COMPLIANCE CHECKLIST

IP13_Observation Unit

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 2018 Edition of the FGI Guidelines for Design and Construction of Hospitals. 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 (2012) and applicable related standards contained in the appendices of the Code
- State Building Code (780 CMR)
- Accreditation requirements of The Joint Commission
- CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities
- USP 797 & Regulations of the Massachusetts Board of Registration in Pharmacy
- Occupational Safety & Health Standards (OSHA)
- 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 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 marks, unless otherwise directed in the checklist. If a functional space is not affected by a renovation project, the mark "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.

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. "E" must not be used for an existing required support space associated with a new patient care room or area.

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

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). An explicit floor plan or plan detail must be attached to 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, waste anesthesia gas disposal and instrument air outlets (if required) are identified respectively by the abbreviations "OX", "VAC", "MA", "WAGD" & "IA".
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 and reproduced in this checklist.

Facility Name: .....

DoN Project Number: (if applicable) .....

Facility Address: .....

Satellite Name: (if applicable) .....

Building/Floor Location: .....

Satellite Address: (if applicable) .....

Submission Dates:

Initial Date:

Revision Date:

Project Description: .....

	Architectural Requirements	Building Systems Requirements	
2.2-3.2	**OBSERVATION UNIT**		
2.2-3.2.1.1	Application: ___ unit provided for outpatients requiring observation (e.g. clinical decision unit or chest pain center)		
2.2-3.2.1.2	Location: ___ located in emergency department or elsewhere in hospital		
2.2-3.2.2	**PATIENT CARE STATIONS** ___ Single-patient treatment rooms ☐ check if not included in project		
2.1-3.2.2.1 (1)	Space Requirements: New Construction: ___ min. clear floor area 120 sf ___ min. clear dimension 10'-0" **or** Renovation: ___ min. clear floor area 100 sf	Ventilation: ___ Min. 6 air changes per hour Lighting: ___ Portable or fixed exam light Power: ___ Min. 8 receptacles in total ___ Min. 4 receptacles convenient to head of gurney or bed Nurse Call System: ___ Staff assistance station ___ Emergency call station Medical Gases: ___ 1 OX, 1 VAC	Table 7.1 2.1-8.3.4.3(3) Table 2.1-1 Table 2.1-2 Table 2.1-3
2.2-3.2.2.2(2) (b)	___ min. clearance 3'-0" between walls or partitions & sides of beds		
2.1-3.2.3.2(2)	___ accommodations for written or electronic documentation		
2.1-3.2.3.2(3)	___ space for visitor's chair		
2.1-3.2.3.4	___ supply storage		
2.2-3.2.2.5	___ handwashing station		
2.1-2.8.7.1	___ located in each room where hands-on patient care is provided		
2.2-3.1.3.6(3)	___ Multiple-patient treatment rooms ☐ check if not included in project		
2.1-3.2.3.1 (1)	Space Requirements: ___ separate patient bays or cubicles with min. clear floor area 80 sf per patient care station	Ventilation: ___ Min. 6 air changes per hour Lighting: ___ Portable or fixed exam light	Table 7.1 2.1-8.3.4.3(3)
(2)(a) + Errata	___ min. 5'-0" between sides of adjacent* patient beds	Power: ___ Min. 8 receptacles in total	Table 2.1-1
(2)(b) + Errata	___ min. 4'-0" between sides of patient beds & adjacent* walls or partitions	___ Min. 4 receptacles convenient to head of gurney or bed Nurse Call System: ___ Staff assistance station ___ Emergency call station Medical Gases: ___ 1 OX, 1 VAC per station	 Table 2.1-2 Table 2.1-3
2.1-3.2.3.2(2)	___ accommodations for written or electronic documentation		

