reserved

(13) Equipment and supply storage

(a) A separate, securable room shall be directly accessible from the treatment areas for equipment and supply storage (e.g., art equipment, musical instruments, yoga mats).

(b) This storage room shall be permitted to serve more than one group therapy or activity room.

(14) Environmental services room

(a) The environmental services room shall be provided in accordance with Section 2.1-2.8.14 (Environmental Services Room) as amended in this section.

(b) The environmental services room shall be securable.

2.5-3.4.3.4 Support areas for staff. These staff facilities shall be permitted to be shared with other services in the behavioral and mental health hospital.

(1) Staff lounge. Staff lounge facilities shall be provided in the same building as the IOP/PHP program.

(2) Staff toilet room. A staff toilet room shall be immediately accessible to the IOP/PHP program nurse station.
(3) **Storage for staff.** Securable closets or cabinet compartments for the personal effects of personnel shall be immediately accessible to the nurse station. These shall be large enough to store purses and billfolds.

### 2.5-3.4.3.5 Support areas for patients

1. **Reserved**

2. **Patient toilet rooms**
   
   (a) Toilet rooms shall be immediately accessible to the group therapy, activity, counseling, and/or consultation rooms.

   (b) Each toilet room shall contain a toilet and a hand-washing station.

   (c) **Toilet room doors**

   (i) Doors with keyed locks that allow staff to control access to the toilet room shall be permitted. When locks are used, they shall not inhibit an occupant from exiting the toilet room.

   (ii) Where a swinging door is used, the door to the toilet room shall swing outward or be double-acting.

   (d) Where a toilet room is required to be ADA- or ANSI-compliant, it shall meet the following requirements:

   (i) Thresholds shall be designed to facilitate use and to prevent tipping of wheelchairs and other portable wheeled equipment.

   (ii) Where indicated by the safety risk assessment, grab bars shall be ligature-resistant.

3. **Patient storage**. Where indicated by the safety risk assessment, each patient shall have access to a locker for storing personal effects.

### 2.5-4 Patient Support Facilities

#### 2.5-4.1 Laboratory Services

See Section 2.1-4.1 (Laboratory Services) for requirements.

#### 2.5-4.2 Pharmacy Services

See Section 2.1-4.2 (Pharmacy Services) for requirements.

#### 2.5-4.3 Food and Nutrition Services

See Section 2.1-4.3 (Food and Nutrition Services) for requirements.

### 2.5-5 General Support Facilities
2.5-5.1 Sterile Processing
See 2.1-5.1 (Sterile Processing) for requirements.

2.5-5.2 Linen Services
See Section 2.1-5.2 (Linen Services) for requirements.

2.5-5.3 Materials Management

2.5-5.3.1 General
Behavioral and mental health hospitals shall meet the requirements of Section 2.1-5.3 (Materials Management) as amended in this section.

2.5-5.3.2 Space Requirements for General Storage
General storage room(s) with a total area of not less than 4 square feet (0.37 square meters) per inpatient bed shall be provided.

2.5-5.4 Waste Management
See Section 2.1-5.4 (Waste Management) for requirements.

2.5-5.5 Environmental Services
See Section 2.1-5.5 (Environmental Services) for requirements.

2.5-5.6 Engineering and Maintenance Services
See Section 2.1-5.6 (Engineering and Maintenance Services) for requirements.

2.5-6 Public and Administrative Areas

2.5-6.1 General
Public and administrative areas shall be provided in accordance with Section 2.1-6 (Public and Administrative Areas) as amended in this section. See Section 2.1-6 (Public and Administrative Areas) for requirements.

2.5-6.2 Public Areas

2.5-6.2.1 Entrances

2.5-6.2.2 Entrances. The behavioral and mental health hospital may be part of a freestanding facility or part of a multi-tenant building. In all cases, the entrance described in the requirements of this section is the door or entry leading into the behavioral and mental health hospital lobby and reception area.

2.5-6.2.1.1 Entrances shall be secure where this is a standalone behavioral and mental health hospital.

2.5-6.2.1.2 Where entrance lobby and/or elevators are shared with other tenants, travel to the behavioral...
and mental health services shall be direct and accessible. Except for passage through common doors, lobbies, or elevator stations, patients shall not be required to go through other occupied areas or facility service areas.

2.5-6.2.2 Reception

2.5-6.2.2.1 A reception/information counter, desk, or kiosk(s) shall be provided.

2.5-6.2.2.2 The reception/information counter, desk, or kiosk(s) shall be immediately visible from the entrance.

2.5-6.2.3 Waiting Area

*2.5-6.2.3.1 The waiting area for patients and escorts shall be under direct visual control of the reception desk staff or via electronic surveillance.

