



Oklahoma State Department of Health  
Creating a State of Health

## Health Facility Plan Review Process Improvement Team

### Executive Summary

July 15, 2016

The Health Facility Plan Review Process Improvement Team held their tenth meeting on July 15, 2016. Present were Henry Hartsell, David Foss, Connie McFarland, Craig Jones, Roger Knak, Danny Coats, Naresh Bhanderi, James Joslin, Terri Cook, Lee Martin, Don Maisch, John Larson, Jon Mercer, LaWanna Halstead, Pat Rogers, Walt Joyce, Joyce Clark, Dwayne Robinett, Ginger Thompson, Matt Adams, Bobby Kunkle, David Wright, Kenyon Morgan, Kiersten Hamill, Kari Holder, Ginger Thompson and Debbie Raison.

The team reviewed the March 25, 2016 executive summary and recapped the project to date.

The team used the Adopt-Adapt-Abandon approach – adopt a process change that works, adapt one that needs tweaking, or abandon a change that fails to produce expected results. They noted that the functional program template takes longer for the Oklahoma State Department of Health's staff to review, because of overlap between multiple templates, templates filled out incorrectly, and projects with multiple sites or areas. The team agreed to continue use of the templates with these adaptations:

- Suggest facilities use the templates as checklists in writing a unified program covering multiple areas;
- Develop an interactive template that prompts the user to identify the areas that are included in the project, and that autofills standard information in each section of the templates; and
- Provide examples of successfully completed templates. The Oklahoma Hospital Association will reach out to its membership for volunteers to provide examples.

The group reviewed the data on processing times for functional programs, and stage one and two design and construction plan submittals. OSDH staff reported that the backlog of review was cleared effective July 11, 2016, and that all programs and plans on file that had not been reviewed were pending 45 days or less. Suggestions to improve the data reports were included on the "next steps" list.

Team members reviewed additional information on solutions raised in previous meetings. The group discussed the pros and cons of self-certification of plans, dispute resolution, a detailed process to ensure timely review of programs and plans, and updates to OAC 310:615, 667, 675, Life Safety Code and FGI Guidelines. The majority voted to continue work on each of the four solution areas. OSDH staff will work on processes and evaluations of self-certification of plans, dispute resolution, and the timely plan review process. Subcommittees based on facility types will work on updates to Oklahoma's physical plant requirements in light of the CMS adoption of the 2012 Life Safety Code and the FGI Guidelines.



New barriers and critical questions included:

- Why are there fewer stage two reviews than stage one reviews?
- Should some measures of the scope of projects be added to data?
- Can projects be categorized by complexity, such as the hours required to review them?
- Can the Commissioner of Health adopt or provide waivers to provide relief during the rulemaking process?
- How does Life Safety Code 101 impact facilities? Will they need a waiver and who should they petition?
- Is there a way to have a portal or other capability to check the status of approval?

Next steps include:

- Categorize and count the reasons for rejections of design and construction plans;
- Include data on stage one plans that are "approved with comments;"
- Track the timeframes for internal steps in OSDH staff reviews, separately identifying times for staff to complete functional program and stage one plan reviews;
- Track companies that submit stage one plans but do not submit stage two plans;
- Identify the number of facilities using the template as a checklist but not submitting the forms;
- Provide announcement regarding the template, the review process explanation, the rule outline (OAC 310:667) outline to be shared with companies and associations to ask for volunteers for a beta test;
- Add labels for number of cases and months to Figure 9 on page 7;
- Form the four subcommittees to study updates to the physical plant requirements; and
- Research whether there is a program or tool to develop functional programs under FGI guidelines, that might be used to improve the OSDH templates for multiple areas; and
- The Oklahoma Hospital Association will ask membership to participate in a beta test.

**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.