	Architectural Requirements	Building Systems Requirements	
2.1-3.2.3.2(3)	___ space for visitor's chair		
2.1-3.2.3.4	___ supply storage		
2.2-3.2.2.3	Patient Privacy:		
2.1-2.1.2	___ provisions are made to address patient visual & speech privacy		
2.2-3.2.2.5	___ Handwashing station		
2.1-2.8.7.1	___ located in each room where hands-on patient care is provided		
2.1-2.8.7.3	___ handwashing station serves multiple patient care stations		
	☐ check if <u>not</u> included in project		
(1)	___ at least 1 handwashing station for every 4 patient care stations or fewer & for each major fraction thereof		
(2)	___ handwashing stations evenly distributed		
2.2-3.2.2.6	___ Patient toilet room	Ventilation:	
	___ at least one toilet room for each six patient care stations & for each major fraction thereof	___ Min. 10 air changes per hour	Table 7.1
	___ handwashing station	___ Exhaust	
		___ Negative pressure	
		___ No recirculating room units	
2.2-3.2.2.7	___ Shower room (may be combined with toilet room)	Ventilation:	
	___ one shower room for each 12 treatment cubicles or major fraction thereof	___ Min. 10 air changes per hour	Table 7.1
		___ Exhaust	
		___ Negative pressure	
		___ No recirculating room units	
2.2-3.2.8	**SUPPORT AREAS FOR OBSERVATION UNIT**		
2.2-3.2.8.1			
(1)	___ Nurse station		
	___ positioned to allow staff to observe each patient care station or room		
(2)	___ Nourishment area or room (may be shared with another unit)		
2.1-2.8.9.2		Ventilation:	
(1)	___ handwashing station	___ Min. 2 air changes per hour	Table 7.1
(2)	___ work counter		
(3)	___ refrigerator		
(4)	___ microwave		
(5)	___ storage cabinets		
(6)	___ space for temporary storage of food service implements	Nurse Call System:	
		___ Duty station (light/sound signal)	2.1-8.5.1.2(3)(b)
2.1-2.8.9.3	___ provisions & space are included for separate temporary storage of unused & soiled meal trays		
2.2-3.2.8.1(3)	___ Equipment & supply storage		
(a)	___ storage space for gurneys supplies & equipment be provided		

	Architectural Requirements	Building Systems Requirements	
(b) 2.1-2.8.13.4	____ Emergency equipment storage		
(1)	____ each patient care unit has at least one emergency equipment storage location		
(2)	____ provided under visual observation of staff		
(3)	____ storage locations in corridors do not encroach on minimum required corridor width		
2.2-3.2.8.2	**OTHER OBSERVATION UNIT SUPPORT AREAS** (may be shared with adjacent* clinical unit)		
2.2-3.2.8.2(1)	____ Nurse or supervisor work space		
2.2-3.2.8.2(2) 2.1-2.8.8.1(2)	____ Medication safety zones Design Promoting Safe Medication Use:		
(a)	____ medication safety zones located out of circulation paths		
(b)	____ work space designed so that staff can access information & perform required tasks	Lighting: ____ Task-specific lighting level min. 100 foot-candles	2.1-2.8.8.1(2)(d)
(c)	____ work counters provide space to perform required tasks		
(e)	____ sharps containers placed at height that allows users to see top of container		
(f)	____ max. 45 dBA noise level caused by building systems		
2.1-2.8.8.2(1)	____ medication preparation room		
(a)	____ under visual control of nursing staff	Ventilation:	
(b)	____ work counter	____ Min. 4 air changes per hour	Table 7.1
	____ handwashing station	Lighting:	
	____ lockable refrigerator	____ Task lighting	2.1-2.8.8.1(2)(d)
	____ locked storage for controlled drugs		
	____ sharps containers ☐ check if <u>not</u> included in project	Nurse Call System: ____ Duty station (light/sound signal)	2.1-8.5.1.2(3)(b)
(c)	____ self-contained medication-dispensing unit ☐ check if <u>not</u> included in project ____ room designed with space to prepare medications		
	or		
2.1-2.8.8.2(2)	____ automated medication-dispensing unit		
(a)	____ located at nurse station, in clean workroom or in alcove	Lighting: ____ Task lighting	2.1-2.8.8.1(2)(d)
(c)	____ handwashing station located next to stationary medication dispensing units or stations	Nurse Call System: ____ Duty station (light/sound signal)	2.1-8.5.1.2(3)(b)

