

COMPLIANCE CHECKLIST**IP29: Public & Administrative Areas**

The following checklist is intended to be used in the plan review applications for health care facilities submitted to the Massachusetts Department of Public Health. This checklist summarizes and references the applicable requirements from the Licensure Regulations and the 2014 Edition of the FGI Guidelines for Design and Construction of Hospitals and Outpatient Facilities. Applicants must verify compliance of the plans submitted to the Department with all referenced requirements from the Licensure Regulations and FGI Guidelines when completing this Checklist. A separate Checklist must be completed for each nursing unit, hospital or clinic department, or clinical suite.

Other jurisdictions, regulations and codes may have additional requirements which are not included in this checklist, such as:

- NFPA 101 Life Safety Code (2000) and applicable related standards contained in the appendices of the Code
- State Building Code (780 CMR)
- Joint Commission on the Accreditation of Health Care Organizations
- CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities
- USP 797
- Accessibility Guidelines of the Americans with Disabilities Act (ADA)
- Architectural Access Board Regulations (521 CMR)
- Local Authorities having jurisdiction.

Instructions:

1. All requirement lines must be completed according to the following instructions and included in the plan submissions for Self-Certification Process or Part II of the Abbreviated Review Process.
2. This checklist must be completed by the project architect or engineer based on the design actually reflected in the plans at the time of completion of the checklist.
3. Each requirement line (___) of this Checklist must be completed exclusively with one of the following symbols, unless otherwise directed in the checklist. If a functional space is not affected by a renovation project, the symbol "E" may be indicated on the requirement line (___) before the name of the functional space (associated requirements on indented lines below that name, or associated MEP requirements do not have to be completed in this case). If more than one functional space serves a given required function (e.g. patient room or exam room), that clarification should be provided in the Project Narrative, and the requirement lines are understood to only address the functional spaces that are involved in the project.

X = Requirement is met, for new space, for renovated space, or for existing direct support space for an expanded service.

= Check box under section titles or individual requirements lines for optional services or functions that are not included in the project area.

E = Requirement relative to an existing suite or area that has been *licensed* for its designated function, is *not affected* by the construction project and *does not pertain to a required direct support space* for the specific service affected by the project.

W = Waiver requested for specific section of the Regulations or FGI Guidelines, where hardship in meeting requirement can be demonstrated (a Physical Plant Waiver Form must be completed for each waiver request).

4. All room functions marked with "X" must be shown on the plans with the same name labels as in this checklist.
5. Mechanical, electrical & plumbing requirements are only partially mentioned in this checklist. The relevant section of the FGI Guidelines must be used for project compliance with all MEP requirements and for waiver references.
6. Oxygen, vacuum, medical air, and waste anesthesia gas disposal outlets (if required) are identified respectively by the abbreviations "OX", "VAC", "MA", & "WAGD".
7. Requirements referenced with "FI" result from formal interpretations from the FGI Interpretations Task Group.
8. The location requirements including asterisks (*) refer to the definitions of the Glossary in the beginning section of the FGI Guidelines.

Facility Name:

DoN Project Number: (if applicable)

Facility Address:

Nursing Unit Bed Complements:

Current = Proposed =

Satellite Name: (if applicable)

Building/Floor Location:

Satellite Address: (if applicable)

Submission Dates:

Initial Date:

Revision Date:

Project Description:

Architectural Requirements

Building Systems Requirements

2.1-6 **PUBLIC & ADMINISTRATIVE AREAS**

- 2.1-6.1.2 Location:
 - public areas clearly identified & located to accommodate persons with disabilities

2.1-6.2 **PUBLIC AREAS**

- 2.1-6.2.1 Vehicular drop-off & pedestrian entrance
 - min. one drop-off or entrance reachable from grade level
- 2.1-6.2.2 Reception area or lobby
 - 2.1-6.2.2.1 (1) access to information
 - (4) access to make local phone calls
 - (5) provisions for drinking water

- 2.1-6.2.3 Public waiting room or area
- Toilet room readily accessible to public
 - check if not included in project (only if waiting area serves 15 people or less)

- Ventilation:
- Min. 10 air changes per hour Table 7.1
 - Exhaust

2.1-6.3 **ADMINISTRATIVE AREAS**

- 2.1-6.3.1 Admissions area
 - check if not included in project
- 2.1-6.3.1.1 separate waiting area for patients & accompanying persons
- 2.1-6.3.1.2 work counter or desk for staff
- 2.1-6.3.2 Interview space (may be shared office or consultation room)
 - check if not included in project
 - separate from public & patient areas
- 2.1-6.3.3 General or individual office for business transactions
 - check if not included in project
- 2.1-6.3.4 Multipurpose room (may be shared by several services or departments)
- 2.1-6.3.5 Medical records area
 - provisions made for securing medical records of all media types used by facility
- 2.1-6.3.5.1 medical records area either restricted to staff movement or located so it is remote from treatment & public areas

2.1-6.4 **SUPPORT AREAS FOR STAFF & VOLUNTEERS**

- 2.1-6.4.1 Lockers, lounges & toilets for employees & volunteers
- 2.1-6.4.2 staff separate from those for the public

