

Space Policy

1. Purpose

Space is an organizational asset that plays an integral role in the delivery of patient care, research and academics across Providence Health Care. This policy will be applied by the PHC Space Committee to requests for changes to space or for requests for additional space.

2. Definitions

For greater clarity, the following definitions will be used in this policy:

Academic Space	Academic Space ¹ is defined as hospital facilities and any other health care facilities used for the mandated purposes of the affiliated post-secondary education partner (UBC) and dedicated primarily to: <ul style="list-style-type: none">a) Teaching medicine, nursing or another health discipline, andb) Conducting research in medicine, nursing or another health discipline and includes lecture halls, laboratory space and academic offices
Clinical Services	Refers to the provision of direct patient care by medically certified professionals.
Direct Care Site	Includes acute hospitals, long term care facilities, community site or any other site where Clinical Services are provided.
Occupancy Updates	A change in seating assignments within one department that does not require substantial renovations. Costs incurred are minor and will be funded the departments operational budget
Space Requests	An ask for additional space, or changes that require renovations or other elements. These may also require operational and/or capital funding in excess of the departments existing budget.

3. Scope

This policy applies to all PHC owned space including acute, long term care, leased and community. It covers corporate staff, contractors, medical Staff and researchers and addresses all planning and decision-making processes related to space allocation for Programs and Services for Providence Health Care located in owned and leased spaces.

The allocation of Academic space will be in accordance with the Academic Space Protocol (2002) and the Companion Document (Sept 2018) and will be in compliance with the PHC Space Policy.

¹ As per the Hospital Insurance Act Regulations, September 1995.

The overriding intent is for the Space Committee to approve practical and non-disruptive changes quickly and to validate and explore larger, more complex changes before rendering a recommendation to the SLT for decision to speed up the decision making process.

4. Principles

Within the limitations of current infrastructure, the scarcity of space in Direct Care Sites and in the context of the PHC Strategic Plan, this Space Policy strives to the following principles:

- **Transparency** – Space allocations shall be consistent with principles and transparent to the organization.
- **Person and Patient Centered** - Clinical Services will take priority in obtaining or retaining space at Direct Care sites and will take into account the patient experience and care journey.
- **Strategic**– Space distribution and utilization will be prioritized based upon strategic priorities including those in the areas of Research and innovation.
- **Wellness** - Space should supports wellness for patients and PHC staff and employees by adhering to design that protects and enhances the physical and emotional safety. Where the physical infrastructure permits, space will adhere to the Workspace Design Guidelines (**Appendix A**) and Recommendations for Workspaces (**Appendix B**).
- **Equity & Efficiency** – Space shall be provided equitably and designed to ensure the optimum use of space available. It shall further be of similar quality across all work environments for all types of staff taking into consideration the current physical limitations of the building(s) in question. Where the physical infrastructure permits, space will adhere to the Workspace Design Guidelines (**Appendix A**) and Recommendations for Workspaces (**Appendix B**).
- **Sustainability** – Space solutions will take into account the best value for PHC’s operating and capital budgets and meet long range needs by being able to flexibly adapt to address changing needs for space

5. Space Committee

The Space Committee shall be comprised of members to represent the organizational space needs and will be constituted according to the Space Committee Terms of Reference. The membership of the committee may be amended over time but as of the date this policy was published, consists of the following members:

- VP Medical Affairs
- Chief Financial Officer
- VP Research & Academic Affairs
- Site Lead(s) SPH, MSJ and Long Term Care
- Facilities Representative
- Senior Medical Representative
- Research Representative
- New St. Paul’s Hospital Redevelopment Representative
- Medical Staff Representative

- Space Coordinator

The Space Committee meets on a regular basis and reviews Space Changes and Space Requests according to the process laid out below in Section 6. The Space Committee is charged with applying the Space Policy to decisions around the allocation and utilization of space at PHC.

6. Space Change and Space Request Process

The process for requesting changes to space or for requesting additional space is included in this policy to outline the process by which space allocation decision will be made. Minor changes and alterations to the process can be made by the Space Committee as they see fit, however any material modifications to the process would require amendment to this policy itself.