	Architectural Requirements	Building Systems Requirements	
2.2-3.2.8.2(3)	____ Clean workroom or clean supply room		
2.1-2.8.11.2	____ clean workroom	Ventilation:	
	____ used for preparing patient care items	____ Min. 4 air changes per hour	Table 7.1
(1)	____ work counter	____ Positive pressure	
(2)	____ handwashing station		
(3)	____ storage facilities for clean & sterile supplies	Nurse Call System:	
		____ Duty station (light/sound signal)	Table 2.1-2
	or		
2.1-2.8.11.3	____ clean supply room	Ventilation:	
	____ used only for storage & holding as part of system for distribution of clean & sterile supplies	____ Min. 4 air changes per hour ____ Positive pressure	Table 7.1
2.2-3.2.8.2(4)	____ Soiled workroom or soiled holding room		
2.1-2.8.12.2	____ soiled workroom	Ventilation:	
		____ Min. 10 air changes per hour	Table 7.1
(1)(a)	____ handwashing station	____ Exhaust	
(1)(b)	____ flushing-rim clinical service sink with bedpan-rinsing device or equivalent flushing-rim fixture	____ Negative pressure ____ No recirculating room units	
(1)(c)	____ work counter		
(1)(d)	____ space for separate covered containers for waste & soiled linen	Nurse Call System:	
		____ Duty station (light/sound signal)	Table 2.1-2
(2)	____ fluid management system is used		
	☐ check if <u>not</u> included in project		
(a)	____ electrical & plumbing connections that meet manufacturer requirements		
(b)	____ space for docking station		
	or		
2.1-2.8.12.3	____ soiled holding room	Ventilation:	
		____ Min. 10 air changes per hour	Table 7.1
(1)	____ handwashing station or hand sanitation station	____ Exhaust ____ Negative pressure	
(2)	____ space for separate covered containers for waste & soiled linen	____ No recirculating room units	
2.2-3.2.8.2(5)	____ Environmental services room	Ventilation:	
		____ Min. 10 air changes per hour	Table 7.1
2.1-2.8.14.1	____ readily accessible* to unit or floor it serves (permitted to serve more than one patient care unit on floor)	____ Exhaust ____ Negative pressure ____ No recirculating room units	
2.1-2.8.14.2			
(1)	____ service sink or floor-mounted mop sink		
(2)	____ provisions for storage of supplies & housekeeping equipment		
(3)	____ handwashing station		
	or		
	____ hand sanitation station		

	Architectural Requirements	Building Systems Requirements	
2.2-3.2.8.2(6)	____ Examination room ☐ check if <u>not</u> included in project (only if all patient care stations are single-patient rooms)		
2.1-3.2.2.1	Space Requirements:	Ventilation:	
(1)	____ min. clear floor area 120 sf	____ Min. 6 air changes per hour	Table 7.1
	____ min. clear dimension 10'-0"	Lighting:	
(2)(a)	____ room size permits room arrangement with min. clearance 3'-0" at each side & at foot of exam table	____ Portable or fixed exam light	2.1-8.3.4.3(3)
		Power:	
		____ Min. 8 receptacles in total	Table 2.1-1
		____ Min. 4 receptacles convenient to head of gurney or bed	
		Nurse Call System:	
		____ Staff assistance station	Table 2.1-2
		____ Emergency call station	
2.1-3.2.2.2			
(2)	____ storage for supplies		
(3)	____ accommodations for written or electronic documentation		
(4)	____ space for visitor's chair		
(5)	____ handwashing station		
2.1-2.1.2	Patient Privacy: ____ Provisions are made to address patient visual & speech privacy		
2.2-3.2.8.2(7)	____ Picture archiving & communications system (PACS) and/or X-ray illuminators ____ immediately accessible* to observation unit		
2.2-3.2.9	**STAFF SUPPORT AREAS FOR OBSERVATION UNIT**		
2.2-3.2.9.2	____ Staff toilet room (permitted to be unisex)		
	____ min. of one staff toilet room located in observation unit	Ventilation:	
		____ Min. 10 air changes per hour	Table 7.1
2.1-2.9.2.2	____ toilet & handwashing station	____ Exhaust	
		____ Negative pressure	
		____ No recirculating room units	

