

Interim Amendment for the 2018 Residential Guidelines

Since publication of the 2018 edition of the *Guidelines for Design and Construction of Residential Health, Care, and Support Facilities*, the Facility Guidelines Institute (FGI) has received requests from several state authorities having jurisdiction (AHJs) asking for minimum square footages for resident rooms in nursing homes. In response to this request, the Residential Document Group (RDG) of the FGI Health Guidelines Revision Committee (HGRC) reconvened to address these concerns outside of the scheduled editorial cycles for the 2018 and 2022 editions of the *Guidelines*. The RDG proposed incorporating the text featured in this document for inclusion in the 2022 Residential *Guidelines* document, but—to address the enforcement issue in a more timely fashion—the group also requested it be published as an interim amendment, which is an official change, to the 2018 Residential *Guidelines*.

Background

Prior to the release of this interim amendment, the Residential *Guidelines* had been silent on square footage requirements for sizing resident rooms. This was an intentional choice out of concern that, if a minimum size was provided, it would be taken as an absolute. That minimum would then become the base size of the space in which a resident would live, regardless of whether the size fully met resident needs. Given that residents may live in long term-care settings for 15 years or more, this was deemed unacceptable.

The unfortunate side effect of that choice has been that states have had difficulty implementing the Residential *Guidelines*. Thus, the RDG reconsidered its position and agreed that basing a minimum resident room size on clearances would serve the needs of both states and nursing home residents.

Development of Minimum Square Footages

To establish the minimum size requirements included in the interim amendment, the RDG applied the following material from the 2018 Residential *Guidelines*:

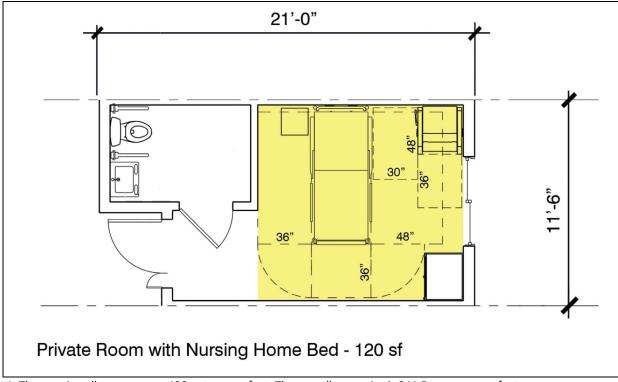
- Clearance suggestions in appendix section A3.1-2.2.2.2 (Determining space needs)
- Furniture and equipment requirements in Section 3.1-2.2.2.2 (Resident Room—Space requirements)
- Design requirements in Section 2.2-3 (Design Criteria for Accommodations for Care of Persons of Size*)

The group diagrammed private and shared room layouts driven by these clearances and furniture requirements to determine the minimum room size for each user group and variation—standard room with hospital or nursing home bed, room for an individual of size

^{*}The term "person of size" has been replaced in the draft 2022 *Guidelines* with "individual of size." Its use here is intentional to be consistent with the 2018 *Guidelines* documents.

with fixed lift, and room for an individual of size with movable lift. (As an example, see the diagram for a standard room below.)

New required clearances and minimum room size for a resident room



- 1. The area in yellow measures 120 net square feet. The overall room size is 241.5 gross square feet.
- 2. This graphic is for illustration purposes only and does not depict a recommended or required resident room layout.

Public comment on the interim amendment

The proposed revisions to the requirements for resident rooms in nursing homes in this interim amendment were subjected to a public comment period during October and November 2019, followed by additional review and final approval by the RDG and the HGRC Steering Committee. Upon their approval, the interim amendment was accepted as integral to the 2018 *Guidelines for Design and Construction of Residential Health, Care, and Support Facilities.*

Inclusion of the Interim Amendment in the Second Printing of the 2018 Residential Guidelines

FGI considers the second printing of the 2018 Guidelines for Design and Construction of Residential Health, Care, and Support Facilitites to be the official 2018 Residential Guidelines document, and the interim amendment became effective with its release in August 2020.

Specific alert language to make users aware of the incorporation of an interim amendment has been added to the title page of the document, with simplified alert language immediately

preceding each affected section in the main text. The alerts are shown below exactly as they appear in the second printing.

