

DEPARTMENT OF PUBLIC HEALTH

NOTICE OF ADOPTED AMENDMENTS

- 1) Heading of the Part: Hospital Licensing Requirements
- 2) Code Citation: 77 Ill. Adm. Code 250
- 3)

<u>Section Numbers:</u>	<u>Adopted Action:</u>
250.160	Amend
250.1910	Amend
250.1980	Amend
250.2450	Amend
250.2460	Amend
250.2470	Amend
250.2480	Amend
250.2490	Amend
250.2500	Amend
250.2610	Amend
250.2620	Amend
250.2630	Amend
250.2640	Amend
250.2650	Amend
250.2660	Amend
250.2670	Amend
250.2680	Amend
- 4) Statutory Authority: Hospital Licensing Act [210 ILCS 85]
- 5) Effective Date of Rulemaking: March 31, 2011
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Does this rulemaking contain incorporations by reference? Yes
- 8) A copy of the adopted amendments, including any material incorporated by reference, is on file in the Department's principal office and is available for public inspection.
- 9) Notice of Proposal Published in Illinois Register: October 8, 2010; 34 Ill. Reg. 15127
- 10) Has JCAR issued a Statement of Objection to this rulemaking? No

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11) Differences between proposal and final version: No changes were made in response to comments received during the first notice or public comment period.

The following changes were made in response to comments and suggestions of JCAR:

1. In Section 250.2450(c)(1), "Hospitals shall have policies and procedures for readily gaining access to a locked bathroom in a patient's room. (Section 11.6 of the Act)" was inserted after the period.
2. In Section 250.2450(c)(2)(I), "delayed egress" was inserted after "All".
3. In Section 250.2450(c)(2)(J), "locked doors that state" was changed to "electronic locked doors that state the action required to open the door. Electronic delayed egress type doors shall state".
4. In Section 250.2450(c)(2)(N), "24/7" was inserted before "staff", and "or an ADA compliant release device located within 5 feet of the door" and "The duty station shall be located within the locked unit and staff shall be able to observe the door directly or by remote video." were added after "station" and the period, respectively.
5. In Section 250.2450(c)(2)(O), "two electronic locking devices" was added after "than", and "one such device" was stricken, and "one of which may be delayed egress" was added before the period.
6. In Section 250.2450(c)(2), (P) was changed to "P) Complete smoke detection shall be provided throughout the entire secured unit.".
7. In Section 250.2640(a)(1), "Subparagraph 2," was stricken, and "subsection (a)(2)" was added.

In addition, various typographical, grammatical and form changes were made in response to JCAR comments.

12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreements issued by JCAR? Yes

13) Will this rulemaking replace any emergency rulemaking currently in effect? No

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- 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of the Rulemaking: This Part titled "Hospital Licensing Requirements" establishes minimum standards for hospitals in Illinois, including design and construction standards for new hospitals and minimum construction standards for existing hospitals.

This rulemaking amends two Sections in Subpart P, the six construction Sections in Subpart T, and all eight Sections in Subpart U. These Sections contain references to National Fire Protection Association building and life-safety codes and other design standards listed in Section 250.160 (Incorporated and Referenced Materials). While that Section was brought up to date with comprehensive amendments in the spring of 2008, the citations in the corresponding construction Sections were not changed. Some of these Sections have not been amended or updated since the 1980s, making for huge discrepancies between them and Section 250.160 and with current construction standards.

In each Section, the dates of the NFPA Standards are stricken, meaning that as new NFPA Standards are published in the future, the Department will have to amend only Section 250.160. Additionally, numerous technical, grammatical, and form changes were made to bring the rules into conformity with current Secretary of State style requirements. Section 250.160 was amended to add the Private Sewage Disposal Code (77 Ill. Adm. Code 905).

Additionally, statutory language from Public Act 96-925, which requires hospitals to have policies for gaining access to locked bathroom doors, was added to Section 250.2450 (Details).

- 16) Information and questions regarding these adopted amendments shall be directed to:

Susan Meister
Division of Legal Services
Department of Public Health
535 West Jefferson, Fifth Floor
Springfield, Illinois 62761

217/782-2043
e-mail: dph.rules@illinois.gov

The full text of the Adopted Amendments begins on the next page:

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TITLE 77: PUBLIC HEALTH

CHAPTER I: DEPARTMENT OF PUBLIC HEALTH

SUBCHAPTER b: HOSPITALS AND AMBULATORY CARE FACILITIES

PART 250
HOSPITAL LICENSING REQUIREMENTS

SUBPART A: GENERAL

Section

250.110	Application for and Issuance of Permit to Establish a Hospital
250.120	Application for and Issuance of a License to Operate a Hospital
250.130	Administration by the Department
250.140	Hearings
250.150	Definitions
250.160	Incorporated and Referenced Materials

SUBPART B: ADMINISTRATION AND PLANNING

Section

250.210	The Governing Board
250.220	Accounting
250.230	Planning
250.240	Admission and Discharge
250.250	Visiting Rules
250.260	Patients' Rights
250.265	Language Assistance Services
250.270	Manuals of Procedure
250.280	Agreement with Designated Organ Procurement Agencies
250.285	Smoking Restrictions
250.290	Safety Alert Notifications

SUBPART C: THE MEDICAL STAFF

Section

250.310	Organization
250.315	House Staff Members
250.320	Admission and Supervision of Patients
250.330	Orders for Medications and Treatments

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250.340 Availability for Emergencies

SUBPART D: PERSONNEL SERVICE

Section

250.410	Organization
250.420	Personnel Records
250.430	Duty Assignments
250.435	Health Care Worker Background Check
250.440	Education Programs
250.450	Personnel Health Requirements
250.460	Benefits

SUBPART E: LABORATORY

Section

250.510	Laboratory Services
250.520	Blood and Blood Components
250.525	Designated Blood Donor Program
250.530	Proficiency Survey Program (Repealed)
250.540	Laboratory Personnel (Repealed)
250.550	Western Blot Assay Testing Procedures (Repealed)

SUBPART F: RADIOLOGICAL SERVICES

Section

250.610	General Diagnostic Procedures and Treatments
250.620	Radioactive Isotopes
250.630	General Policies and Procedures Manual

SUBPART G: GENERAL HOSPITAL EMERGENCY SERVICE

Section

250.710	Classification of Emergency Services
250.720	General Requirements
250.725	Notification of Emergency Personnel
250.730	Community or Areawide Planning
250.740	Disaster and Mass Casualty Program
250.750	Emergency Services for Sexual Assault Victims

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SUBPART H: RESTORATIVE AND REHABILITATION SERVICES

Section	
250.810	Applicability of Other Parts of These Requirements
250.820	General
250.830	Classifications of Restorative and Rehabilitation Services
250.840	General Requirements for all Classifications
250.850	Specific Requirements for Comprehensive Physical Rehabilitation Services
250.860	Medical Direction
250.870	Nursing Care
250.880	Additional Allied Health Services
250.890	Animal-Assisted Therapy

SUBPART I: NURSING SERVICE AND ADMINISTRATION

Section	
250.910	Nursing Services
250.920	Organizational Plan
250.930	Role in hospital planning
250.940	Job descriptions
250.950	Nursing committees
250.960	Specialized nursing services
250.970	Nursing Care Plans
250.980	Nursing Records and Reports
250.990	Unusual Incidents
250.1000	Meetings
250.1010	Education Programs
250.1020	Licensure
250.1030	Policies and Procedures
250.1035	Domestic Violence Standards
250.1040	Patient Care Units
250.1050	Equipment for Bedside Care
250.1060	Drug Services on Patient Unit
250.1070	Care of Patients
250.1075	Use of Restraints
250.1080	Admission Procedures Affecting Care
250.1090	Sterilization and Processing of Supplies
250.1100	Infection Control

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250.1110 Mandatory Overtime Prohibition
250.1120 Staffing Levels
250.1130 Nurse Staffing by Patient Acuity

SUBPART J: SURGICAL AND RECOVERY ROOM SERVICES

Section
250.1210 Surgery
250.1220 Surgery Staff
250.1230 Policies & Procedures
250.1240 Surgical Privileges
250.1250 Surgical Emergency Care
250.1260 Operating Room Register and Records
250.1270 Surgical Patients
250.1280 Equipment
250.1290 Safety
250.1300 Operating Room
250.1305 Visitors in Operating Room
250.1310 Cleaning of Operating Room
250.1320 Postoperative Recovery Facilities

SUBPART K: ANESTHESIA SERVICES

Section
250.1410 Anesthesia Service

SUBPART L: RECORDS AND REPORTS

Section
250.1510 Medical Records
250.1520 Reports

SUBPART M: FOOD SERVICE

Section
250.1610 Dietary Department Administration
250.1620 Facilities
250.1630 Menus and Nutritional Adequacy
250.1640 Diet Orders

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250.1650	Frequency of Meals
250.1660	Therapeutic (Modified) Diets
250.1670	Food Preparation and Service
250.1680	Sanitation

SUBPART N: HOUSEKEEPING AND LAUNDRY SERVICES

Section	
250.1710	Housekeeping
250.1720	Garbage, Refuse and Solid Waste Handling and Disposal
250.1730	Insect and Rodent Control
250.1740	Laundry Service
250.1750	Soiled Linen
250.1760	Clean Linen

SUBPART O: MATERNITY AND NEONATAL SERVICE

Section	
250.1810	Applicability of other Parts of these regulations
250.1820	Maternity and Neonatal Service (Perinatal Service)
250.1830	General Requirements for All Maternity Departments
250.1840	Discharge of Newborn Infants from Hospital
250.1850	Rooming-In Care of Mother and Infant
250.1860	Special Programs
250.1870	Single Room Maternity Care

SUBPART P: ENGINEERING AND MAINTENANCE OF THE PHYSICAL PLANT, SITE, EQUIPMENT, AND SYSTEMS – HEATING, COOLING, ELECTRICAL, VENTILATION, PLUMBING, WATER, SEWER, AND SOLID WASTE DISPOSAL

Section	
250.1910	Maintenance
250.1920	Emergency electric service
250.1930	Water Supply
250.1940	Ventilation, Heating, Air Conditioning, and Air Changing Systems
250.1950	Grounds and Buildings Shall be Maintained
250.1960	Sewage, Garbage, Solid Waste Handling and Disposal
250.1970	Plumbing
250.1980	Fire and Safety

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SUBPART Q: CHRONIC DISEASE HOSPITALS

Section	
250.2010	Definition
250.2020	Requirements

SUBPART R: PHARMACY OR DRUG AND MEDICINE SERVICE

Section	
250.2110	Service Requirements
250.2120	Personnel Required
250.2130	Facilities for Services
250.2140	Pharmacy and Therapeutics Committee

SUBPART S: PSYCHIATRIC SERVICES

Section	
250.2210	Applicability of other Parts of these Regulations
250.2220	Establishment of a Psychiatric Service
250.2230	The Medical Staff
250.2240	Nursing Service
250.2250	Allied Health Personnel
250.2260	Staff and Personnel Development and Training
250.2270	Admission, Transfer and Discharge Procedures
250.2280	Care of Patients
250.2290	Special Medical Record Requirements for Psychiatric Hospitals and Psychiatric Units of General Hospitals or General Hospitals Providing Psychiatric Care
250.2300	Diagnostic, Treatment and Physical Facilities and Services

SUBPART T: DESIGN AND CONSTRUCTION STANDARDS

Section	
250.2410	Applicability of these Standards
250.2420	Submission of Plans for New Construction, Alterations or Additions to Existing Facility
250.2430	Preparation of Drawings and Specifications – Submission Requirements
250.2440	General Hospital Standards
250.2442	Fees

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250.2443	Advisory Committee
250.2450	Details
250.2460	Finishes
250.2470	Structural
250.2480	Mechanical
250.2490	Plumbing and Other Piping Systems
250.2500	Electrical Requirements

SUBPART U: CONSTRUCTION REQUIREMENTSSTANDARDS FOR EXISTING HOSPITALS

Section	
250.2610	Applicability of <u>Subpart U</u> <u>these Standards</u>
250.2620	Codes and Standards
250.2630	Existing General Hospital <u>Requirements</u> <u>Standards</u>
250.2640	Details
250.2650	Finishes
250.2660	Mechanical
250.2670	Plumbing and Other Piping Systems
250.2680	Electrical Requirements

SUBPART V: SPECIAL CARE AND/OR SPECIAL SERVICE UNITS

Section	
250.2710	Special Care and/or Special Service Units
250.2720	Day Care for Mildly Ill Children

SUBPART W: ALCOHOLISM AND INTOXICATION TREATMENT SERVICES

Section	
250.2810	Applicability of Other Parts of These Requirements
250.2820	Establishment of an Alcoholism and Intoxication Treatment Service
250.2830	Classification and Definitions of Service and Programs
250.2840	General Requirements for all Hospital Alcoholism Program Classifications
250.2850	The Medical and Professional Staff
250.2860	Medical Records
250.2870	Referral
250.2880	Client Legal and Human Rights

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250.APPENDIX A	Codes and Standards (Repealed)
250.EXHIBIT A	Codes (Repealed)
250.EXHIBIT B	Standards (Repealed)
250.EXHIBIT C	Addresses of Sources (Repealed)
250.ILLUSTRATION A	Seismic Zone Map
250.TABLE A	Measurements Essential for Level I, II, III Hospitals
250.TABLE B	Sound Transmission Limitations in General Hospitals
250.TABLE C	Filter Efficiencies for Central Ventilation and Air Conditioning Systems in General Hospitals (Repealed)
250.TABLE D	General Pressure Relationships and Ventilation of Certain Hospital Areas (Repealed)
250.TABLE E	Piping Locations for Oxygen, Vacuum and Medical Compressed Air
250.TABLE F	General Pressure Relationships and Ventilation of Certain Hospital Areas
250.TABLE G	Insulation/Building Perimeter

AUTHORITY: Implementing and authorized by the Hospital Licensing Act [210 ILCS 85].

SOURCE: Rules repealed and new rules adopted August 27, 1978; emergency amendment at 2 Ill. Reg. 31, p. 73, effective July 24, 1978, for a maximum of 150 days; amended at 2 Ill. Reg. 21, p. 49, effective May 16, 1978; emergency amendment at 2 Ill. Reg. 31, p. 73, effective July 24, 1978, for a maximum of 150 days; amended at 2 Ill. Reg. 45, p. 85, effective November 6, 1978; amended at 3 Ill. Reg. 17, p. 88, effective April 22, 1979; amended at 4 Ill. Reg. 22, p. 233, effective May 20, 1980; amended at 4 Ill. Reg. 25, p. 138, effective June 6, 1980; amended at 5 Ill. Reg. 507, effective December 29, 1980; amended at 6 Ill. Reg. 575, effective December 30, 1981; amended at 6 Ill. Reg. 1655, effective January 27, 1982; amended at 6 Ill. Reg. 3296, effective March 15, 1982; amended at 6 Ill. Reg. 7835 and 7838, effective June 17, 1982; amended at 7 Ill. Reg. 962, effective January 6, 1983; amended at 7 Ill. Reg. 5218 and 5221, effective April 4, 1983 and April 5, 1983; amended at 7 Ill. Reg. 6964, effective May 17, 1983; amended at 7 Ill. Reg. 8546, effective July 12, 1983; amended at 7 Ill. Reg. 9610, effective August 2, 1983; codified at 8 Ill. Reg. 19752; amended at 8 Ill. Reg. 24148, effective November 29, 1984; amended at 9 Ill. Reg. 4802, effective April 1, 1985; amended at 10 Ill. Reg. 11931, effective September 1, 1986; amended at 11 Ill. Reg. 10283, effective July 1, 1987; amended at 11 Ill. Reg. 10642, effective July 1, 1987; amended at 12 Ill. Reg. 15080, effective October 1, 1988; amended at 12 Ill. Reg. 16760, effective October 1, 1988; amended at 13 Ill. Reg. 13232, effective September 1, 1989; amended at 14 Ill. Reg. 2342, effective February 15, 1990; amended at 14 Ill. Reg. 13824, effective September 1, 1990; amended at 15 Ill. Reg. 5328, effective May 1, 1991; amended at 15 Ill. Reg. 13811, effective October 1, 1991; amended at 17 Ill. Reg. 1614, effective January 25, 1993; amended at 17 Ill. Reg. 17225, effective October 1, 1993; amended at 18 Ill. Reg. 11945, effective July 22, 1994; amended at 18 Ill. Reg. 15390,

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effective October 10, 1994; amended at 19 Ill. Reg. 13355, effective September 15, 1995; emergency amendment at 20 Ill. Reg. 474, effective January 1, 1996, for a maximum of 150 days; emergency expired May 29, 1996; amended at 20 Ill. Reg. 3234, effective February 15, 1996; amended at 20 Ill. Reg. 10009, effective July 15, 1996; amended at 22 Ill. Reg. 3932, effective February 13, 1998; amended at 22 Ill. Reg. 9342, effective May 20, 1998; amended at 23 Ill. Reg. 1007, effective January 15, 1999; emergency amendment at 23 Ill. Reg. 3508, effective March 4, 1999, for a maximum of 150 days; amended at 23 Ill. Reg. 9513, effective August 1, 1999; amended at 23 Ill. Reg. 13913, effective November 15, 1999; amended at 24 Ill. Reg. 6572, effective April 11, 2000; amended at 24 Ill. Reg. 17196, effective November 1, 2000; amended at 25 Ill. Reg. 3241, effective February 15, 2001; amended at 27 Ill. Reg. 1547, effective January 15, 2003; amended at 27 Ill. Reg. 13467, effective July 25, 2003; amended at 28 Ill. Reg. 5880, effective March 29, 2004; amended at 28 Ill. Reg. 6579, effective April 15, 2004; amended at 29 Ill. Reg. 12489, effective July 27, 2005; amended at 31 Ill. Reg. 4245, effective February 20, 2007; amended at 31 Ill. Reg. 14530, effective October 3, 2007; amended at 32 Ill. Reg. 3756, effective February 27, 2008; amended at 32 Ill. Reg. 4213, effective March 10, 2008; amended at 32 Ill. Reg. 7932, effective May 12, 2008; amended at 32 Ill. Reg. 14336, effective August 12, 2008; amended at 33 Ill. Reg. 8306, effective June 2, 2009; amended at 34 Ill. Reg. 2528, effective January 27, 2010; amended at 34 Ill. Reg. 3331, effective February 24, 2010; amended at 34 Ill. Reg. 19031, effective November 17, 2010; amended at 34 Ill. Reg. 19158, effective November 23, 2010; amended at 35 Ill. Reg. 4556, effective March 4, 2011; amended at 35 Ill. Reg. 6386, effective March 31, 2011.

SUBPART A: GENERAL

Section 250.160 Incorporated and Referenced Materials

- a) The following regulations and standards are incorporated in this Part:
 - 1) Private and professional association standards:
 - A) American Society for Testing and Materials (ASTM), Standard No. E90-99 (2002): Standard Test Method for Laboratory Measurement of Airborne Sound Transmission Loss of Building Partitions and Elements, which may be obtained from the American Society for Testing and Materials, 100 Barr Harbor Drive, West Conshohocken, Pennsylvania 19428-2959. (See Section 250.2420.)
 - B) The following standards of the American Society of Heating,

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Refrigerating, and Air Conditioning Engineers (ASHRAE), which may be obtained from the American Society of Heating, Refrigerating, and Air-Conditioning Engineers, Inc., 1791 Tullie Circle, N.E., Atlanta, Georgia 30329: (See Section 250.2480.)

- i) ASHRAE Handbook of Fundamentals (2005);
- ii) ASHRAE Handbook for HVAC Systems and Equipment (2004);
- iii) ASHRAE Handbook-HVAC Applications (2003).

