

Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES
Division 30—Division of Regulation and Licensure
Chapter 20—Hospitals

PROPOSED RULE

19 CSR 30-20.030 Construction Standards for New Hospitals

PURPOSE: This rule establishes up-to-date construction standards for new hospitals to help ensure accessible, functional, fire-safe and sanitary facilities.

PUBLISHER'S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. This material as incorporated by reference in this rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. The entire text of the rule is printed here.

(1) New Hospital General Requirements.

(A) A new hospital is one for which plans are submitted to the Department of Health and Senior Services for review and approval after January 1, 2018, for the construction of a new facility, expansion or renovation of an existing hospital or the conversion of an existing facility not previously and continuously licensed as a hospital under Chapter 197, RSMo. A new hospital shall be designed to provide all of the facilities required by this rule and arranged to accommodate all of the functions required by this rule and to provide comfortable, sanitary, fire-safe, secure and durable facilities for the patients. In major alteration projects and additions to an existing licensed hospital, only that part of the total hospital affected by the project is subject to this rule.

(B) These minimum requirements are not intended in any way to restrict innovations and improvements in design, construction or operating techniques. Plans and specifications and operational procedures which contain deviations from these requirements may be approved if it is determined that the purposes of the minimum requirements have been fulfilled. Some facilities may be subject to the requirements of more than one (1) regulating agency. While every effort has been made to ensure coordination, facilities making requests for changes in services and request for new construction or renovations are cautioned to verify requirements of other agencies involved.

(C) Requests for deviations from the requirements of this rule shall be in writing to the Department of Health and Senior Services. Approvals for deviations shall be in writing and both requests and approvals shall become a part of the permanent Department of Health and Senior Services records for the facility.

(D) Alterations or additions to existing hospitals shall be programmed so construction will minimize disruptions of existing functions. Access to exits and fire protections shall be maintained so the safety of the occupants will not be jeopardized during construction.

(E) The owner of each new facility or the owner of an existing facility being added to or undergoing major alterations shall provide a program scope of services which describes space requirements, staffing patterns, departmental relationships and other basic information relating to the objectives of the facility. The program may be general but it shall include a description of each function to be performed, approximate space needed for these functions and the interrelationship of

various functions and spaces. The program also shall describe how essential services can be expanded in the future as the demand increases. Appropriate modifications or deletions in space requirements may be made when services are shared or purchased, provided the program indicates where the services are available and how they are to be provided.

(2) Planning and Construction Procedure.

(A) Plans and specifications shall be prepared for the construction of all new hospitals and additions to and modifications or reconstruction of existing hospitals. The plans and specifications shall be prepared by an architect or a professional engineer licensed to practice in Missouri.

(B) Construction shall be in conformance with plans and specifications approved by the Engineering Consulting Unit of the Department of Health and Senior Services. The Department of Health and Senior Services shall be notified within five (5) days after construction begins. If construction of the project is not started within one (1) year after the date of approval of the plans and specifications, the plans and specifications shall be resubmitted to the Department of Health and Senior Services for its approval and shall be amended, if necessary, to comply with the then current rules before construction work commences.

(3) Design and Construction Requirements.

(A) New hospitals or portions of hospitals constructed or remodeled after the effective date of this amendment shall be maintained so that the building and its various operating systems comply with the life safety code standards in 42 C.F.R. Part 482 (2017) and 42 C.F.R. Part 485 (2017), which are incorporated by reference in this rule. The Code of Federal Regulations is published by the U.S. Government and is available by calling toll-free (866) 512-1800 or going to <https://bookstore.gpo.gov/>. The address is: U.S. Government Publishing Office, U.S. Superintendent of Documents, Washington, DC 20402-0001. This rule incorporates later amendments and additions to 42 C.F.R. Part 482 (2017) and 42 C.F.R. Part 485 (2017). This rule does not incorporate the following chapters of NFPA 99, 2012 edition: chapter 7 – Information Technology and Communications Systems for Health Care Facilities; chapter 8 – Plumbing; chapter 12 – Emergency Management and chapter 13 – Security Management. Existing hospital facilities constructed prior to the effective date of this amendment shall maintain and operate the building in compliance with the design and safety regulations in effect at the time of their construction.

(B) New hospitals or portions of hospitals constructed or remodeled after the effective date of this amendment must be constructed so that the building and its various operating systems comply with the standards contained in The Facility Guidelines Institute (FGI) Guidelines for the Design and Construction of Health Care Facilities (2010 edition) or the FGI Guidelines for Design and Construction of Hospitals and Outpatient Facilities (2014 edition), which are incorporated by reference in this rule and are published by the FGI at 350 N. Saint Paul Street, Ste. 100, Dallas TX 75201, or so that the building and its various operating systems comply with other standards and guidelines that provide equivalent design criteria. Prior to the Department granting approval of the construction plans and specifications required in this rule, the architect or professional engineer submitting the plans shall identify the equivalent design criteria used. This rule does not incorporate any subsequent amendments or additions. This rule does not incorporate the following chapter of FGI, 2010 edition: 1.2-8 – Commissioning. This rule does not incorporate the following chapter of FGI, 2014 edition: 1.2-7 – Commissioning. Existing hospital facilities constructed prior to the effective date of this amendment shall maintain and operate the building in compliance with the design and construction regulations in effect at the time of their construction.

(4) Additional Requirements

(A) The facility shall have at least two (2) pressure sterilizers located in the Central Sterile Processing designed to maintain two hundred fifty degrees Fahrenheit (250 F) or one hundred twenty-one degrees Celsius (121 C) at fifteen pounds (15 lbs.) pressure.

(B) If a facility is located outside of a service area or range of a public fire department, arrangements shall be made to have the nearest fire department respond in the case of fire. A copy of the agreement shall be kept on file in the facility and a copy shall be forwarded to the Department of Health and Senior Services. If the agreement is changed, a copy shall be forwarded to the Department of Health and Senior Services.

(C) Manual fire alarm initiating devices shall be installed at each nurses' station or other patient care control station and at the telephone switchboard.

AUTHORITY: sections 192.006 and 197.065, RSMo 2016, and sections 197.080 and 197.100, RSMo Supp. 2018. This rule was previously filed as 13 CSR 50-20.031 and 19 CSR 10-20.031. Original rule filed June 2, 1982, effective Nov. 11, 1982. Amended: Filed June 14, 1988, effective Oct. 13, 1988.*

**Original authority: 192.005.2, RSMo 1985 and 107.080, RSMo 1953.*

PUBLIC COST: This proposed amendment will not cost public entities more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support or in opposition to this proposed amendment with the Missouri Department of Health and Senior Services, Division of Regulation and Licensure, Dean Linneman, Division Director, PO Box 570, Jefferson City, MO 65102-0570. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*