Alert on the title page of the 2018 Residential *Guidelines*, second printing:

ALERT: This second printing of the 2018 *Guidelines for Design and Construction of Residential Health, Care, and Support Facilities* has been modified by the issuance of an official interim amendment. FGI considers this amended document to be the official edition of the 2018 Residential *Guidelines*. For states that have adopted the first printing of this document, a paper explaining the changes—with the affected sections shown as published in the first printing of the 2018 Residential *Guidelines*—can be accessed at www.fgiguidelines.org.

The following sections have been amended in this second printing:

Appendix section A2.2-3 (Design considerations for accommodations for care of persons of size: Design Elements)

Section 2.3-3.2.2.1 (Examination and Treatment Room Space Requirements: Design Elements)

Appendix section A2.3-3.2.2.2 (2) (Examination or treatment rooms for persons of size: Design Elements)

Section 3.1-2.2.2 (Resident Room: Specific Requirements for Nursing Homes)

Section 3.1-2.2.3 (Resident Room for Persons of Size: Specific Requirements for Nursing Homes)

Amended text is indicated by a dotted line to the left of the column.

Example of alert immediately preceding affected sections in the main text:

In this second printing of the 2018 Guidelines for Design and Construction of Residential Health, Care, and Support Facilities, Section 2.3-3.2.2.1 (Examination and Treatment Room Space Requirements: Design Elements) has been altered by the issuance of an official interim amendment (see page 1). FGI considers this amended document to be the official edition of the 2018 Residential Guidelines. For states that have adopted the first printing of this document, a paper explaining the changes—with the affected sections shown as published in the first printing of the 2018 Residential Guidelines—can be accessed at www.fgiguidelines.org.

Amended text is indicated by a dotted line to the left of the column.

Applying the Amended Text

FGI encourages all users of the 2018 Residential *Guidelines* to print this document and affix it to copies of the first printing. For users with digital licenses, the changes are shown in the page view content on MADCAD in the same way. The changes have been incorporated into the HTML version on MADCAD seamlessly, without identifying alerts.

Before beginning any residential project, FGI recommends verifying with the local AHJ which printing of the 2018 Residential *Guidelines* is being followed by the state.

The interim amendment text featured in the following table also appears in the draft of the 2022 Residential *Guidelines*. Although FGI considers it to be the official 2018 Residential *Guidelines* text, the RDG and HGRC believe it is appropriate to present these changes as new in the draft 2022 Residential *Guidelines* to give the public an additional opportunity to provide feedback.

Public comments may be submitted via FGI's comment platform at <u>www.fgiguidelines.net</u> from July 1, 2020, through September 30, 2020.

The following table provides a cross-walk to illustrate the changes made to the 2018 Residential *Guidelines* by the interim amendment as compared to the original language in the first printing of the document. The left column shows the text in the first printing, and the right column shows the text in the second printing. (Sections beginning with "A"—shown in italic in this table—are appendix text, which is advisory only.)

2018 Residential Guidelines, first printing

A2.2-3-a Design considerations for accommodations for care of persons of size

a. Accommodations for persons of size and the equipment needed to care for them require more operational space and more storage than a traditional resident health, care, or support environment. Therefore, additional square footage may be required to accommodate these needs.

Size increases will be determined by the space needs of expanded-capacity portable equipment (e.g., beds, wheelchairs, lifts) and fixed equipment (e.g., exam tables) designed for persons of size. Equipment used for persons of size is considerably larger than standard equipment. For example, a bed with a 1,000-pound capacity is 44 inches (101.6 centimeters) to 57 inches (144.78 centimeters) wide by 96 inches (243.84 centimeters) to 102 inches (259.08 centimeters) long.

Resident rooms and exam rooms for persons of size should have a minimum clear floor area of 200 square feet (18.58 square meters); a minimum clear dimension of 17 feet (5.18 meters); and a minimum clearance of 7 feet (2.13 meters) on one side and 5 feet (1.52 meters) on the other side and at the foot of the treatment table or bed. Where a portable lift is used, a minimum of 35 square feet (3.25 square meters) of storage space should be provided. Equipment used for persons of size is considerably larger than standard equipment. A bed with a 1,000-pound capacity is 44 inches (101.6 centimeters) to 57 inches (144.78 centimeters) wide by 96 inches (243.84 centimeters) to 102 inches (259.08 centimeters) long.