- a) All requests for new space or changes to existing space must be submitted to the Space Co-ordinator, using the Space Change Form (**Appendix D**). The request forms will be reviewed and catalogued by the Space Co-ordinator.
- b) Occupancy Updates will be approved by the space coordinator directly and the seating plan will be updated accordingly.
- c) Space Requests will be reviewed by the Space Committee and will require a financial analysis of the cost of the move, clear indication of funding identified (both for operating and capital components) and for larger changes, a completed Functional Program or New Clinical Proposal approved by the appropriate clinical and medical committees, and a financial analysis approved by Finance.
- d) If the change can be readily accommodated within existing premises and PHC overall financial budgets, does not affect the ability to address higher priority space requests and is consistent with its Terms of Reference and this Space Policy, the Space Committee can approve the Space Request. If not, the Space Committee will make a recommendation to the SLT for approval of the Space Request.
- e) The Senior Leadership Team is responsible for reviewing and approving major space decisions and to ensure that space is used to achieve the organization's strategic objectives. They are also responsible to enact such changes as are required as a result of decisions that are made related to space allocation or use. A majority of all SLT members is required to approve such decisions or variations from this policy. Department VP's do not have the ability to override this policy individually.
- f) Once space decisions are made, Facilities Management will be responsible for managing and coordinating any moves, renovations, etc. All move requests require the completion of a Facilities Management Service Request Form.

7. Utilization Reviews and Vacant Space

The Space Committee is also responsible for reviewing the space utilization metrics from past decisions and recommended changes if needs and uses change over time.

Examples of metrics that could be used to assess utilization of spaces (depending on the type of work being done) may include:

- Number of patient visits per day per square foot
- % of time that space is open to patients
- Number of procedures performed per square foot
- % of time meeting space is occupied
- A change in level of grant funding relative to funding that was associated with the original space allocation

Vacant or underutilized space will be reclaimed and reallocated by the Space Committee. Upon vacating space, the former occupant is responsible for ensuring that the space is cleared of files, equipment and other materials.

8. Dispute Resolution

Disputes that arise as a result of decisions made by the Space Committee shall be brought to SLT once the Space Committee has had an opportunity to hear the dispute.

9. Supporting Documents

9.1. Related Policies

[Information Privacy and Confidentiality](#)

9.2. Guidelines/Procedures/Forms

[Space Request Form](#)

10. Appendices

Appendix A: Workspace Design Guidelines
Appendix B: Recommendations for Workspaces
Appendix C: Space Request Process
Appendix D: Space Request Form

Appendix A: Workspace Design Guidelines

As noted in the previous sections, individual space allocations will be determined on the basis of functional space requirements, the priorities of the organization, and the total space and budget available.

In general, the following design guidelines support the workplace planning principles outlined in the previous sections:

- Space should be allocated to promote collaboration. Programs/services that perform functions/activities that require similar functionality of space, equipment and or technical support should have space in close proximity to one another and share support facilities.
- Wherever possible, planning should consolidate dispersed Business Units into a location that maximizes operating efficiencies and promote internal communication.
- In accordance with the PHC Information Privacy & Confidentiality Policy, all PHC staff will be held to the same level of confidentiality in all types of workspaces, therefore confidentiality among all staff is assumed ²
- Space saving strategies such as efficient layouts, space saving equipment, recovery of inefficient space will guide the design process.
- Renovations will have to fit existing floor plates and building cores.
- Planning should take into account optimal work environments and functional adjacencies.
- For leased space, existing tenant improvements and assets will be re-used or refurbished wherever possible and whenever appropriate.
- Access to natural daylight for employees where building floorplate layouts permit³.
- Clearly defined aisles and exits (removal of equipment and storage from all traffic routes)³.
- Way finding and orientation – provide easy cues in the building to assist individuals on where to go and how to leave³.
- Provide gathering spaces to help build trust through social interaction, support information and idea sharing, and decision transparency³.
- Provide flexible space, components and technology that allow workers the appropriate control of privacy levels for security and confidentiality³.

² Administrative Space Guidelines, Alberta Health Services, April 3, 2009.

³ Workplace Strategy: Southport Expansion Project, CHR, Steelcase 2006.

