**Department of Veterans Affairs**      **VHA HANDBOOK 1850.05**
**Veterans Health Administration**      **Transmittal Sheet**
**Washington, DC  20420**         **July 1, 2011**

## INTERIOR DESIGN OPERATIONS AND SIGNAGE

**1.  PURPOSE:**  This Veterans Health Administration (VHA) Handbook provides the procedures and requirements for establishing and maintaining an Interior Design (ID) program.

**2.  SUMMARY OF MAJOR CHANGES:**  The stated requirements of M-1, Part VII, Chapter 11, Interior Design Operations and M-1, Part VII, Chapter 13, Signage and Directional Graphic Operations are being rescinded.  This Handbook documents the revision of Interior Design Operations, which now includes Signage and wayfinding guidance.

**3.  RELATED ISSUES:**  VHA Directive 1850 (to be published).

**4.  FOLLOW-UP RESPONSIBILITY:**  The Director, Environmental Programs Service, is responsible for the content of this Handbook.  Questions concerning this Handbook may be directed to the Director, Environmental Programs Service (10NP) at (202) 266-4603.

**5.  RESCISSIONS:**  M-1, Part VII, Chapter 11, Interior Design Operations, dated May 24, 1982, is rescinded.  M-1, Part VII, Chapter 13, Signage and Directional Graphic Operations, dated May 24, 1982, is rescinded.

**6. RECERTIFICATION:**  This VHA Handbook is scheduled for re-certification on or before the last working day of July 2016.

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**INTERIOR DESIGN OPERATIONS AND SIGNAGE**

**1. PURPOSE**

   This Veterans Health Administration (VHA) Handbook provides procedures for interior design (ID) operations, including the specification of architectural interior finishes and furnishings.

**2. BACKGROUND**

   a. In 1982, requirements for specifying interior architectural finishes and furnishings were annotated in M-1, Part VII, Chapter 11.

   b. Since 1982, significant changes in state-of-the-art finishes, furnishings, and concepts have occurred. While the Master Specification Guide, Section 09 06 00 – Schedule for Finishes has been updated several times since 1982, the latest in October 2007, M-1, Part VII, Chapter 11 has not been updated. This revision provides a more comprehensive coordination between the two documents, which results in a more cohesive specification process for local facilities.

   c. According to the National Council for Interior Design Qualifications (NCIDQ), Interior design is a multi-faceted profession in which creative and technical solutions are applied within a structure to achieve a built interior environment. These solutions are functional, enhance the quality of life and culture of the occupants, and are aesthetically attractive. Designs are created in response to and coordinated with the building shell, and acknowledge the physical location and social context of the project. Designs must adhere to code and regulatory requirements, and encourage the principles of environmental sustainability. The ID process follows a systematic and coordinated methodology, including research, analysis, and integration of knowledge into the creative process, whereby the needs and resources of the client are satisfied to produce an interior space that fulfills the project goals.

**3. SCOPE**

   This Handbook contains the aspects of a comprehensive Interior ID Program, which includes but is not limited to: planning and standardization; programming; project development; budget; customer service; and training/affiliations.

**4. RESPONSIBILITY OF ENVIRONMENTAL PROGRAMS SERVICE**

   Environmental Programs Service (EPS) (10NP) provides guidance and support to all VHA facilities in all areas of interior design planning, standardization, programming, project development, signage and wayfinding, and forming strategies to improve the patient care environment.

**5. RESPONSIBILITY OF THE VA MEDICAL FACILITY DIRECTOR**

   The VA medical facility Director or designee is responsible for:

a.  An ID Program that ensures an environment that is professional and therapeutic and reflects positively on the quality and level of service a patient can expect to receive at a Department of Veterans Affairs (VA) health care facility.

b.  Ensuring design solutions are based on their value in achieving a safe and supportive environment to maximize the wellness of patients and effectiveness of staff.

c.  Ensuring the Interior Design Officer (IDO) has the necessary training and knowledge to develop and maintain an effective ID program.  *NOTE:  It is a local decision as to where the interior design program is aligned.*

d.  Ensuring the ID program has the necessary resources to function efficiently and effectively.

## 6.  RESPONSIBILITY OF THE INTERIOR DESIGN OFFICER (IDO)

The Interior Design Officer (IDO) is responsible for:

a.  Implementing and managing the facility's interior design program.  Key elements of the program include:

(1)  Components of ID Planning and Standardization (see par. 7),

(2)  Components of ID Programming (see par. 8),

(3)  Components of ID Project Development and Management (see par. 9),

(4) Components of ID Signage and Wayfinding (see par. 10),

(5)  Components of ID Budgeting (see par. 11), and

(6)  Components of ID Customer Service (see par. 12).

b.  Developing policy for identifying and addressing local needs and processes for implementation.

c.  Providing supervision and guidance to employees practicing ID functions, regardless of whether they are staff or contract personnel.

d.  Ensuring Interior Designers are professional design practitioners, qualified by means of education and experience.

e.  Ensuring that Interior Designers are current regarding industry developments, improved technologies, and products.  *NOTE:  Staff knowledge of ID is continually being updated and broadened through self development.  This may be accomplished through varying education opportunities such as seminars, correspondence courses, college courses, etc.  Annual professional training needs to be encouraged at conferences and tradeshows.*

