



Oklahoma State Department of Health
Creating a State of Health

Health Facility Plan Review Process Improvement Team Executive Summary October 21, 2016

The Health Facility Plan Review Process Improvement Team held their eleventh meeting on October 21, 2016. Present were Henry Hartsell, Lee Martin, Brandon Bowen, Karen Rieger, Connie McFarland, Mary Daniel, David Foss, Craig Jones, LaWanna Halstead, Terri Cook, Don Maisch, Elizabeth Tyrrell, Jon Mercer, Dwayne Robinett, Stephen Larson, Kenyon Morgan, Walt Joyce, John Larson, Joyce Clark, Brian Connor, David Wright, Kari Holder, Kiersten Hamill, Ginger Thompson and Crystal Rushing.

The team reviewed the July 15, 2016 executive summary and recapped the project to date.

The team discussed waivers and exceptions due to a critical question that arose from the last meeting on July 15, 2016. A waiver can be given concerning state standards chapter 667 pertaining to life safety code. If the state standards are more restrictive than the FGI guidelines CMS advises states to follow state guidelines.

1. Only relates to state code
2. How do we educate/communicate the decisions that are made?
 - o Need hypothetical
 - o Have to find a way to put out a waivers guide (website tab)
3. Opportunities in (2012) CMS code, radiology (film readers)
4. How do we maintain waivers?
 - o Documentation
5. How does this apply to existing construction?
6. Need consistency of decision.
7. Still need to work on bringing code to current needs.
8. How will this affect current workload?
9. 60 day review may be too long especially for smaller projects.
 - o What happens after 60 days?
 - o Test how long it takes to review
10. Flexibility to talk about it
11. Architects make decision on relevant code early on and submit waiver.

The group agreed to move to the test phase regarding waivers.

Data Updates:

- Hank presented a chart for processing times for functional programs, and stage 1 and 2 submittals. The group agreed to add an additional chart to show summary of stage 1 plan status from old process versus the new process.
- Top ten reasons for S1 non-approval:
 1. Drawings not legible and not to scale



2. Lack of detail – no 667 terminology (doesn't match)
3. Wrong life safety plan
4. Not all required rooms included
5. Phase plans not included
6. Existing/demo plans not included
7. Only remodel area shown
8. Staff lockers/toilets not provided
9. No handwashing station/clinical sinks
10. Patient privacy not provided (outpatient)

Next steps include:

- Test waiver process
- Language of self-certification
 - o Licensed for 5 years; currently in Oklahoma
 - o Engineers/architects
 - o Consultation/fee
- Draft dispute resolution
- Informal process
- Voluntary
- Document the path
- OSDH will come back w/recommendations for review timeline – also for nursing home and assisted living
- Table 2: break out new process from old in data (see outliers)
- Strike “rules” from item (b) in two places in chapter 667 – Hospital Standards
- Provide input on possible fee increases
- Consider OHA
- Schedule next meeting

ORIGINAL AIM Statement: An opportunity exists to ensure the Oklahoma State Department of Health implements clear, reasonable and timely management practices for construction and plan reviews for hospitals and other health facilities in compliance with applicable state and federal laws and rules and up-to-date guidelines. This effort should decrease the time required to complete approvals of plans and construction projects, moving from the current “sample” means days, to a 15% reduction by December 31, 2015. This is important to work on immediately because timely plan reviews and inspections give health facilities important information needed to achieve and maintain compliance with construction and review standards. Timely reviews and inspections have the potential to affect patient health and safety, to ensure compliance with building and safety codes, to improve the efficiency and cost-effectiveness of state government services, and to reduce compliance costs for health facilities. The baseline is measured as the mean number of days at the four major stages of the plan review process.
Data Set reports.