*LOCATION TERMINOLOGY:

<u>Directly accessible</u>: Connected to the identified area or room through a doorway, pass-through, or other opening without going through an intervening room or public space

<u>Adjacent</u>: Located next to but not necessarily connected to the identified area or room

<u>Immediately accessible</u>: Available either in or adjacent to the identified area or room

<u>Readily accessible</u>: Available on the same floor or in the same clinic as the identified area or room

Architectural Details & MEP Requirements

2.1-7.2.2 **ARCHITECTURAL DETAILS**

CORRIDOR WIDTH:

2.1-7.2.2.1 NFPA 101, 18.2.3.4
___ Aisles, corridors & ramps required for exit access in a hospital not less than 8'-0" in clear & unobstructed width
or
___ Detailed code review incorporated in Project Narrative

___ Aisles, corridors & ramps in adjunct areas not intended for the housing, treatment, or use of inpatients not less than 44" in clear & unobstructed width
or
___ Detailed code review incorporated in Project Narrative

2.1-7.2.2.2 CEILING HEIGHT:
(1) ___ Min ceiling height 7'-6"in corridors & in normally unoccupied spaces
(3) ___ Min. height 7'-6" above floor of suspended tracks, rails & pipes located in traffic path for patients in beds & on stretchers
___ Min. ceiling height 7'-10" in other areas

2.1-7.2.2.3 DOORS & DOOR HARDWARE:
(1) Door Type:
(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
___ detailed code review included in Project Narrative
___ no floor tracks
(2) Door Opening:
(a) ___ min. 45.5" clear door width for diagnostic/treatment areas
___ min. 83.5" clear door height for diagnostic/treatment areas
(b) ___ swinging doors for personnel use in addition to sliding doors
☐ check if not included in project
___ min. clear width 34.5"

(3) Door Swing:
(a) ___ doors do not swing into corridors except doors to non-occupiable spaces & doors with emergency breakaway hardware

(4) ___ Lever hardware or push/pull latch hardware

(5) Doors for Patient Toilet Facilities:
(a) ___ two separate doors
or
___ door that swings outward
or
___ door equipped with emergency rescue hardware (permits quick access from outside the room to prevent blockage of the door)
or
___ sliding door other than pocket door

(b) ___ toilet room opens onto public area or corridor
☐ check if not included in project
___ visual privacy is maintained

2.1-7.2.2.7 GLAZING MATERIALS:
___ Glazing within 1 foot 6 inches of floor
☐ check if not included in project
___ must be safety glass, wire glass or plastic break-resistant material

2.1-7.2.2.8 HANDWASHING STATIONS:
(1)(c) ___ Handwashing stations in patient care areas located so they are visible & unobstructed
(3)
(a) ___ Handwashing station countertops made of porcelain, stainless steel, solid-surface materials or impervious plastic laminate assembly
(b) ___ Countertops substrate
☐ check if not included in project
___ marine-grade plywood (or equivalent material) with impervious seal
(4) ___ Handwashing station casework
☐ check if not included in project
___ designed to prevent storage beneath sink
(5) ___ Provisions for drying hands
☐ check if not included in project
(only at hand scrub facilities)
(a) ___ hand-drying device does not require hands to contact dispenser
(b) ___ hand-drying device is enclosed to protect against dust or soil & to ensure single-unit dispensing
(6) ___ Liquid or foam soap dispensers

2.1-7.2.2.9 GRAB BARS:
(1) ___ Grab bars anchored to sustain concentrated load 250 pounds
(3) ___ Ends of grab bars constructed to prevent snagging clothes of patients staff & visitors
2.1-7.2.2.10 HANDRAILS:
(1) ___ Handrails installed on both sides of patient use corridors
(3) ___ Rail ends return to wall or floor
(4) ___ Handrail gripping surfaces & fasteners are with 1/8-inch min. radius
(5) ___ Handrails have eased edges & corners
(6) ___ Handrail finishes are cleanable

