



DATE: October 10, 2014

TO: Area Facility Managers
Area Planning Officers
All Health System Planning Software Users
Through: OEHE Director /RJG/

FROM: Director
Division of Facilities Planning and Construction

SUBJECT: Release of the HSP2014b Health System Planning Software

The Division of Facilities Planning and Construction (DFPC) is pleased to announce the release of the updated Health System Planning (HSP) process software: HSP2014b. The software can be found on the DFPC website at: www.ihs.gov/dfpc/. The program is listed under Resources. You may need to seek Administrator privileges to install HSP2014b on your computer if it doesn't install directly.

While we want to begin to use this new version immediately, it is recognized that this is not practical in situations where planning is well advanced. Therefore, projects developed under the HSP2009 or HSP 2014a version which have approved health programs, including deviations, approved RRM staffing, and completed Phase I Site Selection, shall continue to use the HSP2009 or HSP 2014a version to develop and finalize the Program of Requirements (POR) document.

For projects under development, where there is no approval of health programs or RRM staffing, etc., the HSP2014b shall be used to develop the PJD and POR. The PORs must be as complete as possible at the time the request for PJD approval is sought. It is recognized that the Phase II Site Selection and Evaluation Report will not likely be completed at the time the PJD is approved but it must be completed and approved before the POR can be approved.

Once the PJD has been approved, the agency will not process amendments for services, staff, space, etc., unless there is a substantial change in demographics that warrants reconsideration. Documents may be changed, if errors of math or syntax are detected. The major changes in the new HSP2014b version can be viewed in the attachment. Please note that this version now uses the 2013 user population and will project out to year 2025. This data may differ from the previous HSPs which employed the 2005 user population. Due to this update, please be advised that for importing projects created under previous HSP versions, you are urged to check on the communities in HSP 2014b as some communities have moved to other Service Units.

Any project on the priority list that is older than five years and is in imminent range of being funded by Congress may use this version to update their PJD/POR. In addition, locations proposing projects for the purpose of expanding existing space to increase access to health care will be required to use this version. HSP2014b will be used to calculate supportable space values.

If you have any questions, please contact CAPT John Longstaff at 301-443-1068 .

Thank You,

/Raymond P. Cooke, P.E. / _____
Raymond P. Cooke, P.E.

Attachment

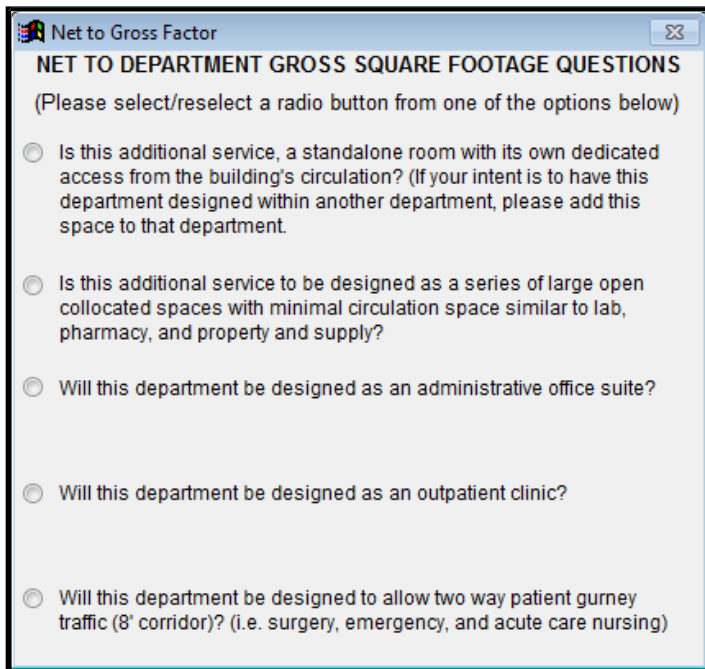
What's NEW in HSP2014a

1. Dental Update
 - Downgraded Dental Chairs and Space Criteria due to a change in the RRM calculation for a Dentist.
 - Updated Notes to the Planner and Space Table and incorporated into HSP2014a.
2. Business Office Update
 - Updated Notes to the Planner & HSP to reflect 1 office per Patient Registration Tech.
 - Previously, 1 office per 6 Techs.
3. Primary Care Update
 - Incorporated the new Improving Patient Care (IPC) concept into the HSP. New Notes to the Planner, Design Notes, Function Sketches and Space Programs.
4. User and Service Population Update
 - Updated the "User Population" from 2005 to 2013.
 - Updated the "Service Population" from 2005 to 2010. The Service Population now projects to 2025.
5. User Population Override Option
 - Added a new feature that allows users to override the HSP population and to project out to the future using the new base year population. **(This Requires HQ's Approval)**