Appendix B: Recommendations for Workspaces

Below is a list of recommended workspaces for varying job functions based on the functional and utilization criteria outlined. Final recommendations will take into account the practical realities of the given building such as current layout, hazardous materials and availability of building permits:

Type of Workspace	Criteria for Allocation	Net Area ⁴	
		m ²	ft ²
Touchdown open workspaces	<ul style="list-style-type: none"> Unassigned workspaces for individuals who require access to workspace (e.g. email access) during a visit, or temporary transition. The majority of these individual's times is spent in alternate workspace such as an alternate site or in a clinical setting. Workspace would include basic equipment (computer, phone). Space cannot be claimed for long term use. Typical assignment would include residents, students, visiting consultants or administrative staff. 	2.5	26
Shared Open workspaces	<ul style="list-style-type: none"> Workspace is used intermittently or temporarily and the majority of the individual's professional time (70% or greater) is spend in alternate workspaces such as the community or clinical settings. Size of assigned workspace would be dependent on purpose and/or function. Or the individual's position is part time (0.5 FTE or less) or shift. Whenever possible, schedules for part time staff should be coordinated to maximize space utilization. Typical assignment would include clinic support staff, home care nurses, public health nurses, PT/OTs. 	2.5 to 3.9 ⁵	26 to 42
Dedicated Open Workspaces: Overview	<ul style="list-style-type: none"> In general, open workspaces will be assigned to staff who do not require a high degree of unscheduled confidentiality. A dedicated workspace would be assigned if the majority (70% or greater) of the Individual's time was spent at that workspace. 		

⁴ The Net Area of a room is the total floor area of the room available to the assigned occupant or use.

⁵ Note that the area is indicated as a range as the variation in workspace would depend on the purpose and function of its use

	<ul style="list-style-type: none"> Provision of meeting rooms and spaces to support private conversations will be provided. 		
Dedicated Open Workspace: Type 1	<ul style="list-style-type: none"> Individual's functional activities include concentrated multi-source paper work, compiling information, reading, writing, analyzing, calculating and referencing multiple sources of material. Multi-task paper intensive work, telephone work, keyboarding, filing, sorting documents, handling mail, editing, operating equipment, scheduling, receiving visitors. Typical assignment for managerial, professional or technical staff, assistant and administrative support staff. 	3.9	42
Dedicated Open Workspace: Type 2	<ul style="list-style-type: none"> Specific, task-oriented work, focusing on data input into electronic media. Typical assignment for clerical and data entry staff. 	2.8	30
Dedicated Enclosed Workspace: Overview	<ul style="list-style-type: none"> Provide evidence that a minimum of 70% of the individual's daily time (e.g. on a daily basis for at least 5 hours during the day) is spent in frequent meetings with up to 4 others and/or requires a high degree of unscheduled confidentiality either from other staff within their own group or visiting public within the office. For those instances, security, visual and acoustical privacy is required. These interactions are occurring primarily in this assigned space and not in an alternate space. Examples include individuals who frequently (minimum 70% of daily time) supervise people under conditions such as mediation, negotiation, litigation, counselling, human resource management or other sensitive conditions. Supervision of staff and/or occasional confidential meetings is not sufficient to qualify for this type of workspace as the provision of meeting rooms and other enclosed workspaces would be a more efficient and functional solution. 		
Dedicated Enclosed Workspace: Type 1	<ul style="list-style-type: none"> Frequent meetings (minimum of 70% of the individual's daily time) with up to 3 others and/or requiring confidentiality, security, visual and acoustical privacy. Would include individuals who are health care providers that have face to face interactions with clients and/or the client's family (minimum of 70% of the individual's daily time) that requires a separate or enclosed space. 	9.5	102

Support Space

Facilities Management will work with the specific program/service to determine the required space allocation for the support areas. In general, Departments that are co-located on a floor are encouraged to share support spaces and equipment.

The provision of the following types of support areas is recommended:

A. Dedicated support space:

- Space should be provided for files, equipment and storage (including personal belongings) that are required to perform the specific tasks of the position. The space should be functionally located with the position and is an addition the individual's workspace. The amount of space provided will vary depending on the functional activities of the individual.
- For archived or files that are used infrequently, all attempts should be made to move to fully electronic records to reduce the need for physical space. A minimum amount of paper files should be stored. Materiel that is not requiring frequent access should be considered for off-site archival storage. Files that are suitable for off-site storage will also be based on legal requirements. Provisions will be made for storage for only active files that are used on a day to day basis. Justification for files used less frequently will need to be made as all efforts should be taken to store files electronically.

B. Group support space: Space should be provided for files, equipment, storage, enclosed rooms (e.g. quiet work rooms), meeting areas which will be shared by a group of individuals. In order to optimize the utilization of space, these areas may be shared with other Business Units or Departments that may be co-located on the same floor. Consider varying sizes of enclosed rooms in order to promote open workstation planning.