A2.5-6.2.3.1 The use of electronic surveillance should be assessed as part of patient safety and suicide prevention, see Section 1.2-4.6 (Behavioral and Mental Health Risk Assessment) for recommendations.

2.5-6.2.3.2 Where the behavioral and mental health hospital has a dedicated pediatrics service, a separate, access-controlled waiting area for pediatric patients shall be provided.

2.5-7 Design and Construction Requirements

2.5-7.1 Reserved

2.5-7.2 Architectural Details, Surfaces, and Furnishings

2.5-7.2.1 General

2.5-7.2.1.1 Architectural details, surfaces, and furnishings shall comply with Section 2.1-7.2 (Architectural Details, Surfaces, and Furnishings) as amended in this section.

*2.5-7.2.1.2 Special design consideration shall be given to injury and suicide prevention as indicated in the behavioral and mental health portion of the safety risk assessment (Section 1.2-4.6).

A2.5-7.2.1.2 Requirements for planning and detailing spaces in the behavioral and mental health psychiatric hospital should include reduction or elimination of the potential for injury and suicide, types of finishes, sharp edges, fixtures, heights, door hardware, etc.

2.5-7.2.1.3 Luminaires, fire sprinklers, electrical receptacles, and other appurtenances shall be of a tamper- and ligature-resistant type in in patient toilet rooms and bathing facilities, patient bedrooms, and other high-risk patient care areas as established in the behavioral and mental health safety risk assessment (Section 1.2-4.6).

2.5-7.2.2 Architectural Details

2.5-7.2.2.1 – 2.5-7.2.2.2 Reserved

2.5-7.2.2.3 Doors and door hardware
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(1) Reserved

(2) Door openings. Door openings for patient use in new construction shall have a minimum clear width of 34 inches (86.36 centimeters).

(3) Door swings. Doors to private patient toilet rooms or bathing facilities shall swing out, be double-acting with an emergency strike, or have other barricade-resistant provisions to allow for staff emergency access.

(4) Door closers

(a) Use of door closers is to be avoided unless required for the care being provided.

*(b) Door closer devices, if required on the patient bedroom door, shall be a mortised type or surface-mounted on the public side of the door rather than the private patient side of the door.

A2.5-7.2.2.3 (4)(b) Door closers. Ideally, where a door closer is provided, it should be within view of a nurse station or staff workstation.

(5) Door hinges

(a) Door hinges shall be designed to minimize points for hanging (i.e., cut hinge type).

(b) Door hinges used shall be consistent with the level of care for the patient.

(6) Door handles. Door handles shall be designed to be ligature-resistant.

(7) Fasteners. All hardware shall have tamper-resistant fasteners.

2.5-7.2.2.4 Reserved

*2.5-7.2.2.5 Windows

A2.5-7.2.2.5 Windows. Use of operable windows with security locks is recommended to allow for fumigation should rooms require extensive cleaning. Where operable windows are provided, it is important to adhere to the requirement in Section 2.1-7.2.2.5 (2) to limit the size of the opening.

(1) Windows located in patient care areas or areas used by patients, including the exterior pane of windows accessible by patients from outdoor courtyards, shall be designed to limit the opportunities for patients to seriously harm themselves by breaking the windows and using pieces of the broken glazing material to inflict harm to themselves or others.

(a) All glazing (both interior and exterior), borrowed lights, and glass mirrors shall be fabricated with polycarbonate or laminate on the inside of the glazing or with any glazing that meets or exceeds the requirements for Class 1.4 per ASTM F1233: Standard Test Method for Security Glazing Material and Systems.

*(b) Use of tempered glass for borrowed lights shall be permitted.

A2.5-7.2.2.5 (1)(b) Tempered glass is often preferred for borrowed lights since it has substantial impact resistance, does not scratch or discolor, and—when broken—shatters into round pellets rather than the jagged shards of laminated
2.5 Specific Requirements for Behavioral and Mental Health Hospitals

glass.

(2) To prevent opportunities for suicide, self-harm, and escape, the entire window system and the anchorage for windows and window assemblies, including frames, glazing, and hinges and locking devices for operable windows, shall meet the following requirements:

(a) Designed to resist impact loads of 2,000 foot-pounds applied from the inside

(b) Tested in accordance with AAMA 501.8: Standard Test Method for Determination of Resistance to Human Impact of Window Systems Intended for Use in Psychiatric Applications

*(3) A minimum net glazed area of no less than 8 percent of the minimum required floor area of the aggregate social and dining spaces shall be provided.

A2.5-7.2.2.5 (3) Minimum net glazed area. This requirement is intended to provide natural light to the social and dining spaces. Acknowledging some social spaces may be comprised of a variety of spaces (e.g., some internal to the unit, along the corridor, etc.), each individual space is not required to have 8 percent of net glazed area of their individual floor area, as long as the minimum requirement for net glazed area has been met for the minimum required amount of social and dining space(s).