The screenshot shows the 'Project Management - Project - 6A' window with the 'Service Area Selection' tab active. The interface includes several sections for managing service areas, such as 'Project Service Areas', 'Update Dependencies', and an 'Optional' section. The 'Optional' section is highlighted with a red box and contains the following text: 'Population Adjustment – When an adjustment of the approved IHS User Population is Recommended, please select the service area to be adjusted. Population projections will continue to use the HSP service population projection methodology. All projections will be based on the adjusted baseline year. Planners should recognize all services and staff supporting the service area disciplines will be modified according to the population adjustment.' To the right of this text is a checkbox labeled 'Population Adjustment is approved by H/Q' which is checked, and a dropdown menu.

6. Resource Requirements Methodology (RRM) Update
 - Incorporated the latest RRM into the HSP. (RRM2007_04222011)

7. Equipment Update
 - Updated new Equipment and Room data information that was added during the 2007 & 2009 HSP updates.
 - Updated Equipment Lists, Notes to the Planner, Design Notes, and Drawings to reflect changes.
8. New Program Justification Document (PJD) Report
 - Incorporated the new PJD template into the HSP.
 - The PJD will be included as part of HSP file but will not be filled in by HSP any longer. The planner will manually fill in the necessary information per the instructions provided.
9. New Program of Requirements (POR) Organization
 - Incorporated a newer POR template into the HSP.
10. Additional Services Net to Gross Conversion Factor Selection
 - Added a new feature in which users must pick how the additional service is going to be used and then the space will be assigned a grossing factor based on how the space will be used.
 - Previous system gave all additional services a 1.35 grossing factor.



Net to Gross Factor

NET TO DEPARTMENT GROSS SQUARE FOOTAGE QUESTIONS

(Please select/reselect a radio button from one of the options below)

- Is this additional service, a standalone room with its own dedicated access from the building's circulation? (If your intent is to have this department designed within another department, please add this space to that department.)
- Is this additional service to be designed as a series of large open collocated spaces with minimal circulation space similar to lab, pharmacy, and property and supply?
- Will this department be designed as an administrative office suite?
- Will this department be designed as an outpatient clinic?
- Will this department be designed to allow two way patient gurney traffic (8' corridor)? (i.e. surgery, emergency, and acute care nursing)

11. New Capabilities- Notes to the Planner Template Revisions
 - Modified/Updated Template Disciplines to Out-of-Templates for Audiology, Optometry, Housekeeping, Education & Group Consultation, Public Facilities, Information Technology, Business Office and Contract Health Services.
 - These discipline changes are not in the new version of the HSP, however the Planner can review the new "Notes to the Planner" and manually make adjustments to the HSP to reflect the approved new criteria.

12. Metric to Imperial Conversion Option

- New feature allows the planner to select space sizes in Metric or Imperial.

Project Management - New Project

Project Setup | Service Area Selection | Additional Services | Suggested Staffing | Nearby Facilities | Points of Contact | PJD / POR

Name: _____ Purpose: _____ Password: _____

IHS Proj#: _____ Facility Type*: _____ Projection Year*: _____ Funding Type*: _____

Area*: _____ Code*: _____ Service Unit*: _____ Code*: _____

Community: _____ State: _____ Initiation: 02/14/2014

Existing Facility Name: _____

REMOTE FACILITY..... Are winter supplies only available by air service? Yes No

PROPERTY AND SUPPLY..... Is this a satellite clinic within your service unit? Yes No

MULTI-LEVEL FACILITY..... Will this be a multi-level building? Yes No

Service Pop. 2010 User Pop. 2012 Most Recent Update 02/14/2014 PJD / / POR / /

Measure System Metric Imperial * Required Data

Save Cancel Reports... eXit Project

13. Functional Area drop down list added to Rooms in the Discipline

- New feature that allows the planner to group rooms according to functional area. A functional area has been assigned to the standard rooms within a discipline however if you add a new room or what to change the functional area you can do that when you select you want to manually change the space.

