**COMPLIANCE CHECKLIST**

**IP27\_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 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:

1. NFPA 101 Life Safety Code (2012) and applicable related standards contained in the appendices of the Code
2. State Building Code (780 CMR)
3. Accreditation requirements of The Joint Commission
4. CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities
5. USP 797 & Regulations of the Massachusetts Board of Registration in Pharmacy
6. Occupational Safety & Health Standards (OSHA)
7. Accessibility Guidelines of the Americans with Disabilities Act (ADA)
8. Architectural Access Board Regulations (521 CMR)
9. 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.

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| **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. “E” must not be used for an existing required support space associated with a new patient care room or 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. |

1. All room functions marked with "X" must be shown on the plans with the same name labels as in this checklist.
2. 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.
3. 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”.
4. Requirements referenced with “FI” result from formal interpretations from the FGI Interpretations Task Group.
5. 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.

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| Facility Name: |  | DoN Project Number: (if applicable) |
| Facility Address: |  |  |
| Satellite Name: (if applicable) |  | Building/Floor Location: |
| Satellite Address: (if applicable) |  | Submission Dates: |
| Project Description: |  | Initial Date:  Revision Date: |

|  | **Architectural Requirements** | **Building Systems Requirements** |  |
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| 2.1‑6 | **PUBLIC AREAS**  check if not included in project |  |  |
|  |  |  |  |
| 2.1‑6.1.2 | Location: |  |  |
|  | public areas clearly identified        located to accommodate persons with disabilities |  |  |
|  |  |  |  |
| 2.1‑6.2.1 | Vehicular drop‑off & pedestrian entrance |  |  |
|  | minimum of one entrance are reachable from grade level |  |  |
|  |  |  |  |
| 2.1‑6.2.2 | Reception area or lobby |  |  |
| 2.1‑6.2.2.1 |  |  |  |
| (1) | access to information |  |  |
| (2) | public waiting area |  |  |
| (3) | public toilet room | Ventilation:        Min. 10 air changes per hour        Exhaust        Negative pressure        No recirculating room units | Table 7.1 |
| (4) | provisions for telephone access |  |  |
| (5) | provisions for drinking water |  |  |
|  |  |  |  |
| 2.1‑6.2.3 | Public waiting rooms or areas |  |  |
|  | toilet room readily accessible\* to all public waiting rooms |  |  |
|  |  |  |  |
| 2.1‑6.2.7 | Wheelchair storage & parking space  check if not included in project  (only if no wheelchair owned by health care organization is made available for patient use) |  |  |
| 2.1‑6.2.7.1 | designated area located out of required corridor width & directly accessible\* to entrance provided for storage of at least one wheelchair |  |  |
| 2.1‑6.2.7.2 | wheelchair parking space |  |  |
|  | facility provides services that require patients to transfer to facility chair, wheelchair, recliner, examination table or gurney        designated area is provided for parking at least one patient‑owned wheelchair in non‑public area        located out of any required egress width or other required clearance  **or**        facility does not provide services that require patients to transfer to facility chair, wheelchair, recliner, examination table or gurney |  |  |
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| 2.1‑6.3 | **ADMINISTRATIVE AREAS**  check if not included in project |  |  |
|  |  |  |  |
| 2.1‑6.3.1 | Admissions area |  |  |
| 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 |  |  |
| 2.1‑6.3.1.3 | storage area for wheelchairs located out of path of egress |  |  |
|  |  |  |  |
| 2.1‑6.3.2 | Interview space |  |  |
| 2.1‑6.3.2.1 | space(s) for private interviews separate from public & patient areas |  |  |
| 2.1‑6.3.2.2 | (shared use of office or consultation room for this purpose is permitted) |  |  |
|  |  |  |  |
| 2.1‑6.3.4 | Multipurpose room |  |  |
| 2.1‑6.3.4.1 | (several services or departments are permitted to share one multipurpose room) |  |  |
|  |  |  |  |
| 2.1‑6.3.5 | Medical records area |  |  |
|  | provisions made for securing medical records of all media types |  |  |
| 2.1‑6.3.5.1 | location restricted to staff access to maintain confidentiality of records |  |  |
|  |  |  |  |
| 2.1‑6.4 | Support Areas for Staff & Volunteers: |  |  |
| 2.1‑6.4.2 | Separate from those provided for public |  |  |
| 2.1‑6.4.1 | Lounge        Locker facilities |  |  |
|  | Staff & volunteers toilet room | Ventilation:        Min. 10 air changes per hour        Exhaust        Negative pressure        No recirculating room units | Table 7.1 |
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\*LOCATION TERMINOLOGY:

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

Adjacent: Located next to but not necessarily connected to the identified area or room

Immediately accessible: Available either in or adjacent to the identified area or room

Readily accessible: Available on the same floor or in the same clinic as the identified area or room

Architectural Details & MEP Requirements

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| 2.1‑7.2.2 | **ARCHITECTURAL DETAILS** |
|  | CORRIDOR WIDTH: |
| 2.1‑7.2.2.1  NFPA 101, 18.2.3.4 | 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 |
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| 2.1‑7.2.2.2 | CEILING HEIGHT: |
| (1) | Min ceiling height 7'-6"in corridors & in normally unoccupied spaces |
|  | Min. ceiling height 7’‑10” in other areas |
| 2.1‑7.2.2.3  (1)  (a)  (b) | DOORS & DOOR HARDWARE:  Door Type:        doors between corridors, rooms, or spaces subject to occupancy swing type or sliding doors        sliding doors  check if not included in project |
|  | manual or automatic sliding doors comply with NFPA 101        detailed code review incorporated in Project Narrative        no floor tracks |
| (3) | Door Swing: |
| (a) | doors do not swing into corridors except doors to non‑occupiable spaces (e.g. environmental services rooms & electrical closets) & doors with emergency breakaway hardware |
| (4) | Lever hardware or push/pull latch hardware |
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| 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 |
| (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 not create ledges or crevices |
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| 2.1‑8.2 | **HEATING VENTILATION & AIR‑CONDITIONING (HVAC) SYSTEMS** |
| Part 3/6.1.2 | Heating & Cooling Sources: |
| Part 3/6.1.2.1 | provide heat sources & essential accessories 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 for domestic hot water |
| Part 3/6.1.2.2 | Central cooling systems greater than 400 tons (1407 kW) peak cooling load  check if not 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 ft from cooling towers & all exhaust & vent discharges        outdoor air intakes located such that bottom of air intake is at least 6 ft above grade        facilities with moderate-to-high risk of natural or man-made extraordinary incidents locate new air intakes away from public access        all intakes are designed to prevent entrainment of wind-driven rain |
|  |  |
| 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 ft 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 ft above grade        bottom of air intake opening from areaway into building is at least 3 ft above bottom of areaway |
| Part 3/6.4 | FILTRATION: |
|  | One filter bank MERV 7 for outpatient & administrative spaces (see Table 6.4) |
| 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 |
|  |  |
| 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. |
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| 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 |
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| Part 3/7 | SPACE VENTILATION |
| Part 3/7.1.a | Spaces ventilated according to Table 7.1 |
| 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 |
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| 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 |
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| 2.1‑8.3 | **ELECTRICAL SYSTEMS** |
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| 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 |
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| 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 |
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| 2.1‑8.3.5 | **ELECTRICAL EQUIPMENT** |
| 2.1‑8.3.5.1 | Handwashing 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 |
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| 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 |
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| 2.1‑8.4.2.6 | Drainage Systems: |
| (1)(a) | drainage piping installed above ceiling of or exposed in rooms listed below piping have special provisions (e.g. double wall containment piping or oversized drip pans) to protect space below from leakage & condensation   * Electronic data processing areas * Electric closets |
| (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: |
| (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 min. 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 |
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| 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 |
|  |  |