C) The following standards of the National Fire Protection Association (NFPA), which may be obtained from the National Fire Protection Association, 1 Batterymarch Park, Quincy, Massachusetts 02169:

- i) NFPA No.101 (2000): Life Safety Code; (See Sections 250.2420, 250.2450, 250.2460, 250.2470, and 250.2490.)
- ii) NFPA No.10 (1998): Standards for Portable Fire Extinguishers; (See Section 250.1980.)
- iii) NFPA No.13 (1999): Standards for the Installation of Sprinkler Systems; (See Sections 250.2490 and 250.2670.)
- iv) NFPA No.14 (2000): Standard for the Installation of Standpipe, Private Hydrants and Hose Systems; (See Sections 250.2490 and 250.2670.)
- v) NFPA No.25 (1998): Standard for the Inspection, Testing and Maintenance of Water-Based Fire Protection Systems;
- vi) NFPA No.30 (1996): Flammable and Combustible Liquids Code; (See Section 250.1980.)
- vii) NFPA No.45 (1996): Standard on Fire Protection for Laboratories Using Chemicals;

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- | viii) NFPA No. 54 (1999): National Fuel Gas Code;
- | ix) NFPA No. 70 (1999): National Electrical Code; (See Sections 250.2440 and 250.2500.)
- | x) NFPA No. 72 (1999): National Fire Alarm Code;
- | xi) NFPA No. 80 (1999): Standard for Fire Doors and Fire Windows; (See Section 250.2450.)
- | xii) NFPA No. 82 (1999): Standard on Incinerators and Waste and Linen Handling Systems and Equipment; (See Section 250.2440.)
- | xiii) NFPA No. 90A (1999): Standard for Installation of Air Conditioning and Ventilating Systems; (See Sections 250.2480 and 250.2660.)
- | xiv) NFPA No. 96 (1998): Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations; (See Section 250.2660.)
- | xv) NFPA No. 99 (1999): Standard for Health Care Facilities; (See Sections 250.1410, 250.1910, 250.1980, 250.2460, 250.2480, 250.2490 and 250.2660.)
- | xvi) NFPA No. 101-A (2001): Guide on Alternative Approaches to Life Safety; (See Section 250.2620.)
- | xvii) NFPA No. 110 (1999): Standard for Emergency and Standby Power Systems;
- | xviii) NFPA No. 220 (1999): Standard on Types of Building Construction; (See Sections 250.2470 and 250.2620.)
- | xix) NFPA No. 221 (1997): Standard for Fire Walls and Fire Barrier Walls;
- | xx) NFPA No. 241 (1996): Standard for Safeguarding

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- | xxii) **NFPA No.** 255 and 258 (2000): Standard Method of Test of Surface Burning Characteristics of Building Materials, and Recommended Practice for Determining Smoke Generation of Solid Materials; (See Section 250.2480.)
- | xxii) **NFPA No.** 701 (1999): Standard Methods of Fire Tests for Flame Propagation of Textiles and Films. (See Sections 250.2460 and 250.2650.)

- D) American Academy of Pediatrics and American College of Obstetricians and Gynecologists, Guidelines for Perinatal Care, Sixth Edition (2007), which may be obtained from the American College of Obstetricians and Gynecologists Distribution Center, P.O. Box 933104, Atlanta, Georgia 31193-3104 (800-762-2264). (See Section 250.1820.)
- E) American College of Obstetricians and Gynecologists, Guidelines for Women's Healthcare, Third Edition (2007), which may be obtained from the American College of Obstetricians and Gynecologists Distribution Center, P.O. Box 933104, Atlanta, Georgia 31193-3104 (800-762-2264). (See Section 250.1820.)
- F) National Council on Radiation Protection and Measurements (NCRP), Report **No.** 49: Structural Shielding Design and Evaluation for Medical Use of X-rays and Gamma Rays of Energies up to 10 MeV (1976) and NCRP Report **No.** 102: Medical X-Ray, Electron Beam and Gamma-Ray Protection for Energies Up to 50 MeV (Equipment Design, Performance and Use) (1989), which may be obtained from the National Council on Radiation Protection and Measurements, 7910 Woodmont Ave., Suite 800, Bethesda, Maryland 20814-3095. (See Sections 250.2440 and 250.2450.)
- G) DOD Penetration Test Method MIL STD **No.** 282 (1995): Filter Units, Protective Clothing, Gas-mask Components and Related Products: Performance Test Methods, which may be obtained from Naval Publications and Form Center, 5801 Tabor Avenue,

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Philadelphia, Pennsylvania 19120. (See Section 250.2480.)

- H) National Association of Plumbing-Heating-Cooling Contractors (PHCC), National Standard Plumbing Code (2003), which may be obtained from the National Association of Plumbing-Heating-Cooling Contractors, 180 S. Washington Street, P.O. Box 6808, Falls Church, Virginia 22046 (703-237-8100).
- I) The International Code Council, International Building Code (2000), which may be obtained from the International Code Council, 4051 Flossmoor Road, Country Club Hills, Illinois 60477-5795. (See Section 250.2420.)
- J) American National Standards Institute, Specifications for Making Buildings and Facilities Accessible to, and Usable by, the Physically Handicapped (1968), which may be obtained from the American National Standards Institute, 25 West 433rd Street, 4th Floor, New York, New York 10036. (See Section 250.2420.)
- K) Accreditation Council for Graduate Medical Education, Essentials of Accredited Residencies in Graduate Medical Education (1997), which may be obtained from the Accreditation Council for Graduate Medical Education, 515 North State Street, Suite 2000, Chicago, Illinois 60610. (See Section 250.315.)
- L) Joint Commission on Accreditation of Healthcare Organizations, 2006 Hospital Accreditation Standards (HAS), Standard PC.3.10, which may be obtained from the Joint Commission on Accreditation of Healthcare Organizations, One Renaissance Boulevard, Oakbrook Terrace, Illinois 60181. (See Section 250.1035.)
- M) National Quality Forum, Safe Practices for Better Health Care (2009), which may be obtained from the National Quality Forum, 601 13th Street, NW, Suite 500 North, Washington DC 20005, or from www.qualityforum.org.

2) Federal Government Publications:

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- A) Department of Health and Human Services, United States Public Health Service, Centers for Disease Control and Prevention, "Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings 2007" and "Guidelines for Infection Control in Health Care Personnel, 1998, which may be obtained from National Technical Information Service (NTIS), U.S. Department of Commerce, 5285 Port Royal Road, Springfield, Virginia 22161. (See Section 250.1100.)
- B) Department of Health and Human Services, United States Public Health Service, Centers for Disease Control and Prevention, "Guidelines for Environmental Infection Control in Health-Care Facilities: Recommendations – Animals in Health Care Facilities", "Morbidity and Mortality Weekly Report", June 6, 2003/Vol. 52/No. RR-10, which may be obtained from the Centers for Disease Control and Prevention, 1600 Clifton Road, MS K-95, Atlanta, Georgia 30333.
- C) Department of Health and Human Services, United States Public Health Services, Centers for Disease Control and Prevention, "Guidelines for Hand Hygiene in Health-Care Settings", October 25, 2002, which may be obtained from the National Technical Information Services (NTIS), U.S. Department of Commerce, 5285 Port Royal Road, Springfield, Virginia 22161.
- D) Department of Health and Human Services, United States Public Health Service, Centers for Disease Control and Prevention, "Guidelines for Disinfection and Sterilization in Healthcare Facilities, 2008", which may be obtained from the Centers for Disease Control and Prevention, 1600 Clifton Road, Atlanta, Georgia 30333.

- b) All incorporations by reference of federal regulations and guidelines and the standards of nationally recognized organizations refer to the regulations, guidelines and standards on the date specified and do not include any editions or amendments subsequent to the date specified.
- c) The following statutes and State regulations are referenced in this Part:

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- 1) State of Illinois statutes:
 - A) Hospital Licensing Act [210 ILCS 85].
 - B) Illinois Health Facilities Planning Act [20 ILCS 3960].
 - C) Medical Practice Act of 1987 [225 ILCS 60].
 - D) Podiatric Medical Practice Act of 1987 [225 ILCS 100].
 - E) Pharmacy Practice Act of 1987 [225 ILCS 85].
 - F) Physicians Assistant Practice Act of 1987 [225 ILCS 95].
 - G) Illinois Clinical Laboratory and Blood Bank Act [210 ILCS 25].
 - H) X-ray Retention Act [210 ILCS 90].
 - I) Safety Glazing Materials Act [430 ILCS 60].
 - J) Mental Health and Developmental Disabilities Code [405 ILCS 5].
 - K) Nurse Practice Act [225 ILCS 65].
 - L) Health Care Worker Background Check Act [225 ILCS 46].
 - M) MRSA Screening and Reporting Act [210 ILCS 83].
 - N) Hospital Report Card Act [210 ILCS 88].
 - O) Illinois Adverse Health Care Events Reporting Law of 2005 [410 ILCS 522].
 - P) Smoke Free Illinois Act [410 ILCS 82].
- 2) State of Illinois rules:
 - A) Department of Public Health, Illinois Plumbing Code (77 Ill. Adm. Code 890).

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- B) Department of Public Health, Sexual Assault Survivors Emergency Treatment Code (77 Ill. Adm. Code 545).
- C) Department of Public Health, Control of Communicable Diseases Code (77 Ill. Adm. Code 690).
- D) Department of Public Health, Food Service Sanitation Code (77 Ill. Adm. Code 750).
- E) Department of Public Health, Public Area Sanitary Practice Code (77 Ill. Adm. Code 895).
- F) Department of Public Health, Maternal Death Review (77 Ill. Adm. Code 657).
- G) Department of Public Health, Control of Sexually Transmissible Diseases Code (77 Ill. Adm. Code 693).
- H) Department of Public Health, Control of Tuberculosis Code (77 Ill. Adm. Code 696).
- I) Department of Public Health, Health Care Worker Background Check Code (77 Ill. Adm. Code 955).
- J) Department of Public Health, Language Assistance Services Code (77 Ill. Adm. Code 940).
- K) [Department of Public Health, Private Sewage Disposal Code \(7 Ill. Adm. Code 905\).](#)
- L)K) Capital Development Board, Illinois Accessibility Code (71 Ill. Adm. Code 400).
- M)L) State Fire Marshal, Boiler and Pressure Vessel Safety (41 Ill. Adm. Code 120).
- N)M) State Fire Marshal, Fire Prevention and Safety (41 Ill. Adm. Code 100).

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- | O)N) Illinois Emergency Management Agency, Standards for Protection Against Radiation (32 Ill. Adm. Code 340).
- | P)O) Illinois Emergency Management Agency, Use of X-rays in the Healing Arts Including Medical, Dental, Podiatry, and Veterinary Medicine (32 Ill. Adm. Code 360).

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

SUBPART P: ENGINEERING AND MAINTENANCE OF THE PHYSICAL PLANT, SITE, EQUIPMENT, AND SYSTEMS – HEATING, COOLING, ELECTRICAL, VENTILATION, PLUMBING, WATER, SEWER, AND SOLID WASTE DISPOSAL

Section 250.1910 Maintenance

The hospital shall have~~There shall be~~ an organized engineering and/or maintenance department under competent supervision. The requirements of NFPA Standard No. 99-~~(1993)~~, "Health Care Facilities Code," shall apply in addition to the following:

- | a) The administrator shall be responsible~~Responsibility~~ for maintenance of the physical plant site, equipment and systems ~~and shall be vested in the administrator~~ ~~who~~ may delegate responsibility to the proper employees. Maintenance services shall be under the supervision of a qualified engineer or persons who have had commensurate experience in the maintenance of public or private plants, preferably hospitals.
- | b) Personnel engaged in maintenance activities shall receive orientation and follow-up training, including training in principles of asepsis, cross-infection control, and safe practices.
- | c) The hospital shall have~~There shall be~~ an effective, organized, detailed preventive maintenance program. Written instructions for operating and maintaining equipment and the various mechanical, electrical, and other systems contained in the hospital shall be available to maintenance personnel.
- | d) Maintenance and repairs shall be carried out in accordance with applicable codes, rules, regulations, standards and requirements of local jurisdictions, the State Fire Marshal, and the Department of Public Health.

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- e) Space and equipment shall be provided for the managerial activities of the supervisor of maintenance for repair work and for storage of maintenance materials. Paints~~The storage of paints~~ and oils shall not be stored in patient areas ~~shall not be permitted~~.
- f) The hospital structure and its component parts and facilities shall be kept in good repair and maintained with consideration for the safety and comfort of the occupants of the building. Mechanical and electrical equipment shall be maintained in good repair and operating condition at all times.
- g) Roads, walks, and parking areas shall be properly maintained. (Refer to Subpart T and Subpart U of this Part.)

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.1980 Fire and Safety

- a) Buildings and equipment shall be ~~so~~-maintained so as to prevent fire and other hazards to personal safety.
- b) Exits, stairways, doors, and corridors shall be kept free of obstructions.
- c) Flammable and combustible liquids shall be labeled, stored, handled and used in compliance with the requirements of NFPA the National Fire Protection Association (NFPA) Standard No. 30, "Flammable and Combustible Liquids Code."
- d) Flammable and non-flammable gases shall be labeled, handled, and used in compliance with the requirements of NFPA Standard No. 99-(1993), "Health Care Facilities Code." Separate storage for flammable and oxidizing gases shall be provided.
- e) A master fire plan, developed to suit the needs of the facility, and acceptable to the Department, shall be maintained.
- f) Fire regulations listing the fire stations, procedures, and staff emergency duties by title or position~~s~~ shall be posted conspicuously on each floor at appropriate locations, and shall be available in each unit, section~~s~~, and department.

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- g) Employees shall be trained in procedures to be followed in the master fire plan.
- h) Fire drills shall be conducted at irregular intervals at least 12 times per year. A record shall be kept of the staff performance and results, and indicated corrective measures shall be made.
- i) Portable fire extinguishers, provided in accordance with NFPA Standard No.10 (1990), "Installation of Portable Fire Extinguishers", shall be inspected at least annually, recharged or repaired as needed, and labeled with the dates of the last inspection.
- j) Sprinkler systems, fire hoses, fire detection and alarm devices, and other equipment for use in the fire safety program shall be connected and maintained in a fully functional condition at all times.
- k) Fire detection and protection systems shall be inspected no less than twice a year by a recognized competent authority. A written report of the inspection shall be kept on file at the hospital for at least three years following the date of inspection.
- l) The hospital shall maintain a procedure for reporting all accidents to patients, employees, or visitors to a designated administrative officer on a standard form adopted for that the purpose, all accidents to patients, staff employees, or visitors. The report shall include all pertinent information and shall be kept on file for not less than six years after the occurrence reported.
- m) The hospital shall maintain a procedure to investigate fires. A written report of the investigation containing all pertinent information shall be made. The report shall remain on file for not less than six years.

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

SUBPART T: DESIGN AND CONSTRUCTION STANDARDS

Section 250.2450 Details

- a) Compartmentation, exits, automatic extinguishing systems, and other details relating to fire prevention and fire protection shall comply with requirements listed in the appropriate sections of the NFPA 101 National Fire Protection

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| Association Standard 101 (1994), "Life Safety Code."

- b) Items such as drinking fountains, telephone booths, vending machines, and portable equipment shall be located so as not to restrict corridor traffic or reduce the corridor width below the required minimum.
- c) Doors
 - 1) Doors to patient rooms shall not be lockable from inside the room.
Hospitals shall have policies and procedures for readily gaining access to a locked bathroom in a patient's room. (Section 11.6 of the Act)
 - 2) Special Locking Arrangements: Electronic locking devices may be installed at specific locations to restrict egress or ingress for patient/staff safety or security, provided that each of the following is complied with and after receiving approval from the Department:
 - A) The facility shallmust submit a narrative to the Department providing a rationale for having a locked door in a required means of egress. The rationale shallmust relate to security issues.
 - B) The building shallmust be protected by a sprinkler or fire detection system approved by the Department.
 - C) All locking system components shallmust be U.L. listed.
 - D) Cross corridor, smoke, or control doors that are located in a required means of egress may only be secured only with electronic locks and automatic release devices. The use of only manual keys or tools only to unlock the door is not permitted.
 - E) Locked doors shallmust have continuous staff supervision (direct or electronic remote).
 - F) No other type of locking arrangement may be used in a required means of egress.
 - G) All locked doors shallmust release automatically with actuation of the fire alarm system.

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- H) All doors ~~shall must~~ release automatically with loss of electrical power to the locking device.
- I) All delayed egress locks ~~shall must~~ initiate an irreversible process that will release the lock within 15 seconds whenever a force of not more than 15 pounds is continuously applied to the release device (lever type handle or panic bar) for a period of not more than ~~three~~³ seconds. Relocking of such doors shall be by manual means only. Operation of the release device activates a sign in the vicinity of the door to assure those attempting to exit that the system is functional. Delays of up to 30 seconds may be acceptable based on the program narrative.
- J) Permanent signs ~~shall must~~ be posted on electronic locked doors that state the action required to open the door. Electronic delayed egress type doors shall state: "Push until alarm sounds. Door will be opened in 15 seconds." Sign letters ~~shall must~~ be at least ~~1~~^{one} inch high with 1/8-inch stroke. Signs may be omitted for security reasons based on the Department's review of the hospital's written rationale.
- K) Emergency lighting ~~shall must~~ be provided at all locked door locations.
- L) The local fire department ~~shall must~~ be fully apprised of locked doors or units and all related details of the system.
- M) Any discharge exit door may be locked against entry.
- N) Additional electronic release of locked doors initiated from a 24/7 staff duty station or an ADA compliant release device located within 5 feet of the door shall is to be provided. The duty station shall be located within the locked unit and staff shall be able to observe the door directly to by remote video.
- O) No more than two electronic locking devices~~one such device~~ may be installed in any path of travel to exit discharge, one of which may be delayed egress.

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P) Complete smoke detection shall be provided throughout the entire secured unit.

- d) The minimum width of all doors to rooms needing access for beds or stretchers shall be 3 feet, 8 inches~~3'8"~~. Doors to rooms needing access for wheelchairs shall have a minimum width of 2 feet, 10 inches~~2'10"~~.
- e) Doors on all openings between corridors and rooms or spaces subject to occupancy, except elevator doors, shall be swing type. Openings to showers, baths, patient toilets, and other small wet-type areas not subject to fire hazard are exempt from this requirement. Sliding doors with a break and swing feature are acceptable.
- f) Doors, except those to spaces such as small closets that which are not subject to occupancy, shall not swing into corridors in a manner that might obstruct traffic flow or reduce the required corridor width. (Large walk-in type closets are considered as occupiable spaces.)
- g) Windows shall be designed so that persons cannot accidentally fall out of them when they are open, or shall be provided with guards.
- h) Glazing
 - 1) Doors, sidelights, borrowed lights, and windows in which the glazing extends down to within 18 inches of the floor (thereby creating possibility of accidental breakage by pedestrian traffic) shall be glazed with safety glass or plastic glazing material that will resist breaking and will not create dangerous cutting edges when broken. Similar materials shall be used in wall openings or recreation rooms and exercise rooms. Safety glass or plastic glazing materials shall be used for shower doors and bath enclosures. Fire-rated glass shall be used where required for fire safety.
 - 2) Safety glass or plastic glazing materials as noted above shall be used in windows and doors in patient areas of psychiatric facilities, if required by the program. See the Safety Glazing Materials Act for other requirements.
- i) Where labeled fire doors are required, these shall be certified by an independent

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testing laboratory as meeting the construction requirements equal to those for fire doors in NFPA Standard No. 80, Standard for Fire Doors and Fire Windows, (1990), "Fire Doors and Windows." Reference to a labeled door includes labeled frame and hardware.