Primary Care (Space Program) - [Kayenta]

IPC20 20-provider PC Clinic Hide "Deleted" rooms (qty = 0)

Functional Area	RFN Code	Suggested Spaces	Qty	Size	Total
Public	CFET2	EDUCATION CONFERENCE	3	22.00	66.00
Public	OFOC2	PATIENT REGISTRATION	10	4.00	40.00
Public	OFOC2	PHONE TRIAGE	3	4.00	12.00
Public	OFOC2	RECEPTION SUPERVISOR	2	4.00	8.00
Public	ALCP1	RECEPTION/COPY/FAX/PRINTER	3	4.00	12.00
Public	TRCL1	TRIAGE	5	10.00	50.00
Public	WTGN1	WAITING	20	15.00	300.00

Net SM: 1,837.00
Conv. Factor: 1.45
Gross SM: 2,664.00

Press <Enter> in the RFN Code column to change the RFN

Functional Area	RFN Code	Planned Spaces (Click here to add) +	Qty	Size	Total	Comments
Public	ALCP1	RECEPTION/COPY/FAX/PRINTER	3	4.00	12.00	
Public	CFET2	EDUCATION CONFERENCE	3	22.00	66.00	
Public	OFOC2	PATIENT REGISTRATION	10	4.00	40.00	
Public	OFOC2	PHONE TRIAGE	3	4.00	12.00	
Public	OFOC2	RECEPTION SUPERVISOR	2	4.00	8.00	

Room Details... Add Space +

Total Spaces: 245 Net SM: 1,837.00
Conv. Factor: 1.45
Gross SM: 2,664.00

I want to manually specify 'Planned' space:

Justification Exit

What's NEW in HSP2014b

1. A Dental Study was conducted for revamping the Dental Program. Implementation will occur in HSP2016.
2. Audiology moved from a Template discipline to an Out-of-Template. The use rate has been revised as well as the space program. The RRM has not been adjusted to coincide with the new criteria established for Audiology. Room drawings and equipment lists have been updated.
3. Eye Care moved from a Template discipline to an Out-of-Template. The use rate has been revised as well as the space program. The RRM has not been adjusted to coincide with the new criteria established for Eye Care. Room drawings and equipment lists have been updated.
4. Education & Group Consultation moved from a Template discipline to an Out-of-Template. This discipline's space program is dependent on staffing. The space program has been updated. You can no longer override your total staff from the workload tab. You either increase your staff at the individual discipline level or manually change your space to increase your Education & Group Consultation space. Room drawings and equipment lists have been updated.
5. Purchased Referred Care formally CHS has now been added to the HSP. Prior to HSP2014b, PRC (CHS) was part of the Business Office. It now has its own tab in the HSP with its own Space program, Design Notes, and Function Sketch.

Discipline Information																													
SACF			Ambulatory			Preventive			Inpatient			Ancillary			Behavioral Health			Administration			Facility Support			Addl. Services			Support Services		
Administration			Information Management			Business Office			PRC (CHS)			Health Information Management			Security														
RRM Staff Position	HSP Staff Position	Drives Space	Existing (total)	Existing (recurring)	RRM	Planned	Daytime	Staff Comment																					
PRC Staff	Clerk, PRC	<input checked="" type="checkbox"/>	0.0	0.0	7.86	8.00	0																						
Utilization Review Clerk	Utilization Review Clerk	<input checked="" type="checkbox"/>	0.0	0.0	0.00	0.00	0	No longer in RRM																					
PRC Manager	Supervisor, PRC	<input checked="" type="checkbox"/>	0.0	0.0	1.00	1.00	0																						
RCIS Data Entry Clerk	RCIS Data Entry Clerk	<input checked="" type="checkbox"/>	0.0	0.0	1.00	1.00	0																						
Totals :			0.0	0.0	9.86	10.00	0	Discipline Comments																					

I want to manually specify 'Planned' staffing
Staffing positions that do not drive space will require manual space planning.

Space Program... Design Notes... Function Sketch

Capacity Analysis... Reports... eXit Discipline Info