**7.  COMPONENTS OF ID PLANNING AND STANDARDIZATION**

The components of ID Planning and Standardization are:

a.  Developing a master interior design plan that includes finish schedules identifying the types of materials, finishes and colors used throughout the facility.  This plan ensures a cohesive and identifiable image is portrayed throughout the facility.  Needs assessment are conducted periodically to ensure inclusion in interior design plan.  Development of this plan must be based on information in the Technical Information Library (TIL)found at:  http://www.cfm.va.gov/til/.

b.  Developing building standards for the facility must include:  furnishings, floor covering, upholstery, wall treatment, window covering, wall protection, lighting, privacy curtains, and casework.  Building standards must not limit the program design creativity.  Standardized styles can be specified in different colors with different accessories.

c.  Planning and developing projects allowing variable funding timelines.

**8.  COMPONENTS OF ID PROGRAMMING**

The components of ID Programming are:

a.  Conducting a needs assessment which includes: research; examination and analysis of existing floor plans and conditions for an appropriate selection of finishes and furnishings; and end users goals and requirements.

b.  Developing documents, drawings, and diagrams that outline program needs.

c.  Gathering data relating to equipment, furniture, and utility locations within the project and uses the TIL as a design resource.

d.  Conducting space planning that reflect work flow and related-department adjacencies.

e.  Preparing scaled, detailed drawings showing furniture and equipment locations.

f.  Identifying and resolving ergonomic issues.

g.  Identifying planning processes to be improved.

h.  Formulating preliminary space plans with two and three dimensional design concept studies and sketches that integrate the client's program needs.

i.  Ensuring preliminary space plans and design concepts are safe, functional, aesthetically appropriate, and meet all public health, safety, and welfare requirements, including code, accessibility, environmental, sustainability, and infection control guidelines.

### 9.  COMPONENTS OF ID PROJECT DEVELOPMENT AND MANAGEMENT

The components of ID Project Development and Management are:

a.  Ensuring materials and finishes such as wall surfaces, flooring and upholstery are specified, meet safety codes, and are consistent with facility standards.

b.  Ensuring other considerations include life cycle costing, infection control concerns, maintenance, Leadership in Energy and Environmental Design (LEED) or "green" product options, as well as creating a unified professional, therapeutic image.

c.  Ensuring selections are consistent with current state-of-the-art health care design.

d.  Selecting lighting fixtures or acting as an advisor regarding lighting selections; considering function (ambient, accent or task light), patient and visitor populations, building standards, and life cycle costing.

e.  Ensuring artwork and framing methods are selected based on patient population, geographical location, and function of space.  Displaying of official documents and photographs must be in accordance with VHA policy.

f.  Planning and implementing furnishing replacements, and determining needs for new projects that require a furnishings component.  Consideration needs to be given to the appropriateness of furniture ensuring that cleaning, maintainability, and functional needs are taken into consideration.

g.  Developing and monitoring administrative paperwork.

h.  Coordinating project elements, such as furniture moves, with departments within the medical facility, vendor deliveries, and installations in conjunction with contractor's schedules, Office of Information Technology (OI&T) services, and cleaning.

### 10.  COMPONENTS OF ID SIGNAGE AND WAYFINDING

The components of ID Signage and Wayfinding are:

a.  Developing a signage program that addresses the complete signage and directional graphics needs of the facility, and is coordinated by building or area.  The program must include the type, design and color of interior and exterior signage and directional graphics in compliance with the VA signage guide.  Replacement signage projects must be flexible enough to permit reassignment or refurbishment of all or any part of an area.

b.  Implementing, maintaining and overseeing a comprehensive signage and wayfinding program.

c.  Using behavioral information and research findings to incorporate signage and other queuing systems such as texture, color, lighting and artwork into the wayfinding program; and utilizing the VA Signage Design Guide as a resource for signage decisions.  ***NOTE:***  *VA Signage Manual can be found on the EPS Web site [http://vaww.vhaco.va.gov/EPS/](http://vaww.vhaco.va.gov/EPS/) (This is an internal VA Web site, not available to the public.) or Office of Construction & Facilities Management Web site [http://www.cfm.va.gov/til/signs/signage01.pdf](http://www.cfm.va.gov/til/signs/signage01.pdf).  (This is an internal VA Website, not available to the public.)*

**11.  COMPONENTS OF THE ID BUDGET**

The components of the ID Budgeting are:

a.  Developing budgets and working within budget constraints for all projects having an interior design component.

b.  Understanding and implementing varying types of purchase orders including VA Form 2237, Request, Turn-in and Receipt for Property or Services, purchase card orders etc.

c.  Utilizing and understanding procurement regulations and the hierarchy of procurement sources.

**12.  COMPONENTS OF ID CUSTOMER SERVICE**

The components of ID Customer Service are:

a.  Building and developing trust with all levels and types of people and creating interior design solutions that enhance the public perception of the VA Environment of Care.

b.  Utilizing customer feedback effectively and incorporating concerns and issues in solution development.

c.  Effectively managing concerns and complaints by helping to resolve conflicts in areas of interior design decisions by addressing concerns from varying departmental viewpoints.