2.1-7.2.2.12 NOISE CONTROL:
(2) ___ Noise reduction criteria in Table 1.2-6 applicable to partitions, floors & ceiling construction are met in patient areas

2.1-7.2.3 **SURFACES**
2.1-7.2.3.1 FLOORING & WALL BASES:
(1) ___ Flooring surfaces cleanable & wear-resistant for location
(3) ___ Smooth transitions provided between different flooring materials
(4) ___ Flooring surfaces including those on stairways are stable, firm & slip-resistant
(5) ___ Floors & wall bases of soiled workrooms, toilet rooms & other areas subject to frequent wet cleaning are constructed of materials that are not physically affected by germicidal or other types of cleaning solutions

2.1-7.2.3.2 WALLS & WALL PROTECTION:
(1)(a) ___ Wall finishes are washable
(1)(b) ___ Wall finishes near plumbing fixtures are smooth, scrubbable & water-resistant
(2) ___ Wall surfaces in areas routinely subjected to wet spray or splatter are monolithic or have sealed seams that are tight & smooth

(5) ___ Wall protection devices & corner guards durable & scrubbable
2.1-7.2.3.3 CEILINGS:
(1) ___ Ceilings provided in all areas except mechanical, electrical & communications equipment rooms
(a) ___ Ceilings cleanable with routine housekeeping equipment
(b) ___ Acoustic & lay-in ceilings where used do not create ledges or crevices
2.1-7.2.4 FURNISHINGS:

2.1-7.2.4.1 ___ built-in furnishings upholstered with impervious materials in patient treatment areas with risks of exposure & contamination from bodily fluids & other fluids
2.1-7.2.4.3 ___ Privacy curtains in patient care areas are washable

2.1-8.2 **HEATING VENTILATION & AIR-CONDITIONING (HVAC) SYSTEMS**

Part 3/6.1 UTILITIES:
Part 3/6.1.1 Ventilation Upon Loss of Electrical Power:
___ space ventilation & pressure relationship requirements of Table 7.1 are maintained for AII Rooms, PE Rooms, Operating Rooms in event of loss of normal electrical power

Part 3/6.1.2 Heating & Cooling Sources:
Part 3/6.1.2.1 ___ heat sources & essential accessories provided in number & arrangement sufficient to accommodate facility needs (reserve capacity) even when any one of heat sources or essential accessories is not operating due to breakdown or routine maintenance
___ capacity of remaining source or sources is sufficient to provide heating for operating rooms & recovery rooms

Part 3/6.1.2.2 Central cooling systems greater than 400 tons (1407 kW) peak cooling load
☐ check if <u>not</u> included in project
___ number & arrangement of cooling sources & essential accessories is sufficient to support facility operation plan upon breakdown or routine maintenance of any one of cooling sources

Part 3/6.2 AIR-HANDLING UNIT (AHU) DESIGN:
Part 3/6.2.1 ___ AHU casing is designed to prevent water intrusion, resist corrosion & permit access for inspection & maintenance

Part 3/6.3 OUTDOOR AIR INTAKES & EXHAUST DISCHARGES:

Part 3/6.3.1 Outdoor Air Intakes:

Part 3/6.3.1.1
- ___ located min. of 25'-0" from cooling towers & all exhaust & vent discharges
- ___ outdoor air intakes located such that bottom of air intake is at least 6'-0" above grade
- ___ air intakes located away from public access

Part 3/6.3.1.3
- ___ intakes on top of buildings
  - ☐ check if not included in project
  - ___ located with bottom of air intake min. of 3'-0" above roof level

Part 3/6.3.1.4
- ___ intake in areaway
  - ☐ check if not included in project
  - ___ bottom of areaway air intake opening is at least 6'-0" above grade
  - ___ bottom of air intake opening from areaway into building is at least 3'-0" above bottom of areaway

Part 3/6.4 FILTRATION:
- ___ Two filter banks for inpatient care (see Table 6.4)
  - ___ Filter Bank No. 1: MERV 7
  - ___ Filter Bank No. 2: MERV 14
- ___ Each filter bank with efficiency of greater than MERV 12 is provided with differential pressure measuring device to indicate when filter needs to be changed