Toilet fixtures should be floor-mounted and designed to sustain a minimum concentrated load of 800 pounds (362.88 kilograms)—or as indicated for the care population being served—and mounted a minimum of 24 inches (60.96

2018 Residential Guidelines, second printing

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Size increases will be determined by the space needs of expanded-capacity portable equipment (e.g., beds, wheelchairs, lifts) and fixed equipment (e.g., exam tables) designed for persons of size. Equipment used for persons of size is considerably larger than standard equipment. For example, a bed with a 1,000-pound capacity is 44 inches (101.6 centimeters) to 57 inches (144.78 centimeters) wide by 96 inches (243.84 centimeters) to 102 inches (259.08 centimeters) long.

See Section 2.3-3.2.2 (Examination and Treatment Room Space Requirements) and Section 3.1-2.2.3.2 (Resident Room for Persons of Size: Space requirements) for space requirements for resident rooms and exam rooms for persons of size.

Toilet fixtures should be floor-mounted and designed to sustain a minimum concentrated load of 800 pounds (362.88 kilograms)—or as indicated for the care population being served—and mounted a minimum of 24 inches (60.96

centimeters) on center from the finished wall. A clear floor space of 5 feet (1.52 meters) should be provided on one side of the toilet for access and assistance. Sinks also need to be floor mounted, as people lean on a sink and its surrounds while using the bathroom. A clear floor area of 5 feet (1.52 meters) should be provided on either side of the sink and toilet to accommodate a caregiver who is assisting the resident. It is also good practice to provide a handrail designed to sustain a minimum concentrated load of 800 pounds (362.88 kilograms), or as indicated for the care population being served, adjacent to the sink to give the resident a means of support other than the sink and its surrounds.

If a resident is able to walk, he or she will likely need to use a handrail for support or balance. Such handrails should be designed to support and sustain a minimum concentrated load of 800 pounds (362.88 kilograms).

2.3-3.2.2 Examination and Treatment Room Space Requirements

2.3-3.2.2.1 Area

- (1) Each examination or treatment room shall have a minimum clear floor area of 120 square feet (11.15 square meters).
- (2) Where an examination or treatment room is used for a population that includes persons of size, a minimum clear floor area of 210 square feet (19.51 square meters) shall be provided.

A2.3-3.2.2.2 (2) Examination or treatment rooms for persons of size... [not in first printing]

A3.1-2.2.2.2 Determining space needs. Resident rooms should be sized, arranged, and furnished to maximize safe patient mobility, mobilization, weight-bearing exercise, and ambulation potential while minimizing risk to caregivers. This should

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If a resident is able to walk, he or she will likely need to use a handrail for support or balance. Such handrails should be designed to support and sustain a minimum concentrated load of 800 pounds (362.88 kilograms).

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- (1) Each examination or treatment room shall have a minimum clear floor area of 120 square feet (11.15 square meters).
- (2) Where an examination or treatment room is used for a population that includes persons of size, a minimum clear floor area of 219 square feet (20.35 square meters) shall be provided.

A2.3-3.2.2.2 (2) Examination or treatment rooms for persons of size should have a minimum clear dimension of 17 feet (5.18 meters) and a minimum clearance of 7 feet (2.13 meters) on one side and 5 feet 6 inches (1.68 meters) on the other side and 5 feet (1.52 meters) at the foot of the treatment table or bed. Where a portable lift is used, a minimum of 35 square feet (3.25 square meters) of storage space should be provided.

A3.1-2.2.2.2 Detemining space needs [not in second printing]

apply to all populations being cared for and served.

Clearances should be provided and maintained to accommodate safe resident mobility and mobilization of residents. Designated clearances should not be obstructed by any object that does not qualify as movable according to Section 1.5-4.2 (Movable and Portable Equipment).

a. To facilitate planning for minimum clearances around beds, bed type and size should be established as part of the functional program. As acceptable to AHJs, bed placement should be chosen by individual residents and their families to satisfy the needs and desires of the resident.

b. Provision of bed clearances to support resident safety should include the following:

- Standard resident room:
- 48 inches (121.92 centimeters) on the transfer side
- 36 inches (91.44 centimeters) on the nontransfer side of the bed
- 36 inches (91.44 centimeters) at the foot of the bed
- Resident rooms for persons of size with an overhead lift:
- 72 inches (182.88 centimeters) from the bed by 120 inches long (304.8 centimeters) on the transfer side
- 36 inches (91.44 centimeters) on the nontransfer side of the bed
- 66 inches (167.64 centimeters) at the foot of the bed
- Resident rooms for persons of size without an overhead lift to accommodate use of a mobile lift:
- 84 inches (213.36 centimeters) from the bed by 120 inches long (304.8 centimeters) on the transfer side
- 36 inches (91.44 centimeters) on the nontransfer side of the bed
- 66 inches (167.64 centimeters) at the foot of the bed

Where lifts are used, additional clearance is needed to accommodate use of the lift and an expanded capacity wheelchair as well as space for staff to help a person of size transfer from bed to

wheelchair or gurney. Mobile lifts require more floor space than overhead lifts to accommodate the lift footprint.

- c. Sizing of resident rooms should accommodate elearances for resident chairs, recliners, wheelchairs, or other devices; these clearances may overlap with the bed clearances. The size of each room should allow unimpeded clearance on at least one side and at the front of any resident chair, etc., as follows:
- 48 inches (121.92 centimeters) on the transfer side of the chair, etc. for both standard and person of size room types
- 36 inches (91.44 centimeters) for the approach to the chair for a standard room
- —66 inches (167.64 centimeters) for the approach to the chair for a room accommodating a person of size

3.1-2.2.2 Space requirements

- (1) Space shall be provided to accommodate resident care and for maneuverability when resident operated mobility devices are used.
- (2) Resident rooms shall be sized, arranged, and furnished to maximize safe resident mobility, mobilization, weight bearing activity, and ambulation potential and to minimize risks to caregivers. This requirement shall apply to all resident rooms, regardless of resident weight or condition.

3.1-2.2.2.2 Space requirements

- *(1) Area. Single- and multiple-resident rooms shall be sized to accommodate the functional placement of required furnishings and equipment essential to resident comfort and safety.
 - (a) Where a single-resident room is provided, it shall have the following:
 - (i) Minimum clear floor area of 120 square feet (11.15 square meters), excluding closet or wardrobe, bathroom, and vestibule entry
 - (ii) Minimum clear dimension of 11 feet (3.35 meters)
 - (b) Where a multiple-resident room is provided, it shall have the following:
 - (i) Minimum clear floor area of 108 square feet (10.03 square meters) per resident bed, excluding closet or wardrobe, bathroom(s), and vestibule entry
 - (ii) Minimum clear dimension of 9 feet 6 inches (2.90 meters)

A3.1-2.2.2.2 (1) Space should be provided to accommodate the care population, resident care, and maneuverability when resident-operated mobility devices are used. Functional placement is based on considerations for safe resident mobility,

mobilization, weight-bearing activity, and ambulation and for minimization of risks to caregivers.

*(2) Clearances. Clearances shall be a consideration during design of resident rooms.

A3.1-2.2.2.2 (2) Clearances. To facilitate planning for minimum clearances around beds, bed type and maximum bed size should be established by the residential care organizations as part of the functional program. Whenever possible, bed placement should be chosen by individual residents and their representatives or persons of significance (e.g., family, spouse/partner, resident-appointed advocate) to satisfy the needs and desires of the resident.

- a. In resident rooms, the following minimum clearances should be used around the resident bed to support resident and staff safety:
- <u>48 inches (121.92 centimeters) on the transfer</u> <u>side</u>
- <u>—36 inches (91.44 centimeters) on the non-transfer side</u>
- <u>—36 inches (91.44 centimeters) at the foot in</u> single-resident rooms
- <u>—48 inches (121.92 centimeters) at the foot of each bed in multiple-resident rooms</u>
- b. In resident rooms, a clear circulation pathway of 36 inches (91.44 centimeters) should be provided between fixed elements or equipment. This circulation pathway should be permitted to overlap other required clearances.
- c. Sizing of resident rooms should accommodate clearances for resident chairs, recliners, and other movable furnishings; these items and their clearances may overlap with the bed clearances. The size of each room should allow unimpeded clearance on at least one side and at the front of any resident chair, as follows:
- <u>—48 inches (121.92 centimeters) on the transfer</u> side
- <u>—36 inches (91.44 centimeters) for the approach</u> to the chair
- d. Arrangement of furniture that reduces these clearances should be permitted as long as access for other occupants is not reduced and there is at