- j) Elevator shaft openings shall be Classclass B $1\frac{1}{2}$ -hour-labeled fire doors.
- k) Linen and refuse chutes shall meet or exceed the following requirements:
 - 1) Service openings to chutes shall not be located in corridors or passageways but shall be located in a room of construction having a fire-resistance of not less than one hour. Doors to such rooms shall be not less than Classclass C $\frac{3}{4}$ -hour-labeled doors.
 - 2) Service openings to chutes shall have approved self-closing Classclass B $1\frac{1}{2}$ -hour-labeled fire doors.
 - 3) The minimumMinimum cross-sectional dimension of gravity chutes shall be not less than 2 feet2'0".
 - 4) Chutes shall discharge directly into collection rooms separated from incinerator, laundry, or other services. Separate collection rooms shall be provided for trash and for linen. The enclosure construction for such rooms shall have a fire-resistance rating of not less than two hours, and the doors thereto shall be not less than Classclass B $1\frac{1}{2}$ -hour-labeled fire doors. External discharge containers need not be enclosed.
 - 5) Gravity chutes shall extend through the roof with provisions for continuous ventilation as well as for fire and smoke ventilation. Openings for fire and smoke ventilation shall have an effective area of not less than that of the chute cross-section and shall be not less than 4 feet4'0" above the roof and not less than 6 feet6'0" clear of other vertical surfaces. Fire and smoke ventilating openings may be covered with single strength sheet glass or stronger.
 - 6) See NFPA Standard No-82, Standard on Incinerators and Waste and Linen Handling System and Equipment(1990), "Incinerators and Rubbish Handling." for other requirements.

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- | l) Dumbwaiters, conveyors, and material-handling systems shall not open directly into a corridor or exitway but shall open into a room enclosed by construction having a fire-resistance rating of not less than one hour and provided with Classelass C $\frac{3}{4}$ -hour-labeled fire doors. Service entrance doors to vertical shafts containing dumbwaiters, conveyors, and material-handling systems shall be not less than Classelass B $1\frac{1}{2}$ -hour-labeled fire doors. Where horizontal conveyors and material-handling systems penetrate fire-rated walls or smoke partitions, such openings shall~~must~~ be provided with Classelass B $1\frac{1}{2}$ -hour-labeled fire doors for two-hour walls and Classelass C $\frac{3}{4}$ -hour-labeled fire doors for one-hour walls or partitions.
- | m) Thresholds and expansion joint covers shall be made flush with the floor surface to facilitate use of wheelchairs and carts.
- | n) Grab bars shall be provided at all patients' toilets, showers, tubs, and sitz baths. The bars shall have $1\frac{1}{2}$ -inch clearance to walls and shall have sufficient strength and anchorage to sustain a concentrated load of 250 pounds.
- | o) Recessed soap dishes shall be provided at showers and bathtubs.
- | p) Location and arrangement of hand-washing~~handwashing~~ facilities shall permit their proper use and operation. Particular care shall~~should~~ be given to the clearances required for blade-type operating handles.
- | q) Mirrors shall not be installed at hand-washing~~handwashing~~ fixtures in food preparation areas or in sensitive areas such as nurseries, clean and sterile supplies~~Nurseries, Clean and Sterile Supplies~~, and scrub sinks.
- | r) Paper towel dispensers and waste receptacles (or electric hand dryers) shall be provided at all hand-washing~~handwashing~~ facilities except scrub sinks.
- | s) Lavatories and hand-washing~~handwashing~~ facilities shall be securely anchored to withstand an applied vertical load of not less than 250 pounds on the front of the fixture.
- | t) Radiation protection requirements of X-ray and gamma ray installations shall conform with the National Council on Radiation Protection and Measurements (NCRP), Report No. 4934: Structural Shielding Design and Evaluation for Medical Use of X-rays and Gamma Rays of Energies up to 10 MeV (1976) and

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NCRP Report No. 102; Medical X-Ray, Electron Beam and Gamma-Ray Protection for Energies Up to 50 MeV (Equipment Design, Performance and Use)(1989). Provision shall be made for testing the completed installation. All and all defects shall~~must~~ be corrected before use.

- u) Ceiling heights shall be as follows:
 - 1) Boiler rooms shall have ceiling clearances not less than 2 feet, 6 inches~~2'6"~~ above the main boiler header and connecting piping.
 - 2) Radiographic, operating, and delivery rooms~~Operating and Delivery Rooms~~, and other rooms containing ceiling-mounted equipment or ceiling-mounted surgical light fixtures, shall have height required to accommodate the equipment or fixtures.
 - 3) All other rooms shall have not less than 8-foot8'0" ceilings, except that ceilings in corridors, storage rooms, toilet rooms, and other minor rooms shall be not less than 7 feet, 8 inches~~7'8"~~. Suspended tracks, rails, and pipes located in the path of normal traffic shall be not less than 6 feet, 8 inches~~6'8"~~ above the floor.
- v) Recreation rooms, exercise rooms~~Rooms, Exercise Rooms~~, and similar spaces where impact noises may be generated shall not be located directly over patient bed areas, or delivery or operating suites, unless special provisions are made to minimize such noise.
- w) Rooms containing heat-producing equipment (such as boiler or heater rooms and laundries~~Boiler or Heater Rooms and Laundries~~) shall be insulated and ventilated to prevent any floor surface above from exceeding a temperature of 10°F. (6°C.) above the ambient room temperature.
- x) Noise reduction criteria shown in Table B~~the following table~~ shall apply to partition, floor, and ceiling construction in patient areas. (See Section 250. Table B for sound transmission limitations in general hospitals.) (Table B is not~~Not~~ applicable to existing hospitals.)
- y) Elevators. All hospitals having patients' facilities (such as bedrooms, dining rooms, or recreation areas~~Bedrooms, Dining Rooms, or Recreation Areas~~) or critical services (such as operating, delivery, diagnostic, or therapy~~Operating,~~

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| **Delivery, Diagnostic, or Therapy**) located on other than the main entrance floor shall have electric or electrohydraulic elevators.

- 1) Number of Elevators
 - A) At least one hospital-type elevator shall be installed where 1 to 59 patient beds are located on any floor other than the main entrance floor.
 - B) At least two hospital-type elevators shall be installed where 60 to 200 patient beds are located on floors other than the main entrance floor, or where the **major** inpatient services are located on a floor other than those containing patient beds. (Elevator service may be reduced for **other**~~those~~ floors **which provide only partial inpatient services**.)
 - C) At least three hospital-type elevators shall be installed where 201 to 350 patient beds are located on floors other than the main entrance floor, or where the major inpatient services are located on a floor other than those containing patient beds. (Elevator service may be reduced for those floors which provide only partial inpatient services.)
 - D) For hospitals with more than 350 beds, the number of elevators shall be determined from a study of the hospital plan and the estimated vertical transportation requirements.
- 2) Cars and Platforms. Cars of hospital-type elevators shall have dimensions that will accommodate a patient bed and attendants and shall be at least **5 feet, 8 inches by 7 feet, 6 inches**~~5'8" x 7'6"~~. The car door shall have a clear opening of not less than **3 feet, 8 inches**~~3'8"~~.
- 3) Leveling. Elevators shall be equipped with an automatic leveling device of the two-way automatic maintaining type with an accuracy of $+1/2$ inch.
- 4) Operation. Elevators, except freight elevators, shall be equipped with a two-way special service key~~o~~-operated switch to permit cars to bypass all landing button calls and be dispatched directly to any floor.

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- 5) Elevator controls, alarm buttons, and telephones shall be accessible to physically handicapped.
- 6) Elevator call buttons, controls, and door safety stops shall be of a type that will not be activated by heat or smoke.
- 7) Inspections and tests shall be made and written certification shall be furnished that the installation meets the requirements set forth in this Section and all applicable [NFPA and local safety regulations and](#) codes.

z) Provisions for Natural Disasters

- 1) General Requirements. An emergency radio communication system is desirable in each facility. If installed, this system shall be self-sufficient in a time of emergency and shall also be linked with the available community system and state emergency medical network system, including connections with police, fire, and civil defense systemssystem.
- 2) Earthquakes. In regions where local experience shows that earthquakes have caused loss of life or extensive property damage, buildings and structures shall be designed to withstand the force assumptions specified in the International Building Code~~BOCA National Building Code~~. Seismic zones are identified on the map ~~on~~ shown in Section 250. Illustration A.
- 3) Tornadoes and Floods. Special provisions shall be made in the design of buildings in regions where local experience shows loss of life or damage to buildings resulting from tornadoes or floods.

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2460 Finishes

- a) Cubicle and window curtains and draperies shall be noncombustible or rendered flame retardant and shall pass both the large and small scale tests of NFPA National Fire Protection Association Standard No. 701, Standard Methods of Fire Tests for Flame Propagation of Textiles and Films, "Fire Tests for Flame-Resistant Textiles and Films."

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- b) Flame spread and smoke developed ratings of finishes shall be in accordance with NFPA Standard No.101, "Life Safety Code."
- c) Floors in areas and rooms in which flammable anesthetic agents are stored or administered to patients shall comply with NFPA Standard No.99, Standard for Health Care Facilities."Health Care Facilities Code." Conductive flooring may be omitted from emergency treatment, operating, and delivery rooms provided that a written resolution is signed by the hospital governing board stating that no flammable anesthetic agents will be used in these areas, and provided that appropriate notices are permanently and conspicuously affixed to the wall in each such area and room.
- d) Floor materials shall be easily cleanable and have wear resistance appropriate for the location involved. Floors in areas used for food preparation or food assembly shall be water resistant~~waterresistant~~ and greaseproof. Joints in tile and similar material in such areas shall be resistant to food acids. Floors in toilets, baths, janitor's closets, and similar areas shall be water resistant. In all areas frequently subject to wet cleaning methods, floor materials shall not be physically affected by germicidal and cleaning solutions.
- e) Wall bases in kitchens, operating and delivery rooms, soiled work rooms, and other areas that are frequently subject to wet cleaning methods shall be made integral and coved with the floor, tightly sealed to the wall, and constructed without surface voids that can harbor vermin.
- f) All wall finishes shall be washable and, in the immediate area of plumbing fixtures, shall be smooth and moisture resistant. Walls in surgery, delivery, kitchens and in other spaces subject to frequent cleaning shall have finishes that are smooth, sanitary, washable, and capable of withstanding treatment with harsh chemicals. The finishes shall be capable of being thoroughly cleaned, including concealed spaces~~be of suitable materials.~~
- g) Floor and wall penetrations by pipes, ducts, and conduits shall be tightly sealed to minimize entry of vermin, smoke, and fire. Joints of structural elements shall be similarly sealed.
- h) Ceilings shall be cleanable and shall meet the following criteria:
 - 1) Unrestricted general access~~Those finishes in unrestricted~~ areas such as

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patient rooms, corridors, ~~offices~~office, and waiting areas ~~are general access areas and~~ may have non-restricted acoustical ceilings installed.

- 2) ~~Ceilings~~Those finishes in wet areas subject to frequent cleaning such as shower rooms, ~~and~~ toilet rooms, and dietary units shall have finishes that are smooth, sanitary, washable, and capable of withstanding treatment with harsh chemicals. The finishes ~~shall~~must be capable of being thoroughly cleaned, including any concealed spaces that may be present.
- 3) Food preparation areas subject to frequent cleaning shall have ceiling finishes that are smooth, sanitary, washable, and capable of withstanding treatment with harsh chemicals.
- 4) ~~Ceiling~~Ceilings finishes in areas such as clean corridors, central sterile supply spaces, specialized radiographic rooms, and minor surgical procedure rooms ~~shall~~must be smooth, scrubbable, non-absorptive, non-perforated, capable of withstanding cleaning with harsh chemicals, and without crevices that can harbor mold and bacterial growth. If a lay-in ceiling is provided, it shall be designed to prevent the passage of particles from the cavity above the ceiling plane into the semi-restricted environment. Perforated, regular, serrated, cut, or highly textured tiles are not acceptable.
- 5) Ceiling finishes in areas such as operating rooms and other rooms where open wounds are present shall be monolithic, scrubbable, and capable of withstanding harsh chemicals. Cracks or perforations in these ceilings are not allowed.
 - i) The following areas shall have acoustical ceilings:
 - 1) Corridors in patient areas;
 - 2) Nurses' stations;
 - 3) Labor rooms;
 - 4) Day rooms;
 - 5) Recreation rooms;

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- 6) Dining areas; and
- 7) Waiting areas.

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2470 Structural

- a) In addition to compliance with ~~the standards set forth in~~ this Subpart, all applicable local or State building codes and regulations ~~shall~~must be observed.
- b) The buildings and all parts thereof shall be of sufficient strength to support all dead, live, and lateral loads without exceeding the working stresses permitted for the materials of their construction in generally accepted good engineering practice.
- c) Special provision shall be made for machines or apparatus loads that would cause a greater load than the specified minimum live load.
- d) Consideration shall be given to structural members and connections of structures that may be subject to earthquakes or tornadoes. (See Section 250.2450(z).) Floor areas where partition locations are subject to change shall be designed to support, for the partition, a uniformly distributed load of 25 p.s.f.
- e) Construction. Construction shall be in accordance with the requirements of ~~NFPA National Fire Protection Association Standard No. 101, (2000)~~: "Life Safety Code," and the minimum requirements contained in this subsection (e).
 - 1) Foundations shall rest on natural solid ground and shall be carried to a depth of not less than ~~one~~ foot below the estimated frost line or shall rest on leveled rock or load-bearing piles or caissons when solid ground is not encountered. Footings, piers, and foundation walls shall be adequately protected against deterioration from the action of ground water. Test borings shall be taken to establish proper soil-bearing values for the soil at the building site.
 - 2) Assumed live loads shall be in accordance with the ~~BOCA~~ International Building Code.

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3) All hospitals of any height shall be of Type I or Type II construction as established by NFPA 101, Life Safety Code, (2000) and NFPA 220, Standard on Types of Building Construction(1999).

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2480 Mechanical

a) General

1) Mechanical systems shall be tested, balanced, and operated to demonstrate that the installation and performance of these systems conform to the requirements of the plans and specifications.

2) Upon completion of the contract, the owner shall obtain a complete set of manufacturer's manufacturers installation, operating, maintenance, and preventive maintenance instructions, and a parts list with numbers and a description for each piece of equipment. The owner shall also obtain instruction in the operational use of the systems and equipment as required.

b) Thermal and Acoustical Insulation

1) Insulation shall be provided for the following thatwhich are located within the building:

A) Boilers, smoke breeching, and stacks.

B) Steam supply and condensate return piping.

C) Hot water piping above 120° F and all hot water heaters, generators, and converters. Exposed hot water supplies to fixtures need not be insulated except where exposed to contact by the physically handicapped.

D) Chilled water, refrigerant, other process piping, and equipment operating with fluid temperatures below ambient dew point.

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- E) Water supply, storm, and drainage piping on which condensation may occur.
 - F) Air ducts and casings with outside surface temperature below ambient dew point.
 - G) Other piping, ducts, and equipment as necessary to maintain the efficiency of the system.
- 2) Insulation on cold surfaces shall include an exterior vapor barrier.
- 3) Insulation, including finishes and adhesives on exterior surfaces of ducts and equipment, shall have a flame spread rating of 25 or less and a smoke developed rating of 50 or less as determined by an independent testing laboratory in accordance with NFPA-~~Standard No.~~ 255-(1990), "Standard Method of Test of Surface Burning Characteristics of Building Materials. Material."

 - A) Pipe insulation shall have a flame spread rating of 25 or less and a smoke developed rating of 150 or less.
 - B) All construction exposed to air flow in air distribution plenums shall have a flame spread rating of 25 or less and a smoke developed rating of 50 or less.

- 4) No duct linings shall be permitted downstream of the 90% filters serving areas requiring 90% filtration.

c) Steam and Hot Water Systems

- 1) Boilers shall have the capacity to supply the normal requirements of all systems and equipment. The number and arrangement of boilers shall be such that when one boiler breaks down or is temporarily taken out of service, the capacity of the remaining boilers~~boiler(s)~~ shall be sufficient to provide hot water service for clinical, dietary, and patient use; steam for sterilization and dietary purposes; heating for surgery, delivery, labor, recovery, intensive care, nursery, and general patient rooms.
- 2) Boiler feed pumps, heating circulating pumps, condensate return pumps

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and fuel oil pumps shall be connected and installed to provide normal and standby service.

- 3) Supply and return mains and risers of cooling, heating, and process steam systems shall be valved to isolate the various sections of each system. Each piece of equipment shall be valved at supply and return ends.
- 4) Humidifiers used in conjunction with air handling systems shall be of the direct steam injection type.

d) Air Conditioning, Heating and Ventilating Systems

- 1) This Part is intended~~It is the intent of these regulations~~ to provide a comfortable, clean, controlled environment for the hospital by employing the most economical and energy efficient systems consistent with these minimum requirements.
 - A) The minimum requirements as set forth in this Part~~these regulations~~ in no way relieve the designer from providing system capacities and components as required to maintain control of air quality, odor, ventilation rates, space temperatures, and space humidity as set forth in this Part~~these regulations~~.
 - B) The design of air conditioning, heating and ventilation systems shall be based on no less than the recommended outdoor design conditions listed in the ASHRAE Handbook of Fundamentals (1981) for 99% occurrence (winter~~Winter~~) and 1% occurrence (summer~~Summer~~).
- 2) Ventilation Systems
 - A) Air handling systems shall conform to NFPA Standard No.~~Standard for (1989)~~ 90A, "Installation of Air Conditioning and Ventilating Systems."
 - B) Fire dampers, smoke dampers, and smoke control systems shall be constructed, located, and installed in accordance with the requirements of NFPA Standard No.~~Standard for (1989)~~ 90A, "Installation of Air Conditioning and Ventilating Systems."

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- C) Ducts thatwhich penetrate construction intended for x-ray or other ray protection shall ~~be protected to~~ preserve the effectiveness of the protection.
- D) Outdoor air intakes shall be located at least 15 feet from exhaust outlets of ventilation systems, combustion equipment stacks, medical/surgical vacuum systems, ~~or~~ plumbing vents, or from areas thatwhich may collect vehicular exhaust or other noxious fumes unless other provisions are made to minimize recirculation of exhaust into outdoor air intakes. Plumbing and vacuum vents that terminate above the level of the top of the air intake ~~shall may~~ be located no closer than 10 as close as ten feet. The bottom of outdoor air intakes serving central systems shall be located as high as practical but at least ~~6six~~ feet above ground level, or if installed above the roof, ~~3three~~ feet above the roof level.
- E) Exhaust outlets from areas that may be contaminated by dangerous or noxious dust, fumes, mists, gases, odors, infectious material, or other contaminants harmful to people shall be above the roof level. The discharge to the atmosphere shall be located as far as possible but not less than 25 feet from any operable window, door, and/or outdoor intake for a fan thatwhich discharges air to an occupied space.
- F) The ventilation systems shall be designed and balanced to provide the ventilation and pressure relationships ~~hereinafter~~ specified in this Section.
- G) If the ventilation rates required (as ~~hereinafter~~ specified in this Section) do not provide sufficient make-up air for use by hoods, safety cabinets, and exhaust fans, the additional make-up air shall be provided to maintain required pressure balance.
- H) An all-outdoor air system may be used where required by local codes, provided that some form of air-to-air or air-to-water heat recovery system will be included to reclaim the energy otherwise discharged with the air exhausted to the outside.