Part 3/6.4.1 ___ Filter Bank No. 1 is placed upstream of heating & cooling coils

Part 3/6.4.2 ___ Filter Bank No. 2 is placed downstream of all wet-air cooling coils & supply fan

Part 3/6.7 AIR DISTRIBUTION SYSTEMS:

Part 3/6.7.1
- ___ Maintain pressure relationships required in tables 7.1 in all modes of HVAC system operation
- ___ Spaces with required pressure relationships are served by fully ducted return systems or exhaust systems
- ___ Inpatient facilities & recovery rooms are served by fully ducted return or exhaust systems

Part 3/6.7.2 Air Distribution Devices:
- ___ supply air outlets comply with Table 6.7.2

Part 3/6.7.3 Smoke Barriers:
- ___ HVAC zones coordinated with compartmentation to minimize ductwork penetrations of fire & smoke barriers.

Part 3/6.8 ENERGY RECOVERY SYSTEMS:
- ☐ check if not included in project

Part 3/6.8.1 ___ Located upstream of Filter Bank No. 2

Part 3/6.8.3
- ___ Energy recovery systems with leakage potential
  - ☐ check if not included in project
  - ___ arranged to minimize potential to transfer exhaust air directly back into supply airstream
  - ___ designed to have no more than 5% of total supply airstream consisting of exhaust air

Part 3/7 SPACE VENTILATION

Part 3/7.1.a ___ Spaces ventilated according to Table 7.1

Part 3/7.1.a.1 ___ Air movement is from clean to less-clean areas

Part 3/7.1.a.3
- ___ Min. number of total air changes required for positive pressure rooms is provided by total supply airflow
- ___ Min. number of total air changes required for negative pressure rooms is provided by total exhaust airflow

Part 3/7.1.a.4 ___ Entire minimum outdoor air changes per hour required by Table 7.1 for each space meet filtration requirements of Section 6.4

Part 3/7.1a.5
- ___ Air recirculation through room unit
  - ☐ check if not included in project
  - ___ complies with Table 7.1
  - ___ room unit receive filtered & conditioned outdoor air
  - ___ serve only a single space
  - ___ provides min. MERV 6 filter located upstream of any cold surface so that all of air passing over cold surface is filtered

2.1-8.3 **ELECTRICAL SYSTEMS**

2.1-8.3.2 **ELECTRICAL DISTRIBUTION & TRANSMISSION**

2.1-8.3.2.2 Panelboards:

(1) ___ panelboards serving life safety branch circuits serve floors on which they are located & floors immediately above & below

(2) ___ panelboard critical branch circuits serve floors on which they are located

(3) ___ panelboards not located in exit enclosures or exit passageways

2.1-8.3.3 **POWER-GENERATING & -STORING EQUIPMENT**

2.1-8.3.3.1 ___ Essential electrical system or emergency electrical power

(1) ___ essential electrical system complies with NFPA 99

(2) ___ emergency electrical power complies with NFPA 99

2.1-8.3.5 **ELECTRICAL EQUIPMENT**

2.1-8.3.5.1 ___ Handwashing sinks & scrub sinks that depends on building electrical service for operation are connected to essential electrical system

☐ check if not included in project

2.1-8.3.5.2 ___ Electronic health record system servers & centralized storage provided with uninterruptible power supply

2.1-8.3.6 **ELECTRICAL RECEPTACLES**

2.1-8.3.6.1 Receptacles In Corridors:

(1) ___ duplex-grounded receptacles for general use installed 50'-0" apart or less in all corridors

___ duplex-grounded receptacles for general use installed within 25'-0" of corridor ends

2.1-8.3.6.3 Essential Electrical System Receptacles:

(1) ___ cover plates for electrical receptacles supplied from essential electrical system are distinctively colored or marked for identification

(2) ___ same color is used throughout facility

2.1-8.4 **PLUMBING SYSTEMS**

2.1-8.4.2 Plumbing & Other Piping Systems:

2.1-8.4.2.1(3) ___ no plumbing piping exposed overhead or on walls where possible accumulation of dust or soil may create cleaning problem