- (3) Area and dimensions. The area and dimensions provided for each resident space shall be based on inclusion of the following:
 - (a) Space to accommodate a maximum of two beds that allows staff members access to both sides and the foot of each bed
 - (b) A window accessible from a wheelchair or other resident-operated mobility device
 - (c) A wardrobe or closet accessible from a wheelchair or other resident-operated mobility device
 - (d) The following furniture accessible from a wheelchair or other resident-operated mobility device:
 - (i) Bed
 - *(ii) Lounge chair
 - (iii) Dresser
 - (iv) Nightstand

A3.1-2.2.2 (3)(d)(ii) Resident seating. The lounge chair provided in a resident room to give residents an alternative to bed-stay should be evaluated for provision of the following:

- —Comfort sufficient for long-term sitting
- —Cervical support and support for the resident's head (backrest)
- Opportunity to recline the backrest to enable periodic redistribution of body weight during long periods of sitting (recliner)
- —Ease of entry and exit

See appendix section A2.4-2.4.3.1 (Furniture selection recommendations) for additional information.

<u>least one layout that meets the recommended</u> <u>clearances in appendix section A3.1-2.2.2.2 (2)</u> (Clearances).

(3) Resident room accommodations.

Accommodations provided for each resident room shall be accessible from a wheelchair or other resident-operated mobility device and include the following:

- (a) Window
- (b) Bed
- *(c) Resident chair or recliner
 - (i) Location of the resident chair or recliner adjacent to the head of the bed shall be permitted.
 - (ii) Use of a recliner in lieu of a bed shall be permitted based on resident preference.
- (d) Wardrobe(s) or closet(s). Where a movable wardrobe(s) is provided, it shall be permitted to be located adjacent to the head of the bed.
- (e) Dresser. The dresser shall be permitted to be located:
 - (i) In or as part of a wardrobe or closet.
 - (ii) On the wall adjacent to the head of the bed.
- (f) Nightstand. The nightstand shall be permitted to be located adjacent to the head of the bed.

A3.1-2.2.2.2 (3)(c) Resident chair or recliner. The lounge chair or recliner provided in a resident room to give residents an alternative to bed-stay should be evaluated for provision of the following:

- a. Comfort sufficient for long-term sitting
- b. Cervical support and support for the resident's head (backrest)
- c. Opportunity to recline the backrest to enable periodic redistribution of body weight during long periods of sitting (recliner)
- d. Ease of entry and exit

See appendix section A2.4-2.4.3.1 (Furniture selection recommendations) for additional information.

*(e) Space for a side chair

A3.1-2.2.2.2 (3)(e) Visitor seating. Provision of a side chair for a visitor means residents do not have to remain in bed when they have a visitor.

- (f) The room shall be configured so that each resident can view the television from a resident chair.
- (g) Direct access from the room entry to the toilet room, closet or wardrobe, and window, without traveling through the living space of another resident
- *(h) Clearance for staff members to use lifting equipment to access the bed, chairs, and toilet. See appendix section A3.1-2.2.2.2-b (Determining space needs) for recommendations.

A3.1-2.2.2 (3)(h) Although use of portable lifting equipment requires more clearance for maneuvering than fixed lifting equipment, use of fixed equipment does not eliminate the need for portable equipment. Portable equipment will be required when a resident falls out of range of a fixed lift or requires a sit to stand lift.

Using a portable lift without powered wheels to move a resident laterally requires more exertion by staff than using a fixed lift; in addition, the exertion required is increased where the floor is earpeted. However, carpet types differ in their resistance to wheeled devices, and carpet has significant advantages over hard surface flooring in noise reduction and residential appearance, both of which are important in creating a comfortable, attractive living environment. See Section 2.4-2.3.2 (Flooring and Wall Bases) for requirements.

Resident rooms and associated toilets may be equipped with a ceiling-mounted track to accommodate ceiling-mounted mobility and lifting devices. The track layout should be designed to aid in maintaining or improving resident mobility and ambulation, independent function, and strength and to help staff members transfer residents to or from bed/chair/toilet/bathing facilities/stretcher or reposition them in a bed or a chair.