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- I) To provide maximum energy conservation, air supplied to patient care areas not required as make-up air for 100% exhaust systems shall be recirculated. Any air within the hospital that which is circulated between patient rooms, or patient rooms and other areas of the hospital, shall pass through filters having an efficiency of 90% (see subsection (d)(3) on filters below).
- J) To provide maximum energy conservation, air supplied to housekeeping, administration and other nonsensitive areas not required as make-up air for 100% exhaust systems shall be recirculated. These areas require filters having a minimum efficiency of 30% on the inlet side of the air handling unit~~Air Handling Unit~~.
- K) When a central system serves areas with different filtration requirements, the most stringent filtration requirement shall will be provided for the complete system.
- L) All outside air supplied to patient care areas shall pass through 90% filters (see subsection (d)(3) on filters below).
- M) Minimum air circulation requirements indicated in this Section hereinafter are applicable to occupied spaces. During unoccupied periods, minimum air circulation may be provided as required to maintain space design temperature conditions.
- N) Where fan coil or terminal room unit systems are provided in areas to be occupied by patients, through-the-wall outside air ventilation is not acceptable. A separate central ventilation system, with final filters having a minimum efficiency of 90%, shall supply the required outdoor air ventilation.

3) Filters

- A) All central ventilation or air conditioning systems shall be equipped with filters having efficiencies no less than those specified in the area requirements.
- B) Where two filter beds are required, filter bed No. 1 shall be located

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upstream of the conditioning equipment and filter bed No. 2 shall be located downstream of the supply fan and conditioning equipment.

- C) Where only one filter bed is required, it shall be located upstream of the air conditioning equipment.
- D) All filter efficiencies shall be average atmospheric dust spot efficiencies tested in accordance with ASHRAE Handbook of Fundamentals (1981).
- E) Filter frames shall be durable and shall provide an airtight fit with the enclosing duct work. All joints between filter segments and enclosing duct work shall be gasketed or sealed to provide a positive seal against air leakage.
- F) A local indicating device shall be installed across each filter bed serving central air systems to measure the static pressure drop across the bed.

| e) Area Requirements: These requirements are listed in outline format.

| | 1) Administration, Public Area, Medical Records, and Housekeeping Offices.

| | | A) Filters:

- i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of..... 30%
- ii) Units thatwhich recirculate air within a room shall be provided with filters having a minimum efficiency of 10%

| | | B) Space Design Conditions:

- i) Temperature, dry bulb..... 75°
- ii) Relative Humidity, winter, minimum 30%

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iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

- i) Total air supplied to each space shall be as required to maintain space design conditions.
- ii) Outdoor air supplied shall be no less than 20% of the total air supplied.

D) Space Pressurization:

Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is neutral

E) Recirculation of air within room permitted yes

2) Laboratories

A) Filters:

- i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of 30% and final filters having a minimum efficiency of 90%
- ii) Units that which recirculate air within a room shall be provided with filters having a minimum efficiency of 30%

B) Space Design Conditions:

- i) Temperature, dry bulb 75°
- ii) Relative Humidity, winter, minimum 30%
- iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

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i) Total air supplied to each space shall be as required to maintain space design conditions.

ii) Outdoor air supplied shall be no less than 20% of the total air supplied.

D) Space Pressurization:

Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is negative

E) Recirculation of air within room permitted except in areas, as listed below, where all air must be exhausted directly to the outdoors yes

F) Air from the following areas shall be exhausted directly to the outdoors:

i) All fume hoods

ii) Histology

iii) Bacteriology

iv) Glass-washing areas-Washing Areas

G) All air exhausted from fume hoods shall be made up with outside air.

H) Laboratory hoods shall meet the following general requirements:

i) Have~~have~~ an average face velocity of not less than 75 feet per minute~~±~~

ii) Be~~be~~ connected to an exhaust system that~~which~~ is separate from the building exhaust system~~±~~

iii) Have~~have~~ an exhaust duct system of noncombustible, corrosion-resistant material consistent with the usage of the

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hood; and

iv) Have the exhaust fan located at the discharge end of the duct system unless provided with welded stainless steel duct from fan outlet to termination.

I) Laboratory hoods shall meet the following special requirements:

i) Each hood that~~which~~ processes infectious or radioactive materials shall have a minimum face velocity of 100 feet per minute, shall be connected to an independent exhaust system, shall be provided with filters with 99.97 percent efficiency (based on the DODDOP, dioctylphthalate, test method as described in DODDOP Penetration Test Method MIL STD No. 282-(1976): Filtered Units, Protective Clothing, Gas-Mask Components and Related Products: Performance Test Methods) in the exhaust system, and shall be designed and equipped to permit the safe removal, disposal and replacement of contaminated filters.

ii) Duct systems serving hoods in which radioactive and/or strong oxidizing agents such as prechloric or nitric acid are used shall be constructed of stainless steel and shall be equipped with washdown facilities.

3) Morgue and Autopsy Suite

A) Filters:

i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of 30%
ii) and final filters having a minimum efficiency of 90%

B) Space Design Conditions:

i) Temperature, dry bulb 75°
ii) Relative Humidity, winter, minimum 30%

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iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

- i) Total air supplied to each space shall be as required to maintain space design conditions.
- ii) Outdoor air supplied shall be no less than 20% of the total air supplied.

D) Space Pressurization:

Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is negative

E) Recirculation of air within room permitted no

F) Air from the following areas shall be exhausted directly to the outdoors:

- i) Autopsy
- ii) Non-refrigerated body holding rooms

4) Radiology Suite; X-Ray Diagnostic, Fluoroscopy, and Special Procedures

A) Filters:

- i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of 30% and final filters having a minimum efficiency of 90%
- ii) Units that which recirculate air within a room shall be provided with filters having a minimum efficiency of 30%
- iii) The exhaust from isotope storage shall be provided with filters with 99.97% efficiency (based on the DODDOP, dioctylphthalate, test

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method as described in DODDOP Penetration Test Method MIL STD ~~No.~~ 282-(1976): Filter Units, Protective Clothing, Gas-Mask Components and Related Products: Performance Test Methods).

B) Space Design Conditions:

- i) Temperature, dry bulb 75°
- ii) Relative Humidity, winter, minimum 30%
- iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

- i) Total air supplied to each space shall be as required to maintain space design conditions.
- ii) Outdoor air supplied shall be no less than 20% of the total air supplied.

D) Space Pressurization:

Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is neutral

E) Recirculation of air within room permitted yes

F) Air from the following areas shall be exhausted directly to the outdoors:

Nuclear medicine and isotope storage.

5) Pharmacy Suite

A) Filters:

- i) Central ventilation systems shall be provided with 30%

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prefilters having a minimum efficiency of.....
and final filters having a minimum efficiency of..... 90%

ii) Units which recirculate air within a room shall be
provided with filters having a minimum efficiency
of 30%

B) Space Design Conditions:

i) Temperature, dry bulb 75°
ii) Relative Humidity, winter, minimum 30%
iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

i) Total air supplied to each space shall be as required to
maintain space design conditions.
ii) Outdoor air supplied shall be no less than 20% of the total
air supplied.

D) Space Pressurization:

Ventilation system shall be designed and balanced so that
space pressure, in relation to surrounding areas of the
building, is neutral

E) Recirculation of air within room permitted yes

6) Physical Therapy Suite and Hydrotherapy

A) Filters:

i) Central ventilation systems shall be provided with
prefilters having a minimum efficiency of..... 30%
ii) and final filters having a minimum efficiency of..... 90%

iii) Units thatwhich recirculate air within a room shall 30%

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be provided with filters having a minimum efficiency of

B) Space Design Conditions:

- i) Temperature, dry bulb 75°
- ii) Relative Humidity, winter, minimum 30%
- iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

- i) Total air supplied to each space shall be as required to maintain space design conditions.
- ii) Outdoor air supplied shall be no less than 20% of the total air supplied.

D) Space Pressurization:

Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is..... negative

E) Recirculation of air within room permitted yes

7) Occupational Therapy Suite

A) Filters:

- i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of..... 30%
- ii) and final filters having a minimum efficiency of..... 90%
- iii) Units thatwhich recirculate air within a room shall be provided with filters having a minimum efficiency of 30%

B) Space Design Conditions:

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- i) Temperature, dry bulb 75°
- ii) Relative Humidity, winter, minimum 30%
- iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

- i) Total air supplied to each space shall be as required to maintain space design conditions.
- ii) Outdoor air supplied shall be no less than 20% of the total air supplied.

D) Space Pressurization:
Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is neutral

E) Recirculation of air within room permitted yes

8) Nursing Units (including units such as medical, surgical, intensive care, pediatric, psychiatric, obstetric)

A) Filters:

- i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of 30%
- ii) and final filters having a minimum efficiency of 90%

|

| ii)iii) Units that which recirculate air within a room shall be provided with filters having a minimum efficiency of 10%

B) Space Design Conditions:

- i) Temperature, dry bulb 75°

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- ii) Relative Humidity, winter, minimum 30%
- iii) Relative Humidity, summer, maximum 60%
- C) Air Circulation (Patient Rooms):
 - i) Total air supplied, cfm per bed 15
 - ii) Outdoor air supplied, cfm per bed 10
- D) Air Circulation:
 - i) Total air supplied to each space shall be as required to maintain space design conditions.
 - ii) Outdoor air supplied shall be no less than 20% of the total air supplied.
- E) Space Pressurization:
Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is neutral
- F) Recirculation of air within room permitted yes
- G) Isolation Rooms: These rooms may be used two ways: to protect the patient from the hospital environment or to protect the hospital environment from the patient. Isolation rooms shall have the same conditions as other patient rooms, except that the air flow shall be capable of being either into the room or out of the room. When the hospital is being protected (communicable disease), all air shall be exhausted directly to the outdoors.

9) Newborn Care Unit

- A) Filters:
 - i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of 30%

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| ii) and final filters having a minimum efficiency of..... 90%

| ii)iii) Units thatwhich recirculate air within a room shall
be provided with filters having a minimum
efficiency of 30%

B) Space Design Conditions:

i) Temperature, dry bulb..... 75°

ii) Relative Humidity, winter, minimum 30%

iii) Relative Humidity, summer, maximum 60%

C) Air Circulation (Patient Rooms):

i) Total air supplied, cfm per bed 15

ii) Outdoor air supplied, cfm per bed..... 10

D) Air Circulation:

i) Total air supplied to each space shall be as required to
maintain space design conditions.

ii) Outdoor air supplied shall be no less than 20% of the total
air supplied.

E) Space Pressurization:

Ventilation system shall be designed and balanced so that
space pressure, in relation to surrounding areas of the
building, is neutral

F) Recirculation of air within room permitted yes

10) Surgical Suite-Operating Rooms

A) Filters:

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- i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of 30%
- ii) and final filters having a minimum efficiency of 90%
- iii) Units thatwhich recirculate air within a room shall be provided with filters having a minimum efficiency of 30%

B) Space Design Conditions:

- i) Temperature, dry bulb (adjustedad range) 70°F-76°F
- ii) Relative Humidity, winter, minimum 40%
- iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

- i) Total air supplied, air changes per hour 15
- ii) Outdoor air supplied shall be no less than 20% of the total air supplied.

D) Space Pressurization:

Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is positive

E) Recirculation of air within room permitted yes

F) Minimum requirements for all other spaces within the surgical suite shall be the same as required for Nursing Units.

G) The minimum circulation rate for operating rooms shall be based on the lowest 9 feet of room height. Air quantity shall be increased as required to meet greater loads and still maintain the desired space conditions.

H) All operating rooms shall have scavenger systems for removing

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spent anesthetic gases as per NFPA Standard No. 99, Standard for Health Care Facilities (1993), "Health Care Facilities Code."

I) Operating rooms' air supply shall be from ceiling outlets near the center of the work area to effectively control air movement. Return air shall be not less than 3 inches nor more than 12 inches from the floor. Each operating room shall have at least two return air inlets located as remotely from each other as practical.

11) Obstetrics Suite

A) Filters:

- i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of 30%
- ii) and final filters having a minimum efficiency of 90%
- iii) Units that which recirculate air within a room shall be provided with filters having a minimum efficiency of 30%

B) Space Design Conditions:

- i) Temperature, dry bulb (adjusted adj. range) 70°F-76°F
- ii) Relative Humidity, winter, minimum 30%
- iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

- i) Total air supplied to each space shall be as required to maintain space design conditions.
- ii) Outdoor air supplied shall be no less than 20% of the total air supplied.
- iii) Space Pressurization:

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iv) Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is neutral

D) Recirculation of air within room permitted yes

E) Delivery rooms' air supply shall be from ceiling outlets near the center of the work area to effectively control air movement. Return air shall be not less than 3 inches nor more than 12 inches from the floor. Each delivery room shall have at least two return air inlets located as remotely from each other as practical.

F) Where anesthetic gases are used, scavenger ~~systemssystem~~ for removing spent anesthetics gases as per NFPA ~~Standard No. 99, Standard for Health Care Facilities (1993), "Health Care Facilities Code."~~ shall be provided.

G) ~~Delivery rooms where~~^{Where} caesarean section is performed ~~shall meet the heating, ventilation, and air conditioning, the delivery room (HVAC) requirements for~~^{shall be as per} operating rooms.

12) Emergency Suite

A) Filters:

i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of 30%

ii) and final filters having a minimum efficiency of 90%

iii) Units ~~that~~^{which} recirculate air within a room shall be provided with filters having a minimum efficiency of 10%

B) Space Design Conditions:

i) Temperature, dry bulb 75°F

ii) Relative Humidity, winter, minimum 30%

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iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

- i) Total air supplied to each space shall be as required to maintain space design conditions.
- ii) Outdoor air supplied shall be no less than 20% of the total air supplied.

D) Space Pressurization:

Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is neutral

E) Recirculation of air within room permitted yes

13) Outpatient Suite

A) Filters:

- i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of 30%
- ii) and final filters having a minimum efficiency of 90%
- iii) Units that which recirculate air within a room shall be provided with filters having a minimum efficiency of 10%

B) Space Design Conditions:

- i) Temperature, dry bulb 75°F
- ii) Relative Humidity, winter, minimum 30%
- iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

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i) Total air supplied to each space shall be as required to maintain space design conditions.

ii) Outdoor air supplied shall be no less than 20% of the total air supplied.

D) Space Pressurization:

Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is neutral

E) Recirculation of air within room permitted yes

14) Food Preparation Area

A) Filters:

| i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of 30%
| ii) and final filters having a minimum efficiency of 90%

B) Space Design Conditions:

| Temperature, dry bulb 75°F

C) Air Circulation:

i) Total air supplied to each space shall be as required to maintain space design conditions.

ii) Outdoor air supplied shall be no less than 20% of the total air supplied.

D) Space Pressurization:

Ventilation system shall be designed and balanced so that space pressure, in relation to surrounding areas of the building, is negative

E) Recirculation of air within room permitted no

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F) Dining areas adjacent to the food preparation area ~~Minimum requirements for adjacent dining areas~~ shall meet ~~be~~ the requirements ~~same as required~~ for Public Areas.

G) If direct make-up hoods (short cycle) are used, all outside air to the hood shall be filtered by 30% minimum efficiency filters and shall not cause cold cooking surfaces, condensation problems, or grease build-up due to cold temperature.

H) Kitchen air exhausted from the space through hoods shall ~~must~~ be made up with outside air. Air shall flow into the kitchen to prevent cooking odors from migrating throughout the hospital. Recirculation of air is permissible, if a central system is used that, and serves only the kitchen, cafeteria, and ware-washing area.

I) A~~When there is a~~ dishwasher being used, ~~it~~ shall have a separate exhaust that is interlocked with the dishwasher to operate only when the dishwasher operates.

J) Air supply quantity must equal or exceed air exhaust quantity or meet the loads encountered, whichever is greater.

K) During the unoccupied cycle, kitchen temperature shall be maintained at 75°F plus or minus 10°F.

L) The hood and duct system for cooking equipment used in processes producing smoke or grease-laden vapors shall comply ~~be in conformance~~ with NFPA Standard No. 96, Standard for Ventilation Control and Fire Protection of Commercial Cooling Operations, (1991), "Vapor Removal Cooking Equipment." That portion of the fire extinguishment system required for protection of the duct system may be omitted when all cooking equipment is served by U.L. listed grease extractors.

i) Other exhaust hoods in food preparation centers shall have an exhaust rate of not less than 50 cubic feet per minute ~~CFM~~ per square foot of face area. The face area is the open area from exposed perimeter of hood to the open perimeter of the cooking surface.

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| ii) Clean-out openings shall be provided at each change in direction and in horizontal sections no more than 20 feet apart in the duct system serving kitchen and food preparation areas.

15) Central Sterile Supply

A) Filters:

| i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of..... 30%

| ii) and final filters having a minimum efficiency of..... 90%

B) Space Design Conditions:

| i) Temperature, dry bulb (adjustedadj. range) 75°F

| ii) Relative Humidity, winter, minimum 30%

| iii) Relative Humidity, summer, maximum 60%

C) Air Circulation:

| i) Total air supplied to each space shall be as required to maintain space design conditions.

| ii) Outdoor air supplied shall be no less than 20% of the total air supplied.

D) Air flow shall be from the clean area toward the soiled or decontamination area.

E) Sterilization Room:

| i) Where only steam autoclaves are installed, the air exhausted from the sterilizer area for heat control may be recirculated through a central system thatwhich is provided

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with filters having a minimum efficiency of 90%.

ii) Where ~~ethylene~~ethylene oxide sterilizers are used, all air contaminated with ethylene oxide above 1 part per million ~~PPM shall~~must be exhausted directly outdoors. No air shall be recirculated that has more than 1 part per millionPPM of ethylene oxide present.

16) Linen Services; Laundry

A) Filters:

i) Central ventilation systems shall be provided with prefilters having a minimum efficiency of 30%
ii) and final filters having a minimum efficiency of 80%

B) Space Design Conditions:

Temperature, dry bulb (winter) 75°F

C) All air from the soiled storage and sorting area shall be exhausted directly to outdoors.

D) Air flow shall be from the clean area to the soiled area. Air from the clean area may be used to make up air exhausted from the soiled area.

E) Air from the clean area may be recirculated within the laundry complex, but shall pass through a lint screen or trap before returning to the air handling unit.

F) The entire laundry ventilation system shall be controlled so that air flow is into the laundry from the ~~hospital~~hospitals.

G) Circulation and ventilation rates may be variable, but sufficient outside air ~~shall~~must be supplied to make up for exhaust. Minimum circulation of unconditioned air at summer design conditions shall be 2 cubic feet per minutecfm per square footft² or 12 air changes per hour, whichever is larger.

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17) Miscellaneous Supporting Areas

A) Space temperatures shall be maintained for occupant comfort.

B) Ventilation systemssystem shall be designed and balanced so that air flows into these spaces from adjacent areas.

C) Anesthesia Storage Rooms:

- i) All air shall be exhausted directly to the outdoors.
- ii) Minimum exhaust ventilation rates shall be six air changes per hour.
- iii) The ventilation system shall conform to the requirements of NFPA Standard No. 99, Standard for Health Care Facilities (1993), "Health Care Facilities Code," including the option to provide a gravity (non-mechanical) ventilation system.
- iv) Supply air makeupmake-up for exhaust requirements may be provided from a mechanical ventilation system or by transfer from adjacent areas.

D) Soiled Holding and Work Rooms:

- i) All air shall be exhausted directly to the outdoors.
- ii) Minimum exhaust ventilation rates shall be 10 air changes per hour.
- iii) Supply air makeupmake-up for exhaust requirements may be provided from a mechanical ventilation system or by transfer from adjacent areas.

E) Toilet Rooms and Bathrooms:

- i) Exhaust air may be recirculated through a central ventilation system that is provided with final filters having a minimum efficiency of 90%. Otherwise, all air shall be

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exhausted directly to the outdoors.

ii) Minimum exhaust ventilation rate shall be 1.5 cubic feet per minute per square foot of floor area, but no less than 50 cubic feet per minute.

iii) Supply air makeupmake-up for exhaust requirements may be provided from a mechanical ventilation system or by transfer from adjacent areas.

F) Janitor Closets, Linen₂ and Trash Chute Rooms:

i) All air shall be exhausted directly to the outdoors.

ii) Minimum exhaust ventilation rate shall be 1.5 cubic feet per minute per square foot of floor area, but no less than 50 cubic feet per minute.

iii) Supply air makeupmake-up for exhaust requirements may be provided from a mechanical ventilation system or by transfer from adjacent areas.

