MASS Design Group

1 Chandler Street

Boston, MA 02116

hello@massdesigngroup.org

+1 857 233 5788

massdesigngroup.org

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Commissioner Robbie Goldstein
Department of Public Health
250 Washington Street
Boston, MA 02108

**RE: Birth Center Regulations 105 CMR 140.000**

Dear Commissioner Goldstein,

We are submitting this testimony on behalf of MASS Design Group, the architecture firm currently working with Neighborhood Birth Center on Boston’s first freestanding birth center. Additionally, we have deep experience in healthcare designing hospital and clinical space nationally and internationally.

We know firsthand the design and budget challenges of the current birth center and facilities regulations. We have visited Seven Sisters Midwifery & Birth Center several times in addition to poring over Birth Center Regulations 105 CMR 140.000 and FGI regulations. And it is clear that there are facility requirements that are not necessary or suitable for a health setting designed for low risk pregnancy and physiological birth. We make the below recommendations:

1. **DPH Outpatient Checklists**
* It would be helpful to have an [OP checklist](https://www.mass.gov/lists/outpatient-facilities-checklists) dedicated specifically to birth centers for Massachusetts (similar to New York State) as referencing OP1 does not quite match up with the needs specific to birth centers.
	+ For example, general outpatient facilities must adhere to the patient of size requirement and provide larger bathrooms that accommodate patients of size. However, because birth centers serve low risk patients, they should not have to meet the patient of size requirements.
* We recommend having a checklist that is specific to birth centers. This would reduce a lot of the confusion of having to reference and interpret how the general OP1 checklist should apply to this unique type of facility.
1. **Handwashing and Toilet Facilities**
* *From 105 CMR 140.205: “Surgical scrub sink faucets shall be provided with blade type operating handles, knee or foot controls.”*
* This is unnecessary per the Commission for Accreditation of Birth Centers and adds unnecessary cost. It should be removed as a requirement for freestanding birth centers.
1. **Lighting**
* *FGI 2.4-8.3 Electrical Systems: “Birthing rooms to have a minimum lighting capacity of 70 foot candles in the delivery and newborn care area”*
* The intensive level of lighting required for birth centers in the FGI guidelines is not aligned with need or use. The guidelines stipulate bright overhead ceiling lights.
* However birthing people want the ability to control lighting in their room, and often prefer dimmer, more intimate environments.
* The current lighting requirements are extremely costly for birth centers to have to build in to meet code requirements, but these lights are seldom used.
	+ One MA birth center stated that across the span of a year, they only turned the birth room ceiling lights on one time, during an inspection. But for patient care and everyday use, other lower level lights are preferred and more appropriate (other ceiling lights, as well as floor and table lamps).
* We recommend relaxing the level of lighting required in birth rooms.
1. **Medical records**
* The current FGI guidelines refers to a medical records room for storage of physical patient records. However, some newer or smaller facilities use digital records.
* We recommend adding a clarifying addendum to the requirement, so that facilities using exclusively digital records are exempt from needing to have a physical medical records space.
1. **Elevator**
* *FGI 2.4-8.7 Elevators: “Minimum elevator car dimensions to be 5’-8” wide x 7’-6” deep”*
* The FGI guidelines currently requires gurney sized elevators. In the case that the elevator is being used to accommodate emergency stretcher access to birth rooms on an upper floor, this makes sense.
* However, if the birth rooms are on a ground level floor; and a facility has an elevator to access non-birth spaces on an upper floor (such as multipurpose or staff spaces), the minimum elevator size should be allowed to be smaller.
* We recommend adding clarifying language to the point above.
1. **Soiled workroom**
* *FGI 2.4-2.8.2 Staff Work Area: Provide facilities for cleaning bedpans in the mother’s bathrooms*
* The FGI guidelines currently require facilities for cleaning bedpans in the soiled workroom. However, birth centers do not use bedpans for patients, as mothers are ambulatory before, during, and after birth.
* We recommend relaxing or adding clarifying language on the above.

Sincerely,

**MASS Design Group Team**

Amie Shao, Principal, MASS Design Group (amie@mass-group.org)

David Saladik, Senior Principal, MASS Design Group (david@mass-group.org)

1 Chandler St, Boston, MA 02116