2.5-7.2.2.6 Patient toilet room/bathing facility hardware and accessories. Special design considerations for injury and suicide prevention shall be given to shower, bath, toilet, and sink hardware and accessories, including grab bars and toilet paper holders.

(1) Grab bars

(a) Bars shall be anchored to sustain a concentrated load of 250 pounds (113.4 kilograms).

(b) See Section 2.5-2.2.2.6 (5)(b) (Grab bars) for additional grab bar requirements.

(2) The following are not permitted:

(a) Towel bars

(b) Shower curtain rods

(c) Lever handles, except where a specifically designed ligature-resistant lever handle is used

2.5-7.2.2.7 Fire sprinklers and other protrusions. (1) In patient areas, fire sprinklers shall be of a design to minimize patient tampering. [Moved to 2.5-8.6.1]

(2) Light fixtures, fire sprinklers, electrical receptacles, and other appurtenances shall be of a tamper- and ligature-resistant type. In patient toilet rooms and bathing facilities, patient bedrooms, and other high-risk patient care areas as established in the behavioral and mental health safety risk assessment (Section 1.2-4.6). [Moved to 2.5-7.2.1.3]

2.5-7.2.3 Surfaces

2.5-7.2.3.1 – 2.5-7.2.3.2 Reserved

2.5-7.2.3.3 Ceilings
2.5 Specific Requirements for Behavioral and Mental Health Hospitals

(1) Monolithic ceilings shall be provided in seclusion rooms, patient bedrooms, patient toilet rooms, and patient bathing facilities.

(a) In these rooms, the ceiling shall be secured from patient access.

(b) Mechanical, electrical, and plumbing systems, other than terminal elements serving the room, shall be concealed above the ceiling.

(2) In seclusion rooms, bedrooms, patient toilet rooms, and patient bathing facilities, ventilation grilles shall be of a tamper- and ligature-resistant type, secured using tamper-resistant fasteners and have perforations or openings to eliminate their use as a tie-off point or be designed to prevent them from being used as ligature points.

(3) Ceiling access doors shall be without gaps and secured with a keyed lock and/or tamper-resistant fasteners.

2.5-7.2.4 Furnishings

2.5-7.2.4.1 Built-in furnishings

(1) Built-in furnishings shall be constructed to minimize potential for injury, suicide, or elopement.

(2) Built-in furnishings with doors or drawers shall not be provided.

(3) Open shelves shall be fixed with tamper-resistant hardware.

2.5-7.2.4.2 Where provided, robe or towel hooks shall be designed for ligature resistance. Clothing rods shall not be permitted.

*2.5-7.2.4.3 Window treatments in patient bedrooms and other patient care areas.

(1) Exposed window treatments in patient bedrooms shall be ligature-resistant.

(2) Where window treatments are provided in lower-risk areas under staff supervision, they shall be designed without accessible anchor points or cords.

A2.5-7.2.4.3 Window treatments in patient bedrooms and other patient care areas

a. The use of drapery is discouraged.

b. The use of integral blinds in the window assembly is highly desirable to provide privacy and sun control without suicide risk.

2.5-8 Building Systems

*2.5-8.1 General

For building system requirements for behavioral and mental health psychiatric hospitals, see Section 2.1-8 (Building Systems) and additional requirements in this section.
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required in the functional program of the behavioral and mental health psychiatric hospital are not required by this reference. Use of “Reserved” in this section means there are no requirements in addition to those in Section 2.1-8.

2.5-8.2 Reserved

2.5-8.3 Electrical Systems

2.5-8.3.1 – 2.5-8.3.2 Reserved

2.5-8.3.3 Power-Generating and -Storing Equipment

2.5-8.3.3.1 Essential electrical system

(1) At minimum, behavioral and mental health psychiatric hospitals or sections thereof shall have essential electrical systems as required in the following standards:

(a) NFPA 99: Health Care Facilities Code

(b) NFPA 101: Life Safety Code

(c) NFPA 110: Standard for Emergency and Standby Power Systems

(2) Where the behavioral and mental health psychiatric facility is a distinct part of an acute care hospital:

(a) Use of the hospital generator system for required emergency lighting and power shall be permitted if such sharing does not reduce hospital services.

(b) Life support systems and their respective areas shall be subject to applicable standards of Section 2.1-8.3 (Electrical Systems).

(3) An emergency electrical source shall provide lighting and/or power during an interruption of the normal electrical supply.

2.5-8.3.4 Lighting

2.5-8.3.4.1 General. Luminaires shall be tamper-resistant and engineered for the specific application, as determined by the behavioral and mental health portion of the safety risk assessment (Section 1.2-4.6).