G) Boiler rooms shall be provided with sufficient outdoor air to maintain combustion rates of equipment and limit temperatures in working stations to 97°F effective temperature (97°F and 50% relative humidity or its equivalent) as defined by ASHRAE Handbook of Fundamentals(1981).

H) Rooms containing heat-producing equipment, such as boiler rooms, heater rooms, food preparation centers, laundries, sterilizer rooms, or mechanical equipment rooms, shall be insulated and ventilated to prevent any floor surface above from exceeding a temperature of 100°F.

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2490 Plumbing and Other Piping Systems

a) General

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All plumbing systems shall be designed and installed in accordance with the requirements of the Illinois ~~State~~-Plumbing Code, except that the number of waterclosets, urinals, lavatories, bathtubs, showers, drinking fountains, and other fixtures shall be as required by this Part and the hospital programs.

- b) Plumbing Fixtures
 - 1) Plumbing fixtures shall be of nonabsorptive acid-resistant materials.
 - 2) The water supply spout for lavatories and sinks required for filling pitchers ~~and~~, for medical and nursing staff and food handlers' hand-washing~~handwashing~~, shall be mounted so that its discharge point ~~has~~ is a minimum perpendicular distance of 5 inches above the rim of the fixture.
 - 3) Hand-washing~~Handwashing~~ lavatories used by medical and nursing staff and food handlers shall be trimmed with valves ~~that~~which can be operated without the use of hands where specifically required in this Part~~previous sections~~.
 - A) When blade handles are used, ~~for this purpose~~ the blade handles shall not exceed 4½ inches in length, except ~~that~~ the handles on clinical sinks shall not be less than 6 inches in length.
 - B) The hand-washing~~handwashing~~ and/or scrub sinks, for operating, emergency treatment, nursery, and delivery~~Operating, Emergency Treatment, Nursery, and Delivery~~ rooms shall be trimmed with valves ~~that~~which are ~~aseptically~~aseptically operated (i.e., knee or foot controls) without the use of hands. Wrist blades are not acceptable.
 - 4) Clinical rim flush sinks shall have an integral trap in which the upper portion of a visible trap seal provides a water surface.
 - 5) Shower bases and tubs shall be provided with nonslip surfaces.
- c) Water Supply Systems
 - 1) Systems shall be designed to supply water at sufficient pressure to operate all fixtures and equipment during maximum demand periods.

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- 2) Each water service main, branch main, riser and branch to a group of fixtures shall be valved. Stop valves shall be provided at each fixture.
- 3) Flush valves installed on plumbing fixtures shall be of a quiet operating type, equipped with silencers.
- 4) Bedpan-flushing devices shall be provided on each patient toilet unless a clinical service sink is centrally located in each nursing unit. This requirement does not apply to psychiatric units.
- 5) Water distribution systems shall be arranged to provide hot water at each hot water outlet at all times. Hot water at shower, bathing, and hand-washing facilities shall not exceed 110° F (43° C). If the program requires, in psychiatric units, plumbing fixtures thatwhich require hot water and are accessible to patients shall be supplied with hot water not to exceed 100° F (38° C).

d) Hot Water Heaters and Tanks

- 1) The hot water heating equipment shall have sufficient capacity to supply water at the temperatures and quantities in the following areas:

	Clinical	Dietary	Laundry
gallons/hour/bed	6½	4	4½
liters/second/bed	.007	.004	.005
temperature °F	100	180	180
temperature °C	43	82	82

Water temperatures are to be taken at the hot water point of use or at the inlet to the processing equipment.

- 2) Storage tanks shall be fabricated of corrosion-resistant metal or lined with non-corrosive material.

e) Drainage Systems

- 1) Drain lines from sinks in which acid wastes may be poured shall be constructed offabricated from acid-resistant material.

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- 2) Insofar as possible, drain piping shall not be installed over operating and delivery rooms, nurseries, food preparation, serving, and storage areas, and similar critical areas. Special precautions shall be taken to protect these areas from possible leakage or condensation from ~~such~~ overhead piping systems.
- 3) Floor drains shall not be installed in operating rooms. Flushing rim type drains may be installed in cytoscopic operating rooms~~Cystoscopy Operating Rooms~~.
- 4) Building sewers shall discharge into a public sewersewage system.
- 5) ~~When Where~~ a public sewersewage system is not available, plans for any private sewage disposal system shall be submitted to the Environmental Protection Agency ~~of Illinois~~ for review for approval before hospital construction is started.

- f) Nonflammable medical gas systems shall be installed in accordance with NFPA Standard No.99, Standard for Health Care Facilities.(1993), "Health Care Facilities Code."
- g) Clinical vacuum (suction) systems shall be installed in accordance with NFPA 99, Standard for Health Care Facilities, Compressed Gas Association Pamphlet P 2.1 (1970), "Standard for Medical Surgical Vacuum Systems in Hospitals."
- h) Medical compressed air systems shall be installed in accordance with NFPA 99, Standard for Health Care Facilities, Compressed Gas Association Pamphlet P 2.1.
- i) Oxygen, vacuum, and medical compressed air shall be piped to the locations indicated in ~~Section 250~~ Table E with the required station outlets.
- j) Service outlets for central housekeeping vacuum systems, if used, shall not be located within operating rooms.
- k) Fire Extinguishing Systems
 - 1) All fire extinguishing systems shall be designed, installed, and maintained in accordance with NFPA Standard No.101, (1994), "Life Safety Code,"

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NFPA Standard No. 13, Standards for the Installation of Sprinkler Systems, "Sprinkler Systems," and NFPA Standard No. 2513A, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems, "Sprinkler System Maintenance."

2) Class III, Type 1 inside standpipe system shall be provided in all buildings more than four stories or 55 feet in height. Such standpipe systems shall comply with ~~conform to the requirements of~~ NFPA Standard No. 14, Standard for the Installation of Standpipe, Private Hydrants and Hose Systems, "Standpipe and Hose Systems."

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2500 Electrical Requirements

a) General

1) All materials, including equipment, conductors, controls, and signaling devices, shall be installed in compliance with applicable sections of the NFPA Standard No. 70, (1993), "National Electric Code, " including Article 517, and as necessary to provide a complete electrical system.

2) All electrical installations, including alarm, nurses' call, and communication systems, shall be tested to demonstrate that the equipment installation and operation conforms to these requirements.

b) Switchboards and Power Panels

These items shall comply with NFPA Standard No. 70, (1993), "National Electrical Code. The main switchboard shall be located in an area separate from plumbing and mechanical equipment and be accessible only to authorized persons.

c) Panelboards. Panelboards serving lighting and appliance circuits shall be located on the same floor as the circuits they serve. This requirement does not apply to the life safety system.

d) Lighting

1) All spaces occupied by people, machinery, and equipment within

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buildings, approaches to and through exits from buildings, and parking lots shall have lighting.

- 2) Patients' rooms shall be equipped with general lighting and night lighting. A reading light shall be provided for each patient. At least one light fixture for night lighting shall be switched at the entrance to each patient room. All switches for control of lighting in patient areas shall be of the quiet operating type.
- 3) Operating and delivery rooms shall have general lighting in addition to local lighting provided by special lighting units at the surgical and obstetrical tables. The general lighting shall provide a minimum of 100 footcandles at the procedure tables. Each fixed special lighting unit at the tables shall be connected to an independent circuit.

e) Receptacles (Convenience Outlets)

- 1) Each operating and delivery room~~Operating and Delivery Room~~ shall have at least two receptacles installed on each wall or eight receptacles in diversified locations per room.
- 2) Each patient room shall have duplex grounding type receptacles as specified in Article 517-83 and Article 517-84 of the National Electrical Code. The mounting height of these receptacles shall be 22 to 42 inches above the finished floor.
- 3) Duplex receptacles for general use shall be installed approximately 50 feet~~50'0"~~ apart in all corridors and within 25 feet~~25'0"~~ of the ends of corridors. These receptacles shall be circuited to the emergency system. Single polarized receptacles marked for use of X-ray only shall be located in corridors of patient areas so that mobile equipment may be used in any location within a patient room without exceeding a cord length of 50 feet~~50'0"~~ attached to the equipment. If the same mobile X-ray unit is used in operating rooms and in nursing areas, all receptacles for X-ray use shall be of a configuration that one plug will fit the receptacles in all locations. Where capacitive discharge or battery-powered X-ray units are used, these polarized receptacles are not required.

f) At least two X-ray~~x-ray~~ film illuminators shall be installed in each operating,

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~~delivery, and recovery room, emergency treatment areas~~Operating, Delivery and Recovery Room, Emergency Treatment Area(s), and in the X-ray Viewing Room of the ~~radiology department~~Radiology Department. More than two units shall be installed as needed.

- g) Nurses' Calling System
 - 1) Each patient room shall be served by at least one calling station and each bed shall be provided with a call button. Two call buttons serving adjacent beds may be served by one calling station. Calls shall register with nursing staff and shall actuate a visible signal in the corridor at the patients' door. In multicorridor nursing units, additional visible signals shall be installed at corridor intersections. In rooms containing two or more calling stations, indicating lights shall be provided at each station. ~~Nurses' calling systems that~~Calling Systems which provide two-way voice communications shall be equipped with an indicating light at each calling station, which will remain lighted as long as the voice circuit is operating.
 - 2) Nurse call duty stations shall be installed in the clean work room, soiled work room, medicine preparation room, nourishment station, and nurses' lounge of the unit.
 - 3) A ~~nurses' call emergency station~~Nurses' Call Emergency Station shall be provided for patients' use at each patient's toilet, bath, sitz bath, and shower. These stations are to be the pull-cord type with the cord reaching within 6 inches of the floor. The cords ~~shall~~are to be located within reach of a patient.
 - 4) In areas such as intensive care, cardiac care, recovery and similar patient care areas where patients are under constant surveillance, the ~~nurses' calling system~~Nurses' Calling System may be limited to a bedside station that will actuate a signal that can be readily seen by the other nurses.
 - 5) A communications system ~~that~~which may be used by nurses to summon assistance shall be provided in each ~~operating, delivery, special procedure, birthing, recovery, emergency treatment, and critical care room; in nurseries; and in nursing units for psychiatric patients~~Operating, Delivery, Special Procedure, Birthing, Recovery, Emergency Treatment, Critical Care Rooms, in Nurseries, and in Nursing Units for Psychiatric Patients.

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h) Communication System

- 1) A loudspeaker-loud speaker type sound system shall be provided throughout the facility to allow for announcements, such as the paging of personnel and other necessary audio functions.
- 2) Speakers shall be located in all departments to allow hospital personnel to adequately hear all audio outputs from the system.
- 3) The system shall be used as the communication link for emergency announcements, i.e., code blue, impending disasters and others. The audio line at the last speaker in the audio circuits shall be electrically supervised against opens and grounds. The supervision shall be indicated at a building location thatwhich is staffed 24 hours a day.

i) Emergency Electric Service

- 1) To provide electricity during an interruption of the normal electric supply, an emergency source of electricity shall be provided and connected to the life safety branch, the critical branch, and the equipment branch for lighting and power as established in NFPA 70, National Electrical Code.
- 2) The source of this emergency electric service shall be as follows:
 - A) An emergency generating set when the normal service is supplied by one or more central station transmission lines.
 - B) An emergency generating set or a central station transmission line when the normal electric supply is generated on the premises.
- 3) Emergency Generating Set
 - A) The required emergency generating set, including the prime mover and generator, shall be located on the premises. Where stored fuel is required for the emergency generator operations, the storage capacity shall be sufficient for not less than 24-hours of continuous operation.

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B) The emergency generator set may be used during periods of high energy demands on local utilities. In the event of an outage of the normal power source, the normal loads shall immediately be removed from the emergency generating set, and the life safety branch, the critical branch, and the equipment branch shall be connected to the generator.

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

SUBPART U: CONSTRUCTION ~~REQUIREMENTS~~~~STANDARDS~~ FOR EXISTING HOSPITALS

Section 250.2610 Applicability of Subpart U~~these Standards~~

- a) Subpart U~~These Standards~~ shall apply to all existing hospitals and to minor alterations to existing hospitals. Plans need not be submitted for alterations or remodeling changes that~~which~~ do not affect the structural integrity of the building, that~~which~~ do not change functional operation, that~~which~~ do not affect fire safety, and that~~which~~ do not add beds or facilities more than~~ever~~ those for which the hospital is licensed. See Subpart T for new construction and major additions and alteration requirements.
- b) In the cases of types of hospitals not specifically treated in this Subpart~~herein~~, the standards for general hospitals shall apply, with due allowance being~~made~~ for the specialized or unusual requirements of the particular hospital involved.
- c) Priorities~~The establishment of priorities~~, phasing schedules, and dates of completion based upon the urgency of correction, the required completion time, and financial capabilities, ~~shall be~~ established as agreed by the Department and each facility.

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2620 Codes and Standards

- a) ~~The National Fire Protection Association (NFPA) Standard No. 101, (2000):~~ Life Safety Code, for existing structures and all appropriate references under Appendix B applies to and is part of this Subpart~~these standards~~.

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- b) ~~The National Fire Protection Association (NFPA) Standard No. 101 A,(2001): Guide on Alternative Approaches to Life Safety, applies to and is part of this Subpartthese standards.~~
- c) All existing hospitals of any height shall be Type I or Type II construction as established by NFPA 101, Life Safety Code, (2000) and NFPA 220, Standard on Types of Building Construction(1999).

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2630 Existing General Hospital RequirementsStandards

Minimum requirements in the existing General Hospital are:

- a) Administration and Public Areas
 - 1) Lobby:
~~It shall include:~~ a reception and information counter or desk, waiting ~~spacesspace(s)~~, and access to public toilet facilities, public telephones, and drinking ~~fountains~~fountains(s).
 - 2) Interview SpacesSpace(s):
Spaces for private interviews relating to social service, credit, or admissions.
 - 3) General or Individual Officesindividual office(s):
~~Offices~~Office(s) for business transactions, medical and financial records, and administrative and professional staffs.
 - 4) Multipurpose Roomsroom(s):
For conferences, meetings, and education purposes.
 - 5) Medical Library Facilitiesfacilities.
 - 6) Storage Areas.
- b) Medical Records Unit
SpaceProvide adequate space for reviewing, dictating, sorting, recording, and storing of medical records.

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c) Adjunct Diagnostic and Treatment

1) Laboratory Suite-

Laboratory facilities ~~shall~~should be provided to meet the workload. These may be provided within the hospitalHospital or through an effective contract arrangement with a nearby laboratory service. If laboratory services are provided by contractual arrangement, then at least the following minimum services shall be available within the hospitalHospital. (For additional requirements, see Subpart E of this Part.)~~1~~

A) Laboratory work ~~counter~~counter(s) with appropriate services.

B) ~~Lavatories~~Lavatory(ies) or counter ~~sink~~sink(s) equipped for hand washinghandwashing.

C) Storage ~~cabinet~~cabinet(s) or ~~closet~~closet(s).

D) Blood storage facilities.

E) Specimen and sample collection facilities. Urine collection rooms with nearby water closet and lavatory. Blood collection facilities with space for a chair and work counter.

2) Morgue and Autopsy Suite-

A) These facilities shall be accessible to an outside entrance and shall be located to avoid movement of bodies through public areas wherever possible.

B) The following shall be provided when autopsies are performed within the hospitalHospital:

i) Refrigerated facilities for body holding.

ii) Autopsy room:

This room shall contain a work counter with sink equipped

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for hand washing~~handwashing~~; storage space for supplies, equipment, and specimens; and an autopsy table.

C) If no autopsies are performed in the hospital~~Hospital~~, a well-ventilated body~~-~~holding room shall be provided.

3) Radiology Suite-

A) Facilities shall be provided for radiology purposes. (For additional requirements see Subpart F of this Part~~_-~~).

B) The suite shall contain the following elements:

i) Radiographic rooms~~room~~(s).

ii) Film~~-~~processing facilities.

iii) Viewing and administration areas~~area~~(s).

iv) Film storage facilities.

v) Toilet and hand-washing~~handwashing~~ facilities accessible from each fluoroscopy room.

vi) Dressing areas~~area~~(s) with access to toilets, and facilities for patients'~~patient's~~ belongings.

vii) Waiting room or alcove.

viii) X-ray installations for fixed and mobile X-ray~~x-ray~~ equipment and radiation protection, which will be checked by the Illinois Emergency Management Agency~~Department of Nuclear Safety~~.

4) Pharmacy Suite-

A) The size and type of services to be provided in the pharmacy will depend upon the type of drug distribution system used in the Hospital and whether the hospital provides, purchases, or shares

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pharmacy services with other hospitals or other medical facilities.
(For additional requirements see Subpart R of this Part.)

B) ~~The Provisions shall be made for the~~ following shall be provided:

- i) Area for administrative functions, including Administrative Functions. These include requisitioning, recording and reporting, receiving, storage (including refrigeration), and accounting.
- ii) Quality control area~~Control Area~~. (If bulk compounding and/or packaging functions are performed.)
- iii) Locked storage~~Storage~~ for drugs~~Drugs~~ and biologics~~Biologicals~~.
- iv) Dispensing area~~Area~~.
- v) Hand-washing facilities~~Handwashing Facilities~~.
- vi) A drug information~~Drug Information~~ area for reference materials and personnel.
- vii) If I.V. admixtures and other sterile dosage forms are compounded, a sterile products area shall~~Sterile Products Area must~~ be provided with a separate sink for hand washing~~handwashing~~.

5) Physical Therapy Suite:

- A) Appropriate services may be arranged for shared use by occupational therapy patients and staff.
- B) If a physical therapy suite exists, the following shall be provided:
 - i) Office space~~Space(s)~~.
 - ii) Waiting space~~Space~~.

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- iii) Treatment ~~areas~~area(s) for such modalities as thermotherapy, diathermy, ultrasonics, hydrotherapy and exercise. ~~Provide visual privacy for each individual treatment area. Provide handwashing facility(ies). Provide one lavatory or sink in the suite.~~
- iv) Visual privacy for each individual treatment center.
- v) Hand-washing facilities.
- vi) One lavatory or sink in the suite
- vii)~~iv~~) Facilities for collection of wet and soiled linen and other material ~~shall be provided~~.
- viii)~~v~~) Storage for clean linen, supplies, and equipment.
- ix)~~vi~~) Patients' dressing areas and toilet facilities.
- x)~~vii~~) Access to and storage for wheelchairs and stretchers.
- xiv)~~iii~~) Showers, lockers, and service sinks ~~shall be provided~~ as required by the service rendered.

6) Occupational Therapy Suite:

- A) Appropriate elements may be arranged for shared use by physical therapy patients and staff.
- B) If an occupational therapy suite exists, the following elements shall be provided:
 - i) Office ~~spacess~~space(s).
 - ii) Activities ~~areas~~area(s) equipped with a sink or lavatory.
 - iii) Storage for supplies and equipment.
 - iv) Access to patients' toilet facilities.

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d) Nursing Unit

The requirements in this subsection (d) do not apply to special care areas such as recovery rooms and intensive care areas, and newborn care areas.

1) Patient Rooms.