C. Floor common support space: Space should be provided for support areas that are shared by all business units/departments on the same floor. These would include areas such as copier and fax rooms, break areas, computer rooms, and reference libraries. These spaces should be directly accessible to the entire floor to minimize individuals from having to travel through other group's areas.

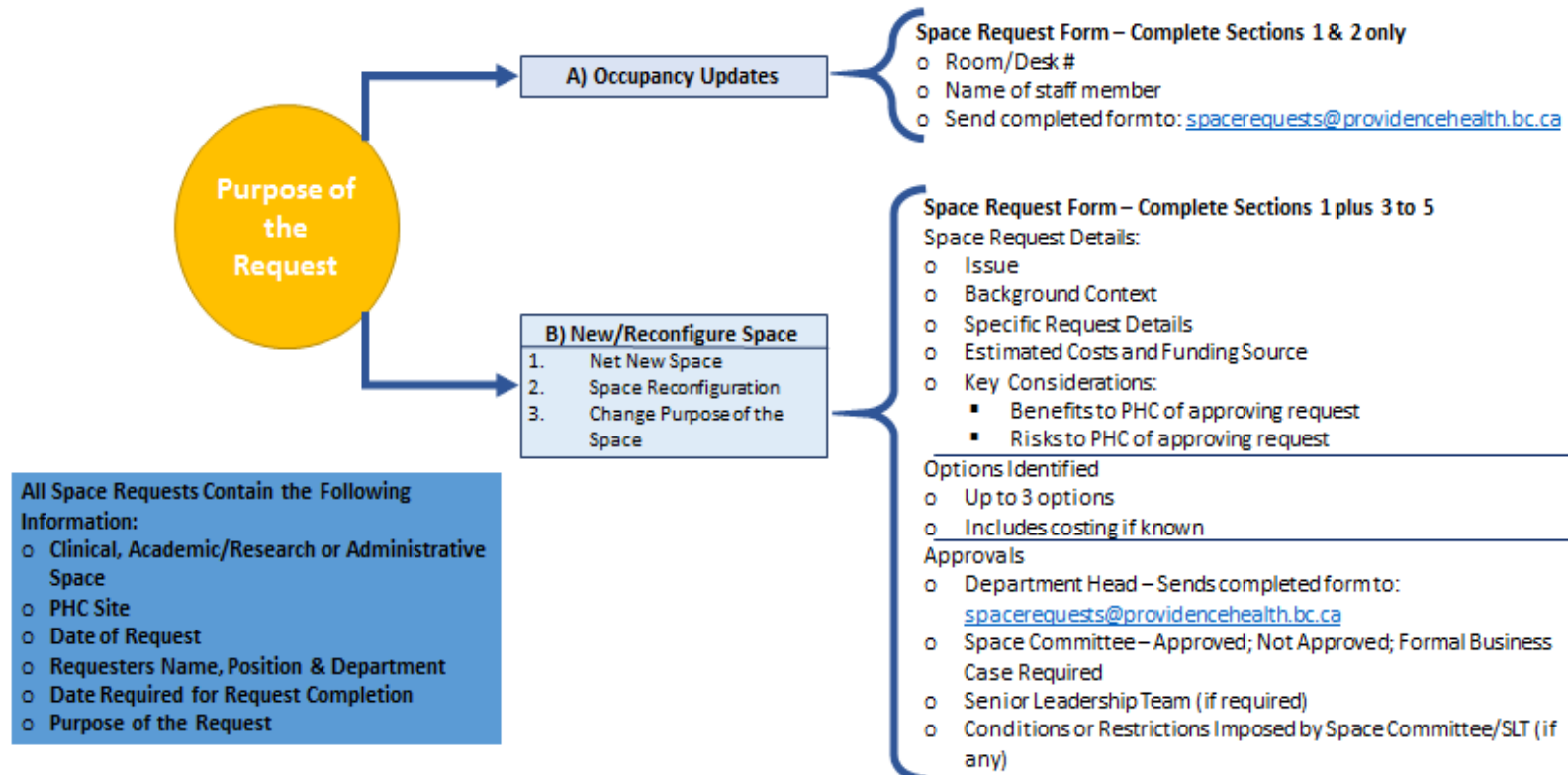
D. Building common support space: These may include spaces such as training/education rooms, large meeting facilities, recycling rooms, etc. which may be located on any floor of the building.