One objective in using ceiling systems would be to assist residents who have poor balance or are

*(g) Space for a side chair

A3.1-2.2.2.2 (3)(g) Visitor seating. Provision of a side chair for a visitor means residents do not have to remain in bed when they have a visitor.

- (h) The room shall be configured to provide each resident with a view of the television from a resident chair or recliner.
- (i) Direct access shall be provided from the room entry to the <u>bed</u>, toilet room, closet or wardrobe, and window without traveling through the living space of another resident.

A3.1-2.2.2.2 (3)(h) Although use of portable lifting equipment... [not in second printing]

unable to bear all of their weight to stand and ambulate throughout the room. A second objective would be to maximize resident choice and control of bed location and room arrangement, key factors in creating "home" for the resident.

One way to meet these objectives is to install permanent tracks the full length of two sides of the room with a perpendicular spur that extends into the toilet room over the toilet and into a shower, where provided. With this basic layout, when residents who require mobility or transfer assistance move into a room, a cross track and lift device can be installed for the duration of their stay. This approach would make all areas of the room accessible to the resident using the lifting device, thereby offering the resident a variety of room arrangements and substantially reducing the need for a portable lift.

(4) Every bed location shall have sufficient space to permit placement of a stretcher along one side for lateral transfer of the resident from the bed to the stretcher by at least two staff members without substantial rearrangement of furniture.

(5) Clearances

- (a) In multiple-bed rooms, clearance shall allow for the movement of beds and equipment without disturbing residents.
- (b) Clear access to one side of the bed shall be provided along 75 percent of its length.
- (c) Mechanical and fixed equipment shall not obstruct access to any required element.
- (d) These guidelines shall allow arrangement of furniture that may reduce these access provisions, without impairing access provisions for other occupants.

3.1-2.2.3 Special Care Resident Rooms [Resident Room for Persons of Size was not in the first printing; Section 3.1-2.2.3 has been renumbered as Section 3.1-2.2.4 in the second printing.]

3.1-2.2.3 Resident Room for Persons of Size

Where a resident room(s) designed to accommodate persons of size is provided, it shall meet the requirements in Section 3.1-2.2.2 (Resident Room) except as amended in this section.

3.1-2.2.3.1 General

*(1) The need for, number, and type of resident rooms accommodating persons of size shall be determined for the intended care population during the functional programming process.

- A3.1-2.2.3.1 (1) Considerations for persons of size. The projected need for accommodations for care of persons of size should be defined in the planning phase and include the following:
- —Projected weight capacities for persons of size in the population to be served
- —Projected number of resident rooms required to accommodate persons of size
- —Projected number of expanded-capacity lifts required to accommodate persons of size
- (2) Where the facility provides resident rooms for persons of size, see sections 1.2-5.6 (Planning Considerations for Persons of Size) and 2.2-3 (Design Criteria for Accommodations for Care of Persons of Size) for further requirements.

*3.1-2.2.3.2 Space requirements

A3.1-2.2.3.2 Resident lifting equipment. See Section 1.2-3.3 (Resident Mobility and Transfer Risk Assessment) for information on providing resident lifts to mitigate risks involved in resident handling and mobility tasks. Information and guidance for evaluating resident mobility and transfer risks can be found in "Patient Handling and Mobility Assessments," a white paper published by the Facility Guidelines Institute and available from www.fgiguidelines.org.

(1) Area

- (a) Where a single-resident room with a fixed overhead lift is provided, it shall have the following:
 - (i) Minimum clear floor area of 200 square feet (18.58 square meters), excluding closet or wardrobe, bathroom, and vestibule entry
 - (ii) Minimum clear dimension of 13 feet (3.96 meters)
- (b) Where a multiple-resident room with a fixed overhead lift is provided, it shall have the following:
 - (i) Minimum clear floor area of 176 square feet (16.35 square meters) per resident