- A) Each patient room shall be an outside room. Each patient room shall connect~~communicate~~ directly with an exiting corridor.
- B) Minimum room areas shall be: 80 square feet per bed in multi~~bed~~ rooms, and 100 square feet in one~~bed~~ rooms (square footage to exclude closets, storage cabinets, bathrooms, and door swings). In addition, a minimum of 3 feet 0" must be maintained between the sides and foot of any bed and any wall or other fixed device.
- C) ~~Existing room(s) with a capacity of more than four beds on the date of the promulgation of these regulations may be continued in use.~~
- D) Each patient room shall have access to a bathroom that includes a toilet and a sink~~toilet room~~. Toilets~~Water closets~~ shall be provided at the rate of one per each eight beds.
- E) The bathroom~~toilet room~~ shall contain a toilet~~water closet~~ and a lavatory. The lavatory may be omitted from a bathroom~~toilet room~~ ~~that which~~ serves not more than two adjacent bedrooms if each adjacent bedroom contains a lavatory.
- F) Each patient shall have a wardrobe, locker, or closet that is suitable for hanging and storing personal effects.
- G) Visual privacy shall be provided to each patient bed in multi-bed rooms.
- H) At least one tub or shower shall be provided for each 30 beds ~~that which~~ do not have bathing facilities within the patients' rooms. Each tub or shower shall be in an enclosure ~~that which~~ provides space for the private use of the bathing fixture and for drying and

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dressing.

- 2) Nurses' station~~Nurses Station~~ and related facilities. A nurses'Provide a ~~nurses~~ station with a work counter, storage areas, and communications equipment shall be provided. The following shall also be provided~~Also provide~~:
 - A) A drug distribution station.
 - B) Hand-washing~~Handwashing~~ facilities convenient to both the ~~nurses~~nurses station and the drug distribution station.
 - C) Charting facilities for nurses and doctors.
 - D) Accessibility to a treatment room for multi~~-~~bed room units. This room shall contain a lavatory, work counter, storage facilities, and a writing space.
- 3) Service Areas:
 - A) A clean work area or a clean holding area shall be provided in each nursing unit. The clean workroom shall contain a work surface, hand-washing facilites~~handwashing facility(ies)~~, and storage facilities. The clean holding area shall be part of a system for the storage and distribution of clean and sterile supplies and materials.
 - B) Provide a separate designated area for clean linen storage shall be provided. If a cart system is used, the storage of the cart may be stored in an alcove. This function may be in a clean work area.
 - C) Parking~~Provide parking~~ for stretchers and wheelchairs shall be provided out of the path of normal traffic.
 - D) A soiled workroom or soiled holding room shall be provided. The soiled workroom shall contain a clinical sink or equivalent flushing rim fixture, a hand-washing~~handwashing~~ sink, a waste receptacle, and a linen receptacle. The soiled holding room shall be part of a system for the collection and disposal of soiled materials. If bedpan flushing attachments are used on every patient room toilet,

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a clinical sink is not required in the soiled workroom.

- | E) Space shall be provided~~Provide room~~ for the storage of equipment such as I.V. stands, inhalators, and walkers.
- | F) Space shall be provided for the storage of required emergency equipment such as a crash cart. This equipment shall be under the direct control of the nursing staff.
- | G) A station with a sink equipped for hand washing, equipment for serving nourishment between scheduled meals, a refrigerator, storage cabinets, and units to provide ice for patients shall be provided.~~Provisions for serving nourishment between scheduled meals.~~

- | 4) Isolation Rooms~~Room~~(s).

~~At~~There shall be at least one room shall be provided for the isolation of patients with known or suspected communicable ~~diseases~~disease(s). Each such room shall have an individual toilet and a lavatory. All isolation rooms shall meet requirements~~be otherwise planned as required~~ for a standard patient room.

- | 5) Rooms~~Room~~(s) for Psychiatric~~Disturbed~~ Patients.

Every hospital that~~which~~ does not have a psychiatric nursing unit shall provide facilities for the care of psychiatric~~disturbed~~ patients, usually for less than 72~~seventy two~~ hours ~~duration~~. The design shall provide for close observation, and shall minimize the dangers of patient escape, suicide, or injury. Care~~This~~ may be provided in a special care room used for multiple purposes. This room may be located either in the emergency~~Emergency~~ Unit~~Unit~~ or in a medical nursing unit~~Medical Nursing Unit~~, or in another similar location.

- | e) Intensive Care Units

Intensive care units shall provide the following:

- | 1) Patient Rooms.

Cardiac intensive care, medical intensive care, and surgical intensive care patients may be housed in either single-bed rooms or multibed rooms. Patient rooms shall meet the following requirements:

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- A) Clearance between beds shall be not less than 6 feet 0". A minimum of 3 feet 0" between the sides of bed and wall shall be provided. Singlebed rooms shall have a minimum of 100 square feet in area and a minimum dimension of 10 feet 10".
- B) A lavatory equipped for hand washing~~handwashing~~ shall be provided in each intensive care unit.
- C) A nurses' calling system (see Section 250.2500(g)) shall be provided.
- D) Cardiac intensive care patients shall be provided with a toilet facility that~~which~~ is directly accessible from the bed area.
- E) Each patient shall be visible from outside the room.

2)

Service Areas

The following service areas shall be located in or readily available to each intensive care unit. One area may serve two or more adjacent intensive care units. The size and location of each service area shall~~will~~ depend upon the number of beds to be served.

- A) Nurses' station.
- B) Hand-washing~~Handwashing~~ facilities. These shall be convenient to the nurses' station and the drug distribution station.
- C) Charting facilities with work counter~~se~~counter(s).
- D) Staff toilet room. A room containing a toilet~~water closet~~ and a lavatory equipped for hand-washing~~handwashing~~ shall be accessible to the staff.
- E) Clean workroom (or a system for storage and distribution of clean and sterile supply materials). The clean workroom shall contain a work surface, hand-washing~~handwashing~~ facility, and storage facilities.

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F) A readily accessible soiled workroom or soiled holding room. The soiled workroom shall contain a clinical sink or equivalent flushing rim fixture, sink equipped for hand washing~~handwashing~~, work surface, waste receptacle, and linen receptacle. A soiled holding room shall be part of a system for collection and disposal of soiled materials and shall be similar to the soiled workroom except that the clinical sink and work counter may be omitted.

G) A drug~~Drug~~ distribution station shall be provided~~—Provision shall be made~~ for convenient and prompt 24~~-~~hour distribution of medicine to patients.

H) A clean~~linen storage~~~~. Provide a~~ storage closet or a designated area within the clean workroom shall be provided for clean linen storage. If a closed cart system is used, the cart~~storage~~ may be stored in an alcove.

I) A station with sink equipped for hand washing, equipment for serving nourishment between scheduled meals, a refrigerator, storage cabinets, and units to provide ice for patients shall be provided~~Provisions for nourishment~~.

J) Emergency equipment storage. Designated space shall be provided for a "crash cart" and similar emergency equipment.

K) Space shall be provided for equipment~~Equipment~~ storage. Provide space for necessary equipment.

3) Waiting Area:
A waiting area shall be provided for family members and others who may be permitted to visit the intensive care patients. A toilet room and public telephone shall be available.

f) Pediatric Nursing Unit
If a separate unit is provided it shall meet the following requirements:

1) General unit requirements~~Unit Requirements~~ including patient rooms~~Patient Rooms~~.
The requirements noted in Section 250.2630(d) shall be applied to a

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pediatric and adolescent nursing unit containing hospital beds. Adequate spaces shall be provided for youth beds and cribs.

- 2) Nursery
Each nursery serving pediatric patients shall contain no more than 12 bassinets. The minimum clear floor area per bassinet shall be 40 square feet. Each room shall contain a lavatory equipped for hand washing~~handwashing~~, nurses' emergency calling system and glazed viewing windows for observing infants from public areas and the workroom.
- 3) Nursery Workrooms-
Each nursery shall be served by a connecting workroom. One workroom may serve more than one nursery.
- 4) Examination and Treatment Room-
The examination and treatment room~~It~~ shall contain a work surface, storage facilities, and a lavatory equipped for hand washing~~handwashing~~.
- 5) Service Areas-
The service areas in the pediatric and adolescent nursing unit shall comply with~~in form to~~the conditions listed in Section 250.2630(d)(3) and shall meet the following additional conditions:
 - A) Multipurpose or individual areas shall be provided for dining, educational, and play or other patient care purposes.
 - B) Space for storage of infant formula shall be provided in the unit or in a convenient location nearby.
 - C) Patients' toilet rooms~~room(s)~~ shall be provided.
 - D) Storage closets or cabinets for toys and for educational and recreational equipment shall be provided.
 - E) Storage space shall be provided for replacement of youth and adult beds to provide flexibility for interchange of patient accommodations. This storage space need~~(Need~~ not be located in the Pediatric Nursing Unit.)

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6) Fixtures and Accessories-

- A) Attention shall be given to other details affecting small children as required by the program.
- B) Switches and electrical outlets for critical equipment shall be protected to preclude shock and ~~or~~ located for inaccessibility by small children.

g) Psychiatric Nursing Unit

- 1) Nursing units~~Units~~ intended for psychiatric or other types of patients ~~need~~ close supervision~~disturbed patient nursing care~~ shall provide a safe and secure facility ~~for patients~~ need ~~close supervision~~ to minimize patients~~their~~ hiding, escape, injury, or suicide. The unit shall allow care of ambulatory inpatients, to permit flexibility in arranging various types of therapy, and shall~~should~~ present as noninstitutional an atmosphere as possible.
- 2) Each psychiatric nursing unit shall provide the following:
 - A) Patient Rooms-
The requirements noted in Section 250.2630(d) shall be applied to patient rooms in psychiatric nursing units except as follows:
 - i) A nurses' calling system is not required. Other types of communications systems may be utilized.
 - ii) Provisions~~Provision~~ for visual privacy are~~is~~ not required.
 - iii) Three feet of clearance~~3' 0" clear~~ at the foot and sides of each bed is not required.
 - B) Service Areas-
The service areas noted in Section 250.2630(d)(3) shall be provided or made available to each psychiatric nursing unit, except that space for stretchers and wheelchairs is not required, and clinical sinks or equivalent may be installed but are not required.

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The following elements shall be provided within and for the exclusive use of the unit:

- i) Consultation roomsroom(s).
- ii) Space for dining, recreation, and occupational therapy.
- iii) Storage closets or cabinets for recreational and occupational therapy equipment.

h) Newborn Care Unit

Newborn infants shall be housed in nurseries thatwhich are conveniently located to the postpartum nursing unit and obstetrical facilities. The nurseries shall be located and arranged to preclude unrelated traffic. Subpart O of this Part, in its entirety, these Requirements shall apply to the newborn care unitthis section in its entirety. The units shall meet the following requirements:

- 1) General.—Each nursery shall contain:
 - A) At least one lavatory trimmed with valves thatwhich are aseptically operated (i.e., knee or foot controls).
 - B) A nurses' emergency calling system.
 - C) Bassinets shall be provided in a number at least equal to the number of postpartum beds.
 - D) GlazedProvide glazed observation windows to permit viewing infants from public areas and from workrooms.
- 2) Full Term Nursery.
The full-term nursery~~It~~ shall contain no more than 12 bassinets; however, this number may be increased to 16 if the extra bassinets are of the isolation type. The minimum floor area shall be 30 square feet for each regular bassinet and 40 square feet for each isolation type bassinet. When a "rooming-in" program is used, the total number of bassinets provided in these units may be appropriately reduced, but the full~~term~~ nursery may not be omitted.

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3) Special Care and Observation Nursery-
If a separate special care and observation nursery is provided, it shall have its own work area, and at least 40 square feet per bassinet shall be provided in the nursery.

4) Workroom~~Work Room~~.
Each nursery shall be served by a connecting workroom. The workroom~~It~~ shall contain gowning facilities at the entrance for staff and housekeeping personnel, work space with a counter, a refrigerator, a lavatory or sink equipped for hand washing~~handwashing~~, and storage. One workroom may serve more than one nursery. The workroom that~~which~~ serves the special care nursery may be omitted if equivalent work area and facilities are provided within the nursery in which case the gowning facilities shall be located near the entrance to the nursery and shall be separated from the work area.

5) Examination and Treatment Room or Space for Infants-
The examination or treatment room or space~~It~~ shall contain a work counter, storage, and a lavatory equipped for hand washing~~handwashing~~ trimmed with valves that~~which~~ are aseptically operated (i.e., knee or foot controls). The room or space~~It~~ may serve more than one nursery and may be located in the workroom. If the examination and treatment of infants will take place in the individual bassinets, space for physicians' and nurses' gowning shall be provided as well as a conveniently accessible hand-washing~~handwashing~~ sink trimmed with valves that~~which~~ are aseptically operated (i.e., knee or foot controls).

6) Infant Formula Facilities-
The hospital shall provide one of the following:

A) On-site formula preparation-

i) Clean-up facilities for washing and sterilizing supplies. These shall consist of a lavatory or sink equipped for hand washing~~handwashing~~, a bottle washer, work counter space, and an equipment sterilizer.

ii) A separate room for preparing infant formula. which~~—~~
It shall contain a lavatory or sink equipped for hand

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~~washing~~handwashing, a refrigerator, a work counter, a formula sterilizer, and storage facilities. The room~~It~~ may be located near the nurseries or at another appropriate place within the hospital. No direct access from the formula room to a nursery or to a nursery workroom shall~~will~~ be permitted.

B) Commercially prepared formula-

If a commercial infant formula is used, the storage and handling may be ~~done~~ in the nursery workroom or in another appropriate room that~~which~~ has a work counter, a sink equipped for hand
washing~~handwashing~~, and storage facilities.

7) Janitors' Closet

A closet shall be provided for the exclusive use of the housekeeping staff in maintaining the nursery unit shall be provided. The closet~~It~~ shall contain a floor receptor or service sink and storage space for housekeeping equipment and supplies.

8) Storage ~~spacesspace(s)~~ for replacement bassinets, phototherapy units, and other large items shall be provided. These storage ~~areasarea(s)~~ may be located either within the unit or in the central supplies storage.

i) Surgical Suite

The number of operating rooms and recovery beds and the sizes of the service areas shall be based on the expected surgical workload. The surgical suite shall be located and arranged to preclude unrelated traffic through the suite. The requirements of Section 250.1820(h) shall be used for the surgical suite wherever applicable. The suite shall provide the following elements:

1) General Operating Rooms~~Room~~(s).

Each room shall have a minimum clear area of 300 square feet exclusive of fixed cabinets and shelves. The minimum dimension shall be 15
~~feet~~15'-0". Provide a communications system connecting with the surgical suite control station shall be provided. At~~Provide~~ at least two X-ray~~x-ray~~ film illuminators shall be provided in each room.

2) Fracture Rooms-

Fracture rooms shall~~should~~ be provided with accessible splint facilities.

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The fracture room may be located in the emergency department, the surgical suite, or in another similar location.

3) Recovery Room:

The recovery room may be part of an approved combined surgical-obstetrical program (see Section 250.1820(h)).

- A) ~~The~~Locate the postoperative recovery room shall be located within or adjacent to the surgical suite. If possible, provide separate entrance and exit doors remote from each other shall be provided to facilitate a one-way traffic flow within the recovery room.
- B) ~~A~~There shall be a minimum of one recovery room bed shall be provided for each operating room.
- C) ~~A~~There shall be a minimum of 70 square feet per bed shall be provided in open units. This area shall exclude the ~~nurses'~~nursing station, work space, and storage area. In addition, a minimum of 4 feet shall~~4'-0"~~ must be maintained between the sides of the beds, at least 3 feet~~3'-0"~~ between the side of any bed and any wall or other fixed device, and at least 6 feet~~6'-0"~~ between the foot end of any bed and any other fixed equipment or device.
- D) The recovery room shall have adequate lighting of the type to allow accurate observation of the patients.
- E) ~~A~~There shall be a lavatory shall be provided, trimmed with valves that are operated without the use of hands. A clinical sink shall be provided~~accessible~~.
- F) A soiled holding area shall be provided.
- G) ~~A nurses'~~There shall be a nursing station shall be provided within the postoperative recovery room. Facilities for medical storage and preparation shall be provided.
- H) Adequate storage and work space within or adjacent to the recovery room shall be available for necessary supplies and equipment.

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- I) Each bed site shall be adequately equipped with oxygen, suction, and at least one duplex electrical outlet.
- J) Where ambulatory surgery is performed using local anesthetics in the surgery suite, a room separate from the general recovery room shall be set aside for the patients'patient's recovery.

4) Service Areas:
Individual roomsroom shall be provided when so noted; otherwise alcoves or other open spaces thatwhich will not interfere with traffic may be used. Services may be shared with and organized as part of the obstetrical facilities if the approved narrative program reflects this sharing concept. There shall be no crosscirculation between the surgical and delivery suites when using shared service areas. The following services shall be provided:

- A) Control station to permit surveillance of all traffic thatwhich enters the operating suite.
- B) Supervisor'sSupervisors office or station, which (may be part of the control station).
- C) Sterilizing facilitiesfacility(ies) with high speed autoclaves conveniently located to serve all operating rooms. If adequate provisions have been made for the replacement of sterile instruments during surgery, sterilizing facilities in the surgical suite will not be required.
- D) Drug distribution station—Provision shall be made for the preparation of medication to be administered to patients.
- E) Scrub facilities shall be conveniently located near each operating room, and shall be arranged to minimize any incidental splatter on nearby personnel or supply carts. Scrub sinks,Provide scrub sink(s) which shallmay be aseptically operated without the use of hands, shall be provided. (Wrist blades are not acceptable.)
- F) Soiled workroom or a soiled holding room that is part of a system

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for the collection and disposal of soiled materials. The soiled workroom shall contain a clinical sink or equivalent flushing type fixture, a work surface, sink equipped for hand washing~~handwashing~~, a waste receptacle, and a linen receptacle. A soiled holding room shall be similar to the soiled workroom except that the clinical sink and work counter may be omitted.

- | G) Fluid waste disposal facilities. ~~These shall be~~ conveniently located with respect to the general operating rooms. A clinical sink or equivalent equipment in a soiled workroom or in a soiled holding room would meet this requirement.
- | H) Clean workroom or a clean supply room. A clean workroom is required when clean materials are assembled within the surgical suite prior to use. A clean workroom shall contain a work surface, sink equipped for hand washing~~handwashing~~, and space for clean and sterile supplies. A clean supply room shall be provided when thea system ~~is~~ used for the storage and distribution of clean and sterile supplies ~~which~~ does not require the use of a clean workroom.
- | I) Anesthesia storage facilities. Unless official hospital governing board action prohibits in writing the use of flammable anesthetics, a separate room shall be provided for storage of flammable gases in accordance with the requirements of NFPA 99, Standard for Health Care Facilities~~detailed in The National Fire Protection Association Standards 56A (Inhalation Anesthetics) and 56F (Nonflammable Medical Gases)~~.
- | J) Anesthesia work area for cleaning, testing, and storing anesthesia equipment, which~~It~~ shall contain a work counter and sink.
- | K) Medical gas storage. Space for reserve storage of nitrous oxide and oxygen cylinders shall be provided.
- | L) Storage area for splints and traction equipment ~~shall be provided~~ for operating rooms equipped for orthopedic surgery.
- | M) Equipment storage area~~area(s)~~ for equipment and supplies used in

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| the surgical suite.

- | N) Staff clothing change areas. Appropriate areas shall be provided for male and female personnel (orderlies, technicians, nurses, and doctors) working within the surgical suite. The areas shall contain lockers, showers, toilets, lavatories, and space for donning scrub suits and boots.
- | O) Outpatient surgery change areas. If the program requires outpatient surgery, a separate area shall be provided where outpatients change from street clothing into hospital gowns and are prepared for surgery. This area shall include a waiting room, lockers, toilets, and clothing change or gowning area.
- | P) Patients' holding area. In facilities with two or more operating rooms, space shall be provided to accommodate stretcher patients waiting for surgery.
- | Q) Stretcher storage area.
- | R) Janitors' closet. A closet containing a floor receptor or service sink and storage space for housekeeping supplies and equipment shall be provided exclusively for the surgical suite.

| 5) Central Sterilizing and Supply Room:-

- | A) The central sterile supplies area shall be located either within the surgical suite or provided as a separate department within the hospital. The following shall be provided:
 - | i) A receiving and clean-up room containing work space and equipment for cleaning medical and surgical equipment, and for disposal or processing of unclean material. Hand washingHandwashing facilities operated without the use of hands shall be provided.
 - | ii) A clean workroom containing work space and equipment for sterilizing medical and surgical equipment and supplies.