Architectural Details & MEP Requirements**2.1-7.2.2 ARCHITECTURAL DETAILS****2.1-7.2.2.1 CORRIDOR WIDTH:**

- ___ Aisles, corridors & ramps in adjunct areas not intended for the housing, treatment, or use of inpatients not less than 44" in clear width

2.1-7.2.2.2 CEILING HEIGHT:

- ___ Min. ceiling height 7'-10"

2.1-7.2.2.3 DOORS & DOOR HARDWARE:

(1)

- (a) ___ Doors between corridors, rooms, or spaces subject to occupancy swing type or sliding doors
- (b) ___ Sliding doors
 - check if not included in project
 - ___ manual or automatic sliding doors comply with NFPA 101
 - ___ code review sheet attached
 - ___ no floor tracks

(3)

- ___ Min. clear width 34.5"
- ___ Doors do not swing into corridors (except doors to non-occupiable spaces & doors with emergency breakaway hardware)

(4)

- (b) ___ Lever hardware

2.1-7.2.2.7 GLAZING MATERIALS:

(4)

- ___ Glazing within 18" of floor
 - check if not included in project
- ___ safety glass, wire glass or plastic break-resistant material

2.1-7.2.2.8 HANDWASHING STATIONS:

(3)

- ___ anchoring suitable for vertical or horizontal force of 250 lbs

(4)

- Handwashing Station Countertops:
 - check if not included in project

(a)

- ___ porcelain, stainless steel or solid surface materials

(b)

- ___ plastic laminate countertops
 - check if not included in project
 - ___ substrate marine-grade plywood (or equivalent) with impervious seal

(5)

- ___ Designed to prevent storage beneath sink

(6)

- ___ Provisions for drying hands

(a)

- ___ hand-drying device does not require hands to contact dispenser

(d)

- ___ directly accessible* to sinks

(7)

- ___ Liquid or foam soap dispensers

2.1-7.2.2.9

(2)

GRAB BARS:

- ___ Grab bars anchored to sustain concentrated load of 250 lbs

2.1-7.2.3**SURFACES****2.1-7.2.3.1**

(1)

FLOORING & WALL BASES:

- ___ Selected flooring surfaces cleanable & wear-resistant for location

(2)

- ___ Smooth transitions between different flooring materials

(3)

- ___ Flooring surfaces, including those on stairways, stable, firm & slip-resistant

(b)

- ___ Carpet
 - check if not included in project
 - ___ provides stable & firm surface

2.1-7.2.3.2

(1)

WALLS & WALL PROTECTION:

- ___ Washable wall finishes

(a)

- ___ Wall finishes near plumbing fixtures smooth, scrubbable & water-resistant

(b)

2.1-8.2**HEATING, VENTILATION, & AIR-CONDITIONING (HVAC) SYSTEMS****4/6.3.1****Outdoor Air Intakes:****4/6.3.1.1**

- ___ Located min. 25 feet from cooling towers & all exhaust & vent discharges
- ___ Bottom of air intake is at least 6'-0" above grade

Roof Mounted Air Intakes:

- check if not included in project
- ___ bottom min. 3'-0" above roof level

4/6.7.3**Smoke & Fire barriers:**

- ___ HVAC zones coordinated with compartmentation to minimize ductwork penetrations of fire & smoke barriers

(5)

Acoustic Considerations:

- ___ Equipment location or acoustic provisions limit noise associated with outdoor mechanical equipment to 65 dBA at building façade

2.1-8.2.1.2

(1)

Ventilation & Space-Conditioning:

- ___ All rooms & areas used for patient care have provisions for ventilation

(2)

- ___ Natural ventilation only allowed for non sensitive areas & patient rooms via operable windows

- ___ Mechanical ventilation provided for all rooms & areas in facility in accordance with Table 7.1 of Part 4

- 2.1-8.3 **ELECTRICAL SYSTEMS**
- 2.1-8.3.3.1 **EMERGENCY ELECTRICAL SERVICE**
- (1) Emergency power per NFPA 99, NFPA 101 & NFPA 110
- 2.1-8.3.5 **ELECTRICAL EQUIPMENT**
- 2.1-8.3.5.2 Required handwashing station tied to building electrical service
 - check if not included in project
 - connected to essential electrical system
- 2.1-8.3.5.3 Electronic health record system servers & centralized storage equipment provided with uninterruptible power supply

- 2.1-8.4.2 **PLUMBING & OTHER PIPING SYSTEMS**
- 2.1-8.4.3 **PLUMBING FIXTURES**
- 2.1-8.4.3.1 (1) Materials material used for plumbing fixtures non-absorptive & acid resistant
- 2.1-8.4.3.2 Handwashing Station Sinks:
 - (2) basin min. 144 square inches
 - min. dimension 9 inches
 - (3) made of porcelain, stainless steel, or solid-surface materials
 - (5) water discharge point of faucets at least 10 inches above bottom of basin
 - (7) anchoring for sinks withstands min. vertical or horizontal force of 250 lbs
 - (8) fittings operated without using hands for sinks used by patients & public
 - (a) blade handles or single lever
 - min. 4 inches long
 - provide clearance required for operation
 - or**
 - (b) sensor-regulated water fixtures
 - meet user need for temperature & length of time water flows
 - designed to function at all times & during loss of normal power