Notes:

- Criteria around furniture and equipment will be detailed at a later date.
- Over the years, existing offices have been built with varying sizes and changing standards. Depending on the existing building infrastructure and budget, adjustments may need to be made in the interpretation of the above design criteria.

Appendix C: Space Request Process

PHC Space Request Process



Appendix D: Space Request Form

Section 1- Details	Relates To: <input type="checkbox"/> Clinical Space <input type="checkbox"/> Academic/Research Space <input type="checkbox"/> Administrative Space		
	PHC Site: Choose an item.		Date Requested: Click or tap to enter a date.
	Name: Click here to enter text.		Position: Click here to enter text.
	Email: Click here to enter text.		Phone number: Click here to enter text.
	Department: Click here to enter text.		Date Required: Click here to enter a date.
	Purpose of the Request: Choose an item.		

Section 2- Occupancy Update Only	Please Enter Details for Each Staff Member Whose Desk or Room Location Has Changed	
	Room/Desk #: Click here to enter text.	Name: Name
	Room/Desk #: Click here to enter text.	Name: Click here to enter text.
	Room/Desk #: Click here to enter text.	Name: Click here to enter text.
	Room/Desk #: Click here to enter text.	Name: Click here to enter text.
	Room/Desk #: Click here to enter text.	Name: Click here to enter text.
	Room/Desk #: Click here to enter text.	Name: Click here to enter text.
	Additional Information if Required: Click here to enter text.	

Section 3 – Space Request Details	Request Type: <input type="checkbox"/> Net New Space <input type="checkbox"/> Space Reconfiguration <input type="checkbox"/> Change Purpose of Space
	Space Issue: Click here to enter text.
	Background: Click here to enter text.
	Space Request Details: Click here to enter text.

	<u>Costs & Funding Source:</u> Click here to enter text.
	<u>Key Considerations:</u>
	Benefits: Click here to enter text.
	Risks: Click here to enter text.

Please fill out Section 4 if you have already identified options. If not, please leave blank.

Section 4 – Options Identified	<u>Option #1 (Recommended):</u> Click here to enter text.	Estimated Cost: Click here to enter text.
	Advantages: Click here to enter text.	
	Disadvantages: Click here to enter text.	
	<u>Option #2:</u> Click here to enter text.	Estimated Cost: Click here to enter text.
	Advantages: Click here to enter text.	
	Disadvantages: Click here to enter text.	
	<u>Option #3:</u> Click here to enter text.	Estimated Cost: Click here to enter text.
	Advantages: Click here to enter text.	
Disadvantages: Click here to enter text.		

Section 5 - Approvals	Department Head: Click here to enter text.	Reviewed & Approved: ✓	Click or tap to enter a date.
	Space Committee: <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> Formal Business Case Required	Option Approved: Choose an item.	Click here to enter a date.
	Senior Leadership Team (if required)	Option Approved: Choose an item.	Click here to enter a date.
	Conditions or Restrictions Imposed by Space Committee/Senior Leadership Team (if any): Click here to enter text.		

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Owners:	PHC			
	CFO & VP Corporate Development			
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	2	April 17, 2013		VP Finance
	3	November 15, 2017		VP Finance
	4	August 7, 2020	<ul style="list-style-type: none"> Changed name from Corporate Space Policy to Space Policy Added Space Committee composition Updated Space Request Process Updated guidelines to align with design work at the New St. Paul's Campus 	CFO & VP Corporate Development
	5	August 24, 2020	<ul style="list-style-type: none"> Added definitions Adjusted principles and added linkages to Appendix A and B Highlighted the relationship with the Academic Space Protocol Further Streamlining of the Space Change and Request approval process 	CFO & VP Corporate Development

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			<ul style="list-style-type: none"> Added section re: Utilization metrics Added Dispute Resolution section 	
	6	September 15, 2020	<ul style="list-style-type: none"> Removed dedicated office spaces to be consistent with NSP design principles Updated Space Change and Space Request forms 	CFO & VP Corporate Development
	7	October 14, 2020	<ul style="list-style-type: none"> Adjusted Appendix B net area assigned to different types of open plan work spaces to reflect current practice Modified definitions and wording to reflect the 2 types of space request Aligned content with revised single space request form, as opposed to separate forms Added content for Appendices C & D and deleted Appendix E 	Executive Director Projects, Planning & Facilities Management