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| iii)E) Storage areas for clean supplies and for sterile supplies (these may be in the clean workroom).

| iv)D) Unsterile supplies storage room (this may be located in another department).

| E) ~~Soiled or contaminated supply and equipment must be separated from the clean or sterilized supply and equipment.~~

| v)F) Cart storage areas.

| B)G) Facilities for cleaning and sanitizing carts may be centralized or departmentalized.

| C) ~~Soiled or contaminated supplies and equipment shall be separated from the clean or sterilized supplies and equipment.~~

| j) Obstetrics Suite-

| The number of delivery rooms, labor rooms, recovery beds, and the sizes of the service areas shall depend upon the estimated obstetrical workload. The obstetrical suite shall be located and arranged to preclude unrelated traffic through the suite. ~~The requirements of Part XV of the Act shall apply to this Section.~~

| 1) Delivery Rooms~~Room(s)~~.

| Each delivery room shall have a minimum clear area of 300 square feet exclusive of fixed and movable cabinets and shelves. The minimum dimension shall be 15 feet 15' 0" clear. The communications system shall be connected with the obstetrical suite control station. Separate resuscitation facilities (electrical outlets, oxygen, suction, and compressed air) shall be provided for newborn infants.

| 2) Labor Rooms~~Room(s)~~.

| These rooms shall be single or two-bed rooms with a minimum clear area of 80 square feet per bed. Labor beds shall be provided at the rate of two for each delivery room. In facilities having only one delivery room, two labor rooms shall be provided, one of which shall be large enough to function as an emergency delivery room. Labor rooms shall be arranged so that they are accessible to a nurses'~~nurses~~ work station, to facilities for medication, hand washing~~handwashing~~, and charting, and storage for

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supplies and equipment.

3) Recovery Room-

Recovery may take place in private or semiprivate patient rooms (if separate recovery rooms are not provided). If a separate recovery room is provided, it may be part of an approved combined surgical-obstetrical program (see Section 250.1820(h)). Recovery rooms, if provided, shall must meet the following requirements:

- A) The postpartum recovery room shallshould be within or adjacent to the obstetrics suite.
- B) The recovery room shall have adequate lighting of the type to allow accurate observation of the patients.
- C) AThere shall be a lavatory trimmed with valves operated without the use of hands shall be provided. A clinical sink shall be made accessible.
- D) A soiled holding area shall be available.
- E) Facilities for medical storage and preparation shall be provided.
- F) Adequate storage and work space within or adjacent to the recovery room shall be available for necessary supplies and equipment.
- G) Each bed site shall be adequately equipped with oxygen, suction and at least one duplex electrical outlet.

4) Service Areas-

Individual rooms shall be provided when required in this subsection (j)(4)so noted; otherwise alcoves or other open spaces thatwhich will not interfere with traffic may be used. (Services may be shared with and organized as part of the surgical facilities if the approved narrative program reflects this sharing concept.) Service areas shall be arranged to avoid direct traffic between the operating and the delivery rooms. The following services shall be provided:

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- | A) Control station to permit surveillance of all traffic ~~that which~~ enters the obstetrics suite.
- | B) ~~Supervisor's~~Supervisors office or station (may be part of control station).
- | C) Sterilizing ~~facilities~~facility(ies) with high speed ~~autoclaves~~autoelave(s) conveniently located to serve all delivery rooms. If adequate provisions have been made for ~~the~~ replacement of sterile instruments during delivery, sterilizing facilities in the delivery suite will not be required.
- | D) Drug distribution station. ~~Provision shall be made~~ for preparation of medication to be administered to patients.
- | E) Scrub facilities. ~~which~~ shall be conveniently located near each delivery room, and shall be arranged to minimize any incidental splatter on nearby personnel or supply carts. ~~Scrub sinks~~Provide ~~scrub sink(s)~~ ~~that which~~ may be ~~aseptically~~aseptically operated without the use of hands ~~shall be provided~~. (Wrist blades are not acceptable.)
- | F) Soiled workroom or a soiled room that is part of a system for the collection and disposal of soiled materials. The soiled workroom shall contain a clinical sink or equivalent flushing rim fixture, a work surface, a sink equipped for ~~hand washing~~handwashing, a waste receptacle, and a linen receptacle. A soiled holding room shall be similar to the soiled workroom except that the clinical sink and work counter may be omitted.
- | G) Clean workroom or a clean supply room. A clean workroom is required when clean materials are assembled within the obstetrical suite prior to use. A clean workroom shall contain a work surface, a sink equipped for ~~hand washing~~handwashing, and a space for clean and sterile supplies. A clean supply room shall be provided when a system issued for the storage and distribution of clean and sterile supplies does not require the use of a clean workroom.
- | H) Anesthesia storage facilities. Unless the official hospital

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governing board action prohibits in writing the use of flammable anesthetics, a separate room shall be provided for storage of flammable gases in accordance with NFPA 99, Standard for Health Care Facilities~~the requirements detailed in the National Fire Protection Association Standards 56A (Inhalation Anesthetics) and 56F (Nonflammable Medical Gases)~~.

- I) Anesthesia work area for cleaning, testing, and storing anesthesia equipment, which. It shall contain a work counter and sink.
- J) Medical gas storage. Space for reserve storage of nitrous oxide and oxygen cylinders shall be provided.
- K) Equipment storage ~~areas~~area(s) for equipment and supplies used in the obstetrics suite.
- L) Staff clothing change areas. Appropriate areas shall be provided for male and female personnel (orderlies, technicians, nurses, and doctors). These areas shall contain lockers, toilets, lavatories equipped for hand washing, handwashing and space for donning scrub suits and boots.
- M) Stretcher storage area. This area shall be out of the direct line of traffic.
- N) Janitors' closet. A closet containing a floor receptor or service sink and storage space for housekeeping supplies and equipment shall be provided exclusively for the obstetrical suite.

k) Emergency Suite:
Facilities for emergency care shall be provided in each hospital. The extent of the emergency services to be provided in the hospital will depend upon community needs and availability of other organized programs for emergency services within the community. Hospitals having a minimum level of emergency services shall provide at least the facilities indicated in subsections~~Items~~ (k)(1), and (k)(4)~~below~~, with back-up facilities within the hospital capable of furnishing the necessary support for services~~facilities~~ not provided in the emergency suite. Other hospitals shall provide as much of the following as that is consistent with the services offered.

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- 1) An entrance sheltered from the weather with ~~provision for~~ ambulance and pedestrian access.
- 2) A reception and control area conveniently located near the entrance, waiting ~~areas~~area(s) and treatment ~~rooms~~room(s).
- 3) Public waiting space with access to toilet facilities, public telephone, and drinking fountain.
- 4) ~~A treatment~~Treatment area. ~~The Treatment~~ area, which shall contain ~~hand washing~~handwashing facilities trimmed with valves that~~which~~ are aseptically operated (i.e., knee or foot controls), general storage, medication storage, ~~a~~ work surface, medical ~~X-ray~~X-ray film illuminators, and space for storage of emergency equipment such as defibrillators, cardiac monitors, and resuscitators (oxygen and suction may be portable).
- 5) A holding area adjacent to the treatment rooms.
- 6) A storage area out of the line of traffic for stretchers and wheelchairs.
- 7) Staff work and charting areas, which ~~This~~ may be combined with the reception and control ~~areas~~area or located within the treatment area.
- 8) Clean supply storage, which may be separate or located within the treatment area.
- 9) Soiled workroom or area containing a clinical sink, work surface, and sink equipped for ~~hand washing~~handwashing, waste receptacle, and linen receptacle.
- 10) ~~Toilet~~Provide toilet facilities convenient to the treatment area.
 - l) Outpatient Department
 - 1) ~~An outpatient~~Outpatient department, if provided, should be located on an easily accessible floor convenient to the radiology, pharmacy, and laboratory departments.

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| 2) Facilities shall include, at a minimum~~Recommended facilities include:~~

- A) Waiting room.
- B) Space for information, scheduling appointments~~appointment~~ and records.
- C) Medical social services.
- D) Examination rooms.
- E) Dressing booths.
- F) Utility rooms~~room(s)~~.
- G) Storage room.
- H) Janitors' closet.
- I) Public toilets (accessible to the waiting room).

m) Service Departments

1) Dietary Facilities

| A) General:
Construction, equipment, and installation shall comply with ~~the the standards specified in: The State of Illinois Rules (77 Ill. Adm. Code 750) for~~ Food Service Sanitation Code. Food service facilities shall be designed and equipped to meet the requirements of the hospital. These may consist of an on-site conventional food preparing system, a convenience food service system, or an appropriate combination of the two.

| B) Functional Elements:
The following facilities shall be provided as required to implement the type of food service selected:

| i) Control station for~~for~~ receiving food supplies.

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- ii) Storage space adequate. ~~Adequate~~ to provide normal and emergency supply needs, including food requiring cold storage and day storage.
- iii) Food preparation facilities. Conventional food preparation systems require space and equipment for preparing, cooking, and baking. Convenience food service systems such as frozen prepared meals, bulk packaged entrees, and individual packaged portions, or systems using contractual commissary service, require space and equipment for thawing, portioning, heating, cooking, and ~~or~~ baking.
- iv) Hand-washing facilities~~Handwashing facility(ies)~~ located-
Located in the food preparation area.
- v) Patients' meal service facilities, e.g., facilities. ~~Examples~~
are those required for tray assembly and distribution.
- vi) Dining space for. ~~For~~ ambulatory patients, staff and visitors.
- vii) Ware-washing~~Warewashing~~ space located-
Located in a room or an alcove separate from food preparation and serving areas. Commercial type dishwashing equipment shall be provided. Space shall also be provided for receiving, scraping, sorting, and stacking soiled tableware and for transferring clean tableware to the use areas. A hand-washing~~handwashing~~ lavatory shall be conveniently available.
- viii) Pot-washing~~Potwashing~~ facilities.
- ix) Storage areas for. ~~For~~ cans, carts, and mobile tray conveyors.
- x) Waste storage facilities located-
Located in a separate room easily accessible to the outside for direct pickup or disposal.

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- xi) Toilets accessible to dietary staff. Hand-washing facilities shall be immediately available.
- xii) Janitors' closet located. Located within the dietary department, containing. It shall contain a floor receptor or service sink and storage space for housekeeping equipment and supplies.
- xiii) Ice-making facilities.
- xiv) Adequate Provide adequate can, cart and mobile tray washing facilities as required.

2) Central Stores.

The following, including storage spaces adequate to meet the needs of the hospital, shall be provided:

- A) Unloading facilities.
- B) A receiving area.
- C) General storage rooms.

These facilities shall have storage spaces adequate to meet the needs of the hospital.

- D) Office space.

3) Linen Services.

A) On-site Processing.

If linen is processed at the hospital site, the following shall be provided:

- i) Soiled linen receiving, holding, and sorting room.
- ii) Laundry processing room.

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- | iii) Access to hand-washing~~handwashing~~ facilities.
- | iv) Separate clean linen storage and issuing room or area.
- | v) Clean linen inspection and mending room or area.
- | vi) Storage for laundry supplies.
- | vii) Janitors' closet containing a floor receptor or service sink and storage space for housekeeping equipment and supplies.
- | viii) Cart storage.
- | ix) Office space.

| B) Off-site Processing-

| If linen is processed off the hospital site, the following shall be provided:

- | i) A soiled linen holding room.
- | ii) Access to hand-washing~~handwashing~~ facilities.
- | iii) A clean linen, receiving, inspection, and storage room~~rooms~~.
- | iv) Cart storage.
- | v) Office space.

| 4) Facilities for Cleaning and Sanitizing Carts-

| Facilities shall be provided to clean and sanitize carts serving the central medical and surgical supply department, dietary facilities, and linen services. These may be centralized or departmentalized.

| 5) Employees'~~Employees~~ Facilities-

| In addition to the employees' facilities such as locker rooms, lounges,

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toilets, or shower facilities required~~dealled~~ ~~for~~ in certain departments, a sufficient number of such facilities as required to accommodate the needs of all personnel and volunteers shall be provided.

6) Janitors' Closets-

In addition to the janitors'Janitors' closets required~~dealled~~ ~~for~~ in certain departments, sufficient janitors' closets shall be provided throughout the hospital~~facility~~ as required to maintain a clean and sanitary environment. Each shall contain a floor receptor or service sink and storage space for housekeeping equipment and supplies. Spaces~~Space(s)~~ for large housekeeping equipment and for back-up supplies may be located in other areas.

7) Engineering Service and Equipment Areas-

The following shall be provided:

A) Rooms~~Room(s)~~ or separate buildings~~Separate Building(s)~~ for boilers, mechanical equipment, and electrical equipment~~Boilers, Meehanical Equipment, and Electrical Equipment~~.

B) Engineer's space~~Space~~.

C) Maintenance shops~~Shop(s)~~.

D) Storage room for building maintenance supplies~~Room for Building Maintenance Supplies~~.

E) Yard equipment storage~~Equipment Storage~~.

8) Waste Processing Services-

A) Storage and Disposal-

Space and facilities shall be provided for the sanitary storage and disposal of waste by incineration, mechanical destruction, compaction, containerization, removal, or by a combination of these techniques. Facilities for proper handling and disposal of infectious or radioactive waste substances shall be provided.

B) Incineration-

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If the hospital provides its own incineration:

- i) The incinerator shall be in a separate room or placed outdoors.
- ii) Design and construction of incinerators and trash chutes shall be in accordance with NFPA [Standard 82, Standard on Incinerators and Waste and Linen Handling Systems and Equipment](#).
- iii) Incinerators shall be equipped to conform to requirements prescribed by [local](#) air pollution [requirements, regulations in the area](#).

9) Storage:

In addition to the storage areas called for in certain departments of the hospital, suitable additional storage shall be provided.

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2640 Details

All details and finishes shall comply with the following:

a) Details

- 1) Compartmentation, exits, automatic extinguishing systems and other details relating to fire prevention and fire protection shall comply with requirements listed in the appropriate sections of [the NFPA Standard 101, Life Safety Code, 1976 Edition](#), for existing hospitals (for exception, see [subsection \(a\)\(2\) Subparagraph 2](#), of this Section).
- 2) Aisles, corridors, and interior ramps required for exit access from patient sleeping areas shall have a minimum clear width of [7 feet 7-0"](#); any such aisles, corridors, and interior ramps located in other patient use areas shall have a minimum clear width of [6 feet 6-0"](#).
- 3) Doors to patient rooms shall not be lockable from inside the room.

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- 4) Doors on all openings between corridors and rooms or spaces subject to occupancy, except elevator doors, shall be swing type. Openings to showers, baths, patient toilets, and other small wet-type areas not subject to fire hazard are exempt from this requirement. Sliding doors with a break-and-swing feature are acceptable.
- 5) Glazing of existing doors, sidelights, borrowed lights, and interior windows shall comply with thesee the State of Illinois "Safety Glazing Materials Act."
- 6) Elevator shaft openings shall be class B 1½-hour-labeled fire doors or shall meet the requirements of NFPA 101, Life Safety Code, for vertical shaft enclosureas approved by the Department.
- 7) Linen and refuse chutes shall meet or exceed the following requirements:
 - A) Service openings to chutes shall be kept locked if located in corridors or passageways. They may be located in a room of construction having a fire-resistance of not less than one hour.
 - B) Service openings to chutes shall have approved self-closing class B 1½-hour-labeled fire doors.
 - C) Chutes shall discharge directly into collection rooms separated from incinerator, laundry, or other services. Separate collection rooms shall be provided for trash and for linen. The enclosure construction for such rooms shall have a fire resistance of not less than two hours, and the doors thereto shall be not less than class B 1½-hour-labeled fire doors. External discharge containers need not be enclosed.
 - D) Gravity chutes shall be vented through the roof with provisions for continuous ventilation as well as for fire and smoke ventilation. Fire and smoke ventilating openings may be covered with single strength sheet glass.
 - E) See NFPA Standard 82, Standard on Incinerators and Waste and Linen Handling Systems and Equipment(Incinerators and Rubbish Handling) for other requirements.

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- 8) Grab bars shall be provided at all patients' toilets, showers, tubs, and sitz baths. The bars shall have 1½-inch clearance to walls and shall be securely anchored.
- 9) Location and arrangement of hand-washing~~handwashing~~ facilities shall permit their proper use and operation. Clearance~~Provide clearance~~ for blade-type operating handles shall be provided where required.
- 10) Mirrors shall not be installed at hand-washing~~handwashing~~ fixtures in food preparation areas or in sensitive areas such as nurseries, clean and sterile supplies, and scrub sinks.
- 11) Paper towel dispensers and waste receptacles or electric hand dryers shall be provided at all hand-washing~~handwashing~~ facilities except scrub sinks.

b) Elevators

All hospitals having patients' facilities (such as bedrooms, dining rooms, or recreation areas) or critical services (such as operating, delivery, diagnostic, or therapy) located on other than the main entrance floor shall have electric or electrohydraulic elevators.

- 1) Number of elevators.
 - A) At least one hospital-type elevator shall be installed where one to 59 patient beds are located on any floor other than the main entrance floor.
 - B) At least two hospital-type elevators shall be installed where 60 to 200 patient beds are located on floors other than the main entrance floor, or where the major inpatient services are located on a floor other than those containing patient beds. (Elevator service may be reduced for those floors that~~which~~ provide only partial inpatient services.)
 - C) At least three hospital-type elevators shall be installed where 201 to 350 patient beds are located on floors other than the main entrance floor, or where the major inpatient services are located on a floor other than those containing patient beds. (Elevator service

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may be reduced for those floors ~~that which~~ provide only partial inpatient services.)

D) For hospitals with more than 350 beds, the number of elevators provided shall be based on the hospital's program narrative~~will be acceptable if adequate~~.

2) Cars and platforms. Cars of hospital-type elevators shall have dimensions that will accommodate a patient bed and attendants and shall be at least 5 feet 5' 0" by 7 feet 7' 6". The car door shall have a clear opening of not less than 3 feet, 8 inches3' 8".

3) Leveling. Elevators shall be equipped with an automatic leveling device of the two-way automatic maintaining type with an accuracy of $\pm \frac{1}{2}$ inch.

4) Written certification of the latest inspection shall be posted in the cab if available.

c) Provisions for Natural Disasters
General requirements. An emergency radio communication system is desirable in each hospital facility. If installed, this system shall~~should~~ be self-sufficient in time of emergency and shall~~should~~ also be linked with the available community system and state emergency medical network system, including connections with police, fire, and civil defense system.

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2650 Finishes

a) Cubicle and window curtains and draperies shall be noncombustible or rendered flame retardant and shall pass both the large and small scale tests of NFPA Standard 701, Standard Methods of Fire Tests for Flame Propagation of Textiles and Films,~~"Fire Tests for Flame-resistant Textiles and Films."~~

b) Floors in areas and rooms in which flammable anesthetic agents are stored or administered to patients shall comply with NFPA 99, Standard for Health Care Facilities~~Standard 56A, "Inhalation Anesthetics."~~ Conductive flooring is not required in emergency treatment, operating, and delivery rooms provided that a written resolution is signed by the hospital governing board stating that no

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flammable anesthetic agents will be used in these areas, and provided that appropriate notices are permanently and conspicuously affixed to the wall in each such area and room.