2.5-8.3.4.2 Lighting for specific locations in the behavioral and mental health psychiatric hospital

(1) Patient bedrooms. Patient bedrooms shall have general lighting and night lighting. At least one nightlight fixture in each bedroom shall be controlled at the room entrance.

(2) Patient care unit corridors. Corridors in patient care units shall have general illumination with provisions for reducing light levels at night.

(3) Exterior lighting. Approaches to buildings and parking lots and all occupied spaces shall have luminaires that can be illuminated as necessary.

2.5-8.3.5 Electrical Equipment

Special design considerations for injury and suicide prevention shall be given to the electrical equipment in the behavioral and mental health psychiatric hospital, including light fixtures, electrical outlets,
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electrical appliances, nurse call systems, and staff emergency assistance systems.

2.5-8.3.6 Receptacles

2.5-8.3.6.1 Receptacles in patient bedrooms. Where electrical receptacles are provided in a patient bedroom, the receptacles shall be:

(1) Tamper-resistant
(2) All controlled by a single switch outside the room and under the control of staff
(3) Either ground-fault circuit interrupter devices or on a circuit protected by a ground-fault circuit breaker.

2.5-8.4 Plumbing Systems

2.5-8.4.1 General

In the absence of local and state plumbing codes, all plumbing systems shall be designed and installed in accordance with the chapters in the *International Plumbing Code* that are applicable for this occupancy.

2.5-8.4.2 Plumbing Fixtures

Special design considerations for injury and suicide prevention shall be given to shower, bath, toilet, and sink plumbing fixtures. Shower heads shall be of flush-mounted design to minimize hanging appendages.

2.5-8.5 Communications Systems

Communications systems shall meet the requirements in Section 2.1-8.5 (Communications Systems) as amended.

2.5-8.5.1 Call Systems

See Table 2.1-2 (Locations for Nurse Call Devices in Hospitals) for locations where call systems are required in behavioral and mental health psychiatric hospitals.

*2.5-8.5.1.1 General*

A2.5-8.5.1.1 Where radiofrequency systems are used, consideration should be given to electromagnetic compatibility between internal and external sources.

(1) Staff response call systems shall be low voltage with limited current.
(2) Controls to limit unauthorized use shall be permitted.

2.5-8.5.1.2 Patient care unit call system. Where a nurse call system is provided, the following requirements shall be met:

(1) Provisions shall be made for easy removal or covering of call buttons.
(2) All hardware shall have tamper-resistant fasteners.
(3) Signal location
(a) Calls shall activate a visible signal in the corridor at the patient’s door and at an annunciator panel at the nurse station or other appropriate location.

(b) In multi-corridor patient care units, additional visible signals shall be installed at corridor intersections.

(4) Call cords or strings in excess of 6 inches (15.24 centimeters) shall not be permitted.

2.5-8.5.1.3 Emergency call system. Where an emergency call system is provided, it shall be designed to meet the following requirements:

(1) A signal activated by staff will initiate a visible and audible signal distinct from the regular nurse call system.

(2) The signal shall activate an annunciator panel at the nurse station or other appropriate location and a distinct visible signal in the corridor at the door to the room from which the signal was initiated.

2.5-8.6 Electronic Safety and Security Systems

2.5-8.6.1 Fire Alarm Protection System

Where the following fire protection system components will be accessible to patients, they shall be tamper- and impact-resistant and of a design to minimize ligature risks: Fire extinguisher cabinets and fire alarm pull stations shall be located in staff areas or otherwise secured in patient-accessible locations.

2.5-8.6.1.1 Fire extinguishers and cabinets

2.5-8.6.1.2 Fire alarm system devices

2.5-8.6.1.3 Fire sprinkler system components

2.5-8.6.1.4 Egress signage

2.5-8.7 Special Systems

2.5-8.7.1 Reserved

2.5-8.7.2 Elevators

2.5-8.7.2.1 General. Hospitals with patient facilities (e.g., patient bedrooms, dining rooms, recreation areas) or services (e.g., diagnostic or therapeutic areas) located on floors other than the grade-level entrance floor shall have elevators.

2.5-8.7.2.2 – 2.5-8.7.2.3 Reserved

2.5-8.7.2.4 Leveling device. See Section 2.1-8.7.2.4 (Leveling device) for requirements.

2.5-8.7.2.5 Elevator controls

(1) See Section 2.1-8.7.2.5 (Elevator controls) for requirements.

(2) Elevator call buttons and car buttons shall be key-controlled where required by the behavioral and mental health section of the safety risk assessment (see Section 1.2-4.6).
2.5-8.7.2.6 Installation and testing. See Section 2.1-8.7.2.6 (Installation and testing) for requirements.