- bed, excluding closet or wardrobe, bathroom(s), and vestibule entry
- (ii) Minimum clear dimension of 10 feet 9 inches (3.28 meters) for the clear floor area for each resident
- (c) Where a single-resident room for persons of size without an overhead lift is provided but mobile lifts will be used, the room shall have the following:
 - (i) Minimum clear floor area of 219 square feet (20.35 square meters), excluding closet or wardrobe, bathroom, and vestibule entry
 - (ii) Minimum clear dimension of 13 feet (3.96 meters) for the clear floor area for each resident
- (d) Where a multiple-resident room without an overhead lift is provided but mobile lifts will be used, the room shall have the following:
 - (i) Minimum clear floor area of 192 square feet (17.84 square meters) of clear floor area per resident bed, excluding closet or wardrobe, bathroom(s), and vestibule entry
 - (ii) Minimum clear dimension of 10 feet 9 inches (3.28 meters) for the clear floor area for each resident
- *(2) Clearances. Clearances shall be a consideration during design of resident rooms for persons of size.
- A3.1-2.2.3.2 (2) Clearances. To facilitate planning for minimum clearances around beds, bed type and maximum bed size should be established by the residential care organization as part of the functional program. Whenever possible, bed placement should be chosen by individual residents and their representatives or persons of significance (e.g., family, spouse/partner, resident-appointed advocate) to satisfy the needs and desires of the resident.
- a. In resident rooms for persons of size with an overhead lift, the following minimum clearances should be used around the bed to support resident and staff safety:

- —66 inches (167.64 centimeters) from the bed by 126 inches long (320 centimeters) on the transfer side
- <u>—66 inches (167.64 centimeters) on the non-transfer side</u>
- <u>—60 inches (152.4 centimeters) at the foot</u>
- b. In resident rooms for persons of size without an overhead lift where mobile lifts will be used, the following minimum clearances should be used around the bed to support resident and staff safety:
- —84 inches (213.36 centimeters) from the bed by 126 inches long (320 centimeters) on the transfer side
- <u>—66 inches (167.64 centimeters) on the non-transfer side</u>
- —60 inches (152.4 centimeters) at the foot
- c. In resident rooms for persons of size, a clear circulation pathway of 60 inches (152.4 centimeters) should be provided between fixed elements or equipment. This circulation pathway should be permitted to overlap other required clearances.
- d. Sizing of resident rooms for persons of size where a mobile lift will be used, whether or not an overhead lift is present, should accommodate clearances for resident chairs, recliners, and other movable furnishings; these items and their clearances may overlap with the bed clearances. The size of each room for a person of size should allow unimpeded clearance on at least one side and at the front of any resident chair as follows:
- <u>—48 inches (121.92 centimeters) on the transfer side</u>
- <u>—66 inches (167.64 centimeters) for the approach</u> <u>to the chair</u>
- e. Mobile vs. fixed lift clearance considerations
- —Where lifts are used, additional clearance is needed to accommodate use of the lift, an expanded-capacity wheelchair, and space for staff to help a person of size transfer from bed to wheelchair or gurney. Mobile lifts require more floor space than overhead lifts to accommodate the lift footprint. Selection of lift equipment should be completed during the functional programming process to evaluate clearances required.
- —Use of portable lifting equipment requires more clearance for maneuvering than fixed lifting

- equipment; however, the use of fixed equipment does not eliminate the need for portable equipment. Portable equipment could be needed when a resident is not in proximity to a fixed lift or requires a sit-to-stand lift.
- —Using a portable lift without powered wheels to move a resident laterally requires more exertion by staff than using a fixed lift, and the exertion required is increased where the floor is carpeted. See Section 2.4-2.3.2 (Flooring and Wall Bases) for additional information.
- —Resident rooms and associated toilets may be equipped with a ceiling-mounted track to accommodate ceiling-mounted mobility and lifting devices. The track layout should be designed to aid in maintaining or improving resident mobility and ambulation, independent function, and strength and to assist staff members with transfer of residents to or from bed/chair/toilet/bathing facilities/stretcher or repositioning residents in a bed or chair.
- -One objective of using ceiling lift systems is to support residents who have poor balance or are unable to bear all of their weight to stand and ambulate throughout the room. A second objective is to maximize resident choice and control of bed location and room arrangement, key factors in creating "home" for the resident. These objectives can be met by installing permanent tracks the full length of two sides of the room with a perpendicular spur that extends into the toilet room over the toilet and into a shower (i.e., an "I" or "H" layout) to achieve maximum flexibility. This approach would make all areas of the room accessible to the resident using the lifting device, thereby offering the resident a variety of room arrangements and substantially reducing the need for a portable lift.