- c) Floor materials shall be easily cleanable and have wear resistance appropriate for the location involved. Floors in areas used for food preparation or food assembly shall be water-resistant and grease-proof. Joints in tile and similar material in such areas shall be resistant to food acids. Floors in toilets, baths, janitor's closets and similar areas shall be water resistant. In all areas frequently subject to wet cleaning methods, floor materials shall not be physically affected by germicidal and cleaning solutions.
- d) Wall bases in kitchens, operating and delivery rooms, soiled workrooms, and other areas ~~that which~~ are frequently subject to wet cleaning methods shall be tightly sealed to the wall and floor and constructed without surface voids that can harbor vermin.
- e) All wall finishes shall be washable and, in the immediate area of plumbing fixtures, shall be smooth and moisture resistant. Walls in surgery, delivery, kitchens, and in other spaces, subject to frequent cleaning shall be of suitable materials.
- f) Floor and wall penetrations by pipes, ducts, and conduits shall be tightly sealed to minimize entry of vermin, smoke, and fire. Joints of structural elements shall be similarly sealed.
- g) Ceilings shall be cleanable, and those in sensitive areas such as surgical, delivery, and nursery rooms shall be readily washable and without crevices that can retain dirt particles. These sensitive areas, along with the dietary and food preparation areas, shall have a finished ceiling covering all overhead ductwork. Finished ceilings may be omitted in mechanical and equipment spaces, shops, general storage areas, and similar spaces, unless required for fire-resistive purposes.

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2660 Mechanical

- a) Any retrofit of existing heating, ventilating, or air conditioning systems for energy conservation purposes may meet any or all of the requirements of Section

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250.2480 (Mechanical) in lieu of the parallel requirements of this Section.

- | b) Boiler feed pumps, return pumps, and circulating pumps shall be furnished in duplicate, each of which has a capacity to carry the full load. Blow off valves, relief valves, nonreturn valves, injectors and fittings shall be provided to meet the requirements of the city and state codes and recommendations of the [American Society of Mechanical Engineers A.S.M.E.](#)
- | c) Air Conditioning, Heating and Ventilating Systems
 - 1) The systems should be capable of providing the following temperatures and humidities in the following areas:

Area Designation	Temperature		Relative Humidity %	
	°F	°C	Min.	Max.
Operating Room	70-76*	21-24*	50	60
Delivery Room	70-76*	21-24*	50	60
Recovery Room	75	24	50	60
Intensive Care Units	75-80*	24-27*	30	60
Nursing Units	75	24	30	60
Special Care Nursery Units	75-80*	24-27*	30	60
Other patient areas	75	24		

*Variable range required

- 2) Ventilation Systems
 - A) Air handling systems shall conform to NFPA [Standard No. 90A, Standard for Installation of Air Conditioning and Ventilating Systems \(1989\)](#), "Installation of Air Conditioning and Ventilating Systems".
 - B) Outdoor intakes ~~shall~~should be located as far as practical but not less than 15 feet from exhaust outlets of ventilation systems, combustion equipment stacks, medical-surgical vacuum systems, plumbing vent stacks, or from areas ~~that~~which may collect vehicular exhaust and other noxious fumes.

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- C) All ventilation air supplied to operating rooms, delivery rooms and nurseries shallshould be delivered at or near the ceiling of the area served, and all exhaust air from the area shallshould be removed near the floor level. At least two exhaust outlets shallshould be used in all operating and delivery rooms.
- D) All central ventilation or air conditioning systems shall be equipped with filters having efficiencies no less than those specified in the following:

FILTER EFFICIENCIES FOR CENTRAL
VENTILATION AND AIR CONDITIONING
SYSTEMS IN GENERAL HOSPITALS

Area Designation	Filter Efficiencies (percent)
Sensitive Areas*	50
Patient Care, Treatment, Diagnostic and Related Areas	50
Food Preparation Areas and Laundries	50
Administrative, Bulk Storage and Soiled Holding Areas	20

*Includes operating rooms, delivery rooms, nurseries, recovery rooms, and intensive care units.

- E) The filter shall be located upstream of the air conditioning equipment. If a prefilter is installed, it shall be located upstream of the air conditioning equipment. The main filter may be located before or after the equipment.
- F) Access to filters for changing shall be provided outside of clean areas unless approved otherwise by the Department.
- G) All filter efficiencies shall be average atmospheric dust spot efficiencies tested in accordance with the ASHRAE Handbook of Fundamentals-1981.

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H) Filter frames shall be durable and shall provide an airtight fit with the enclosing duct work. All joints between filter segments and enclosing duct work shall be gasketed or sealed to provide a positive seal against air leakage.

I) A manometer shall be installed across each filter bed serving central air systems.

J) Ducts that which penetrate construction intended for X-ray~~x-ray~~ or other ray protection shall maintain the effectiveness of the protection.

K) Fire and smoke dampers shall be constructed, located and installed in accordance with the requirements of NFPA Standard No. 90A, Standard for "Installation of Air Conditioning and Ventilating Systems". Exception: all systems, regardless of size, that which serve more than one smoke or fire zone, shall be equipped with smoke detectors to shut down fans automatically as specified in Paragraph 4-3.1 of NFPA 90A~~that Standard~~.

L) Laboratory hoods shall meet the following general requirements:

- i) The~~the~~ exhaust system shall be separate from the building exhaust system~~s~~, and
- ii) The~~the~~ exhaust duct system shall be of noncombustible corrosion-resistant material consistent with the usage of the hood.

M) Laboratory hoods shall meet the following special requirements:

- i) Each hood for the processing of infectious or radioactive materials shall have an adequate face velocity, shall be connected to an independent exhaust system, shall be provided with filters with 99.97 percent efficiency (based on the DODDOP, diocylphthalate~~diethylphthalate~~, test method as described in DODDOP Penetration Test Method MIL STD ~~No.~~282 (1976): Filter Units, Protective

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Clothing, Gas-Mask Components and Related Products: Performance Test Methods) in the exhaust system, and shall be designed and equipped to permit the safe removal, disposal and replacement of contaminated filters.

ii) Duct systems in which radioactive and strong oxidizing agents are present shall be constructed of corrosion-resistant material consistent with usage for a minimum distance 10 feet from the hood and shall be equipped with wash-down~~washdown~~ facilities.

N) The hood and duct system for cooking equipment used in processes producing smoke or grease-laden vapors shall comply be in conformance with NFPA Standard No. 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations (1991), "Vapor Removal Cooking Equipment." That portion of the fire extinguishment system required for protection of the duct system may be omitted when all cooking equipment is served by listed grease extractors.

O) Other exhaust hoods in food preparation centers shall have an adequate exhaust rate.

P) Clean-out~~Cleanout~~ openings shall be provided to allow proper cleaning of the duct system serving kitchen and food preparation areas.

Q) The ventilation system for anesthesia storage rooms shall conform to the requirements of NFPA Standard No. 99, Standard for Health Care Facilities, (1993), "Health Care Facilities Code," including the gravity option system.

R) Boiler rooms shall be provided with sufficient outdoor air to maintain proper combustion rates for equipment.

S) Rooms containing heat-producing equipment, such as boiler rooms, heater rooms, food preparation centers, laundries, and sterilizer rooms, shall be ventilated.

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T) For general pressure relationships and ventilation of certain hospital areas, see ~~Section 250~~ Table F.

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2670 Plumbing and Other Piping Systems

a) General

All plumbing systems shall be installed in accordance with the requirements of the Illinois ~~State~~ Plumbing Code ~~code (77 Ill. Adm. Code 890)~~ except that the number of waterclosets, urinals, lavatories, bathtubs, showers, drinking fountains, and other fixtures shall be as required by the hospital programs.

b) Plumbing Fixtures

- 1) Plumbing fixtures shall be of nonabsorptive acid-resistant materials.
- 2) Hand-washing ~~Handwashing~~ lavatories used by medical and nursing staff shall be trimmed with valves ~~that~~which can be operated without the use of hands where specifically required in Section 250.2630~~previous sections~~.

- A) When blade handles are used for this purpose the blade handles shall not exceed 4½ inches in length, except ~~that~~ the handles on clinical sinks shall not be less than 6 inches in length.

- B) The hand-washing~~handwashing~~ and scrub sinks, in surgery and emergency treatment, nursery, and delivery units~~Surgery and Emergency Treatment, Nurseries, and Delivery~~ shall be trimmed with valves ~~that~~which are aseptically~~aseptically~~ operated (i.e., knee or foot controls) without the use of hands. Wrist blades are not acceptable.

- 3) Shower bases and tubs shall be provided with nonslip surfaces for standing patients.

c) Water Supply Systems

- 1) Systems shall be designed to supply water at sufficient pressure to operate all fixtures and equipment during maximum demand periods.

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- 2) Bedpan-flushing devices shall be provided on each patient toilet unless a clinical service sink is centrally located in each nursing unit. This requirement does not apply to psychiatric units.
- 3) Water distribution systems shall be arranged to provide hot water at each hot water outlet at all times. Hot water temperature at shower, bathing, and hand-washing facilities shall not exceed 110° F (43° C).
- d) Hot Water Heaters and Tanks-
Storage tanks shall be fabricated of corrosion-resistant metal or lined with non-corrosive material.
- e) Drainage Systems
 - 1) Drain lines from sinks in which acid wastes may be poured shall be fabricated from acid-resistant material.
 - 2) Floor drains shall not be installed in operating rooms. Flushing rim-type drains may be installed in cystoscopic operating roomsCystoscopic Operating Rooms.
 - 3) Building sewers shall discharge into a public sewersewage system.
When a public sewer system is not available, sewage and liquid waste shall be collected, treated, and disposed of in a private sewage disposal system. The design, construction, maintenance, and operation of the system shall comply with the Department's Private Sewage Disposal Code (77 Ill. Adm. Code 905), or into other approved disposal system.
- f) Medical Gas Service
Medical gas inlets and outlets shall be provided as identified in Table E.
Oxygen and Vacuum
Oxygen and vacuum shall be provided where required.
- g) Service Outlets
Service outlets for central housekeeping vacuum systems, if used, shall not be located within operating rooms.
- h) Fire Extinguishing Systems-

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- 1) All existing fire extinguishing systems shall be designed, installed and maintained in accordance with NFPA 101, Life Safety Code, NFPA 13, Standards for the Installation of Sprinkler Systems and NFPA 25, Standards for the Inspection, Testing and Maintenance of Water-Based Fire Protection Systems 13A, (Sprinkler Systems Maintenance).
- 2) All buildings more than two stories in height shall be provided with a Class III, Type 1 inside standpipe system. Such standpipe systems shall conform to the requirements of NFPA 14, Standards for the Installation of Standpipe, Private Hydrants, and Hose Systems, (Standpipe and Hose Systems).

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)

Section 250.2680 Electrical Requirements

- a) General
All electrical materials shall comply with theavailable standards of Underwriters' Laboratories, Inc., or equivalent.
- b) Switchboards and Power Panels.
Circuit breakers or fusible switches that provide disconnecting means and overcurrent protection for conductors connected to switchboards and panelboards shall be enclosed or guarded to provide a dead-front type of assembly. The main switchboard shall be accessible only to authorized persons. The switchboards shall be convenient for use, readily accessible for maintenance, clear of traffic lanes, and in a dry, ventilated space free of corrosive fumes or gases. Overload protective devices shall be suitable for operating properly in the ambient temperature conditions.
- c) Panelboards.
Panelboards serving lighting and appliance circuits shall be conveniently located.
- d) Lighting.
 - 1) All spaces occupied by people, machinery, and equipment within buildings and at approaches to and exits from buildings shall have lighting.

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2) Patients' rooms shall be equipped with general lighting and night lighting.

3) Operating and delivery rooms shall have general lighting in addition to local lighting provided by special lighting units at the surgical and obstetrical tables.

| e) Receptacles (Convenience Outlets)[-](#)

| | 1) Anesthetizing locations. Each operating and delivery room shall have receptacles of the types described in NFPA [99, Standard for Health Care Facilities](#), [Standard 56A, "Inhalation Anesthetics."](#)

| | 2) Patients' rooms. Each patient room shall have duplex grounding type receptacles. Nurseries shall have similar receptacles.

| | 3) Corridors. Duplex receptacles for general use shall be installed approximately [50 feet](#)~~50'-0"~~ apart in all corridors and within [25 feet](#)~~25'-0"~~ of the ends of corridors.

| f) Equipment Installation in Special Areas[-](#)

| | 1) Installation in anesthetizing locations. All electrical equipment and devices, receptacles, wiring and conductive flooring shall comply with NFPA [99, Standard for Health Care Facilities](#), [Standard 56A, "Inhalation Anesthetics."](#) except that a static-type line isolation monitor will be permitted.

| | 2) Special grounding system. In areas such as intensive care units and special care nurseries, where a patient may be treated with an internal probe or catheter, the patient [rooms](#)~~'rooms~~ ground [system](#)~~'system~~ shall comply with the following:

| | | A) A patient ground point shall be provided within [10 feet](#)~~10' 0"~~ of each bed. The patient ground is intended to assure that under normal conditions all electrically conductive surfaces of equipment and furnishings within reach of the patient will be at the same electrical potential plus or minus 10 millivolts differential. This requirement is not intended to apply to devices and utensils such as

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bedpans and other small portable nonelectrical devices.

- B) One patient ground point may serve more than one patient, but one patient shall not be served by more than one patient ground point.
- C) The grounding conductor connecting any receptacle serving a patient and the patient ground point shall not exceed the equivalent resistance of 15 feet~~15'-0"~~ of No. 12 American wire gauge (AWG) copper conductor.
- D) Exposed metal building surfaces or utility piping within reach of the patient or others who may touch the patient~~him~~ shall be grounded to the patient groundpoint or to a separately established room groundpoint.
- E) A reference groundpoint shall be established in the electrical supply panel.
- F) The patient groundpoint and the room groundpoint, where separated, shall be interconnected by a continuous, insulated, copper conductor not smaller than No. 12 AWG, and similarly connected to the reference ground. The groundpoints~~or~~ may be individually connected to the reference groundpoint provided that the ground conductor resistance does not exceed that of 15 feet~~15'-0"~~ of No. 12 AWG copper conductor.
- G) Receptacle ground terminals shall be connected to the patient groundpoint or to the reference groundpoint provided that grounding conductor resistance to the reference groundpoint does not exceed that of 15 feet~~15'-0"~~ of No. 12 AWG copper conductor.
- H) Grounding of all metallic raceways shall be assured by means of grounding bushings on all conduit terminations at the panelboard and by means of an insulated, continuous, stranded, copper grounding conductor, not smaller than No. 12 AWG, extended from the grounding bus in the panelboard to the conduit grounding bushings.
- I) Grounding of metallic switch and receptacle plates shall be

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provided by means of the mounting-screw connections to the device mounting yokes.

g) Nurses' Calling System:

- 1) General. In general patient areas, each room shall be served by at least one calling station and each bed shall be provided with a call button. Two call devices serving adjacent beds may be served by one calling station. Calls shall register with floor staff and shall actuate a visible signal in the corridor at the patients' door, and in all other appropriate areas. In multicorridor nursing units, additional visible signals shall be installed at corridor intersections.
- 2) Patients' emergency. A nurses' call emergency station shall be provided for patients' use at each patient's toilet, bath, sitz bath, and shower room.
- 3) Intensive care. In areas such as intensive care where patients are under constant surveillance, the nurses' calling system may be limited to a bedside station that will actuate a signal that can be readily seen or heard by the nurse.
- 4) Nurses' emergency. A communications system that which may be used by nurses to summon assistance shall be provided in each operating, delivery, recovery, emergency treatment, and intensive care room, in nurseries, and in supervised nursing units for psychiatricmental patients.

h) Emergency Electric Service:

- 1) General. To provide electricity during an interruption of the normal electric supply, an emergency source of electricity shall be provided and connected to certain circuits for lighting and power.
- 2) Sources. The source of this emergency electric service shall be as follows:
 - A) An emergency generating set when the normal service is supplied by one or more central station transmission lines.
 - B) An emergency generating set or a central station transmission line when the normal electric supply is generated on the premises.

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- 3) Emergency generating set. The required emergency generating set, including the prime mover and generator, shall be located on the premises and shall be reserved exclusively for supplying the emergency electrical system. EXCEPTION: A system of prime movers ~~that which~~ are ordinarily used to operate other equipment and alternately used to operate the emergency ~~generator generator(s)~~ will be permitted provided that the number and arrangement of the prime movers are such that when one of them is out of service (due to breakdown or for routine maintenance) the prime ~~movers mover(s)~~ can operate the required emergency ~~generator generator(s)~~, and provided that the connection time requirements described in subsection (h)(4)(D)(i) of this Section are met.
- 4) Emergency electrical connections. Emergency electrical service shall be provided to the distribution systems as follows:
 - A) Circuits for the safety of patients and personnel:
 - i) Illumination of means of egress as required in NFPA Standard 101 ~~(Life Safety Code)~~.
 - ii) Illumination for exit signs and exit directional signs as required in NFPA Standard 101 ~~(Life Safety Code)~~.
 - iii) Alarm systems, including fire alarms activated at manual stations, water flow alarm devices of sprinkler ~~system system~~ if electrically operated, fire and smoke detecting systems, and alarms required for nonflammable medical gas systems.
 - iv) Paging or speaker systems if intended for communication during emergency. Radio transceivers where installed for emergency use shall be capable of operating for at least one hour upon total failure of both normal and emergency power.
 - v) General illumination and at least one duplex receptacle in the vicinity of the generator set.

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B) Circuits essential to care, treatment, and protection of patients.

- i) Task illumination and necessary life support receptacles in infant nurseries; medicine dispensing areas; cardiac catheterization laboratories; angiographic laboratories; labor, operating delivery, and recovery rooms; dialysis units; intensive care areas; emergency treatment rooms; and nurses' stations.
- ii) Corridor duplex receptacles in patient areas.
- iii) Nurses' calling system.
- iv) Blood bank refrigeration.
- v) Equipment necessary for maintaining telephone service.
- vi) Fire pump if installed.

C) Circuits ~~that which~~ serve necessary equipment. The connection to the following emergency electric services shall be delayed automatic except for heating, ventilation, and elevators which may be either delayed automatic or manual:

- i) Equipment for heating, operating, delivery, labor, recovery, intensive care, nursery, and general patient rooms except that service for heating of general patient rooms will not be required under either of the following conditions: if the design temperature is higher than 20°F (-7°C) based on the Median of Extremes as shown in the ASHRAE Handbook of Fundamentals, or if the hospital is served by two or more electrical services supplied from separate generators or a utility distribution network having multiple power input sources and arranged to provide mechanical and electrical separation so that a fault between the hospital and the generating sources will not likely cause an interruption of the hospital service feeders.
- ii) Elevator service that will reach every patient floor.

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Throwover facilities shall be provided to allow temporary operation of any elevator for the release of persons who may be trapped between floors.

- iii) Ventilation of unfenestrated operating and delivery rooms.
- iv) Central suction systems serving medical and surgical functions.
- v) Equipment that which must be kept in operation to prevent damage to the building or its contents.

D) Details.

- i) The emergency electrical system shall be so controlled that after interruption of the normal electric power supply the generator is brought to full voltage and frequency. It must be connected within 10 seconds through one or more primary automatic transfer switches to emergency lighting systems; alarm systems; blood banks; nurses' calling systems; equipment necessary for maintaining telephone service; and task illumination and receptacles in operating, delivery, emergency, recovery, and cardiac catheterization rooms, intensive care nursing areas, nurseries, and other critical patient areas. All other lighting and equipment required to be connected to the emergency system shall either be connected through the above described primary automatic transfer switches or through other automatic or manual transfer switches.
- ii) Receptacles connected to the emergency system shall be distinctively marked. Storage battery-powered lights, provided to augment the emergency lighting or for continuity of lighting during the interim of transfer switching immediately following an interruption of the normal service supply, shall not be used as a substitute for the requirement of a generator. Where stored fuel is required for emergency generator operation, the storage capacity shall be sufficient for not less than 24-hour

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continuous operation.

(Source: Amended at 35 Ill. Reg. 6386, effective March 31, 2011)