2.1-8.4.2.5 Heated Potable Water Distribution Systems:

(2) ___ heated potable water distribution systems serving patient care areas are under constant recirculation

___ non-recirculated fixture branch piping maximum length 25'-0"

(3)(a) ___ no installation of dead-end piping (except for empty risers

(3)(c) mains & branches for future use)

(3)(b) ___ any existing dead-end piping is removed

☐ check if not included in project

(4)(a) ___ water-heating system supplies water at temperatures & amounts indicated in Table 2.1-4

2.1-8.4.2.6 Drainage Systems:

(1)(a) ___ drainage piping installed above ceiling of or exposed in electronic data processing areas & electric closets

☐ check if not included in project

___ special provisions to protect space below from leakage & condensation

(1)(b) ___ drip pan for drainage piping above ceiling of sensitive area

☐ check if not included in project

___ accessible

___ overflow drain with outlet located in normally occupied area that is not open to restricted area

2.1-8.4.3 **PLUMBING FIXTURES**

2.1-8.4.3.1(1) ___ Materials used for plumbing fixtures are non-absorptive & acid-resistant

2.1-8.4.3.2 Handwashing Station Sinks:

(1) ___ sinks in handwashing stations are designed with basins that will reduce risk of splashing to areas where direct patient care is provided, sterile procedures are performed & medications are prepared

(2) ___ sink basins have nominal size of no less than 144 square inches

___ sink basins have min. dimension 9 inches in width or length

(3) ___ sink basins are made of porcelain, stainless steel or solid-surface materials

(5) ___ water discharge point of faucets is at least 10" above bottom of basin

(7) ___ anchored so that allowable stresses are not exceeded where vertical or horizontal force of 250 lbs. is applied

(8) ___ sinks used by staff, patients, & public have fittings that can be operated without using hands (may be single-lever or wrist blade devices)

(a) ___ blade handles

☐ check if not included in project

___ at least 4 inches in length

___ provide clearance required for operation

(b) ____ sensor-regulated water fixtures
☐ check if not included in project
____ meet user need for temperature & length of time water flows
____ designed to function at all times and during loss of normal power

2.1-8.4.3.4 Ice-Making Equipment:
____ copper tubing provided for supply connections to ice-making equipment

2.1-8.4.3.5 Clinical Flushing-Rim Sinks:
(1) ____ trimmed with valves that can are operated without hands
(a) (may be single-lever or wrist blade devices)
(b) ____ handles are at least 6 in. long
(2) ____ integral trap wherein upper portion of water trap provides visible seal

2.1-8.4.4 **MEDICAL GAS & VACUUM SYSTEMS**
____ Station outlets provided as indicated in Table 2.1-3

2.1-8.5.1 **CALL SYSTEMS**
2.1-8.5.1.1
(1) ____ Nurse call stations provided as required in Table 2.1-2
(2) ____ Nurse call systems report to attended location with electronically supervised visual & audible annunciation as indicated in Table 2.1-2
(4) ____ Call system complies with UL 1069 "Standard for Hospital Signaling & Nurse Call Equipment"
(5) ____ Wireless nurse call system
☐ check if not included in project
____ complies with UL 1069

2.1-8.5.1.2(4) ____ Nurse call system provided in each patient care area as required in Table 2.1-2

2.1-8.5.1.3 Bath Stations:
____ bath station that can be activated by patient lying on floor provided at each patient toilet
(1) ____ alarm in these areas can be turned off only at bath station where it was initiated
(3) ____ toilet bath stations located on the side of toilets within 12" of front of toilet bowl & 3'-0" to 4'-0" above floor

2.1-8.5.1.5 ____ Emergency call stations are equipped with continuous audible or visual confirmation to person who initiated the code call

2.1-8.6.2 **ELECTRONIC SURVEILLANCE SYSTEMS**
☐ check if not included in project
2.1-8.6.2.2 ____ monitoring devices are located so they are not readily observable by general public or patients
2.1-8.6.2.3 ____ electronic surveillance systems receive power from essential electrical system