

NEWS RELEASE

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FOR IMMEDIATE RELEASE

“DESIGN GUIDE FOR THE BUILT ENVIRONMENT OF BEHAVIORAL HEALTH FACILITIES”
AVAILABLE ONLINE AT WWW.NAPHS.ORG

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**Free Publication Provides Links to Hard-to-Find Resources and Strategies  
Designed to Enhance Patient Safety**

(Washington, D.C., April 27, 2007).....Reducing hazards in the physical environment in which patients receive treatment for psychiatric and substance use disorders is a critical safety priority for administrators, clinicians, building managers, design professionals. To help behavioral healthcare facilities meet accreditation and regulatory requirements and find appropriate manufactured items for their facilities, two national leaders share their practical experience in a newly updated publication now available free of charge on the Web site of the National Association of Psychiatric Health Systems (NAPHS). The ***Design Guide for the Built Environment of Behavioral Health Facilities: Second Edition*** by **David Sine, ARM, CSP, CPHRM**, and **James M. Hunt, AIA**, is intended to help those who are involved in caring for patients within an existing behavioral healthcare program as well as those designing a new building or renovating space. The second edition of the white paper – first published in 2003 as *Guidelines for the Built Environment of Behavioral Health Facilities* – includes new material and products.

The paper addresses five separate precautionary levels (from non-patient access areas to admission areas and seclusion rooms). General suggestions are provided for the design and layout of the behavioral healthcare unit, including exterior spaces. The paper also identifies specific items and manufacturers (along with model numbers and photographs) to explain why hundreds of resources (from trash cans to security glass) are appropriate for use. An appendix provides detailed information on how to contact each company (with addresses, phone numbers, and Web sites provided). Product information is intended for illustration of one or more specific items that are deemed appropriate for use in this type of facility. Comparable products by other manufacturers meeting the same design criteria may be substituted after careful comparison.

“NAPHS is pleased to make this practical resource from experienced safety experts available to the field at no charge,” said NAPHS Executive Director **Mark Covall**. “NAPHS does not endorse or recommend any specific product, nor does exclusion of a product indicate disapproval. However, we believe that it is important to share ideas that can help in the process of continuously enhancing patient safety and improving patient care. The first edition of this publication was extremely well received by the field, and we appreciate the authors’ efforts to incorporate new products and thinking into the second edition.” The document is not intended to be employed as a legal standard of care which facilities are in any way required to follow.

**A free copy of the publication is available at [www.naphs.org](http://www.naphs.org).**

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### **ABOUT THE AUTHORS**

**David M. Sine, ARM, CSP, CPHRM**, is president of SafetyLogic Systems in Austin, TX. Mr. Sine has had over a 25-year career in safety, risk management, human factors, and organizational consulting. He has been the state safety director of two eastern states, the senior staff engineer for The Joint Commission, and a senior consultant for the American Hospital Association. Founding partner and one-time contributing editor for *Briefings on Hospital Safety*, co-author of *Quality Improvement Techniques for Hospital Safety*, one time vice chair of the board of Brackenridge Hospital in Austin, TX, Mr. Sine is certified by the Joint Board of the American Board of Industrial Hygiene and Certified Safety Professionals and as a Certified Professional Healthcare Risk Manager by ASHRM. He has been a healthcare risk management consultant since 1980 and has conducted more than 1,300 Joint Commission compliance assessment surveys. He serves as a member of the NFPA 101 Life Safety Code Subcommittee on Health Care Occupancies, The Joint Commission Committee on Healthcare Safety, and acts as a risk management advisor to the National Association of Psychiatric Health Systems. Mr. Sine served in the Corporate Offices of the Tenet HealthSystem in Dallas as director of risk assessment and loss prevention and vice president of occupational health and safety. Mr. Sine continues to write and lecture extensively on healthcare policy, governance, quality improvement, and risk management as president of SafetyLogic Systems in Austin, TX. He can be reached at [dsine@austin.rr.com](mailto:dsine@austin.rr.com).

**James M. Hunt, AIA, is president, Facility Services, Inc., Topeka, KS.** Mr. Hunt is a practicing architect and facility management professional with over 30 years experience. He is a registered Architect, holds a certificate from the National Council of Architectural Registration, and began his career practicing architecture for several major healthcare projects. He then served as director of facilities management for the Menninger Clinic for 20 years. In addition to managing their main campus, he also consulted on behavioral healthcare unit remodeling projects for their Clinical Network program, which involved work in eight states including both coasts and the Midwest. During this time he was a founding member of the Health Care Council of the International Facility Management Association. He held several offices in the council including Chair. He was featured in a cover story of *Facility Design and Management* magazine and was published in *Psychiatric Hospital* magazine. He is now the president of Facility Services, Inc., a facility management company serving healthcare and general business organizations by assisting with efficient professional development and management of their facilities. He can be reached at [jim@facilityserv.net](mailto:jim@facilityserv.net).

### **ABOUT NAPHS**

The National Association of Psychiatric Health Systems (NAPHS) advocates for behavioral health and represents provider systems that are committed to the delivery of responsive, accountable, and clinically effective prevention, treatment, and care for children, adolescents, adults, and older adults with mental and substance use disorders. Its members are behavioral healthcare provider organizations that own or manage more than 600 specialty psychiatric hospitals, general hospital psychiatric and addiction treatment units and behavioral healthcare divisions, residential treatment facilities, youth services organizations, and extensive outpatient networks. The association was founded in 1933.

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