

## POLICY

# Interdisciplinary Design Team Membership

## Purpose

The Non-Hospital Medical and Surgical Facilities Accreditation Program (NHMSFAP) Committee is responsible for establishing accreditation standards, policies, rules, procedures and guidelines for non-hospital facilities and for ensuring facility compliance with its standards, policies, rules, procedures and guidelines and with the College of Physicians and Surgeons of BC's (CPSBC's) Bylaws.

This policy addresses the requirements for establishing an interdisciplinary design team for any major renovations or new construction.

## Policy

### Non-hospital facility design standards

All major renovations and new construction are required to meet the edition of the Canadian Standards Association (CSA) Z8000 Canadian health-care facilities standard in effect at the time of the proposed major renovations or new construction.

CSA Z8000 is the overarching standard for health-care facility planning, design and construction. As the overarching standard, it references other applicable standards including but not limited to: heating, ventilation and air-conditioning (HVAC), electrical, and medical gas pipelines.

### Project planning and design process

Project planning, design, construction and commissioning processes are the responsibility of the facility medical director. At the very start of the planning process, the facility medical director is required to inform the NHMSFAP Committee in writing of the intention to renovate an existing non-hospital facility or build a new non-hospital facility.

An interdisciplinary design team (IDT) must be established for the project. This IDT is to be established from the very start of the planning process and remain in place until the facility has been granted provisional accreditation (new facilities) or approval to begin using the renovated space.

The IDT should be of a size and makeup appropriate to the scope and size of the project. At a minimum, the IDT must be comprised of the following facility administrator and professional experts:

- medical director, who is a licensee
- architect(s)
- engineer(s)
- infection, prevention and control advisor

These core members of the IDT are to remain constant and must be consulted throughout the entire project.

These core members of the IDT are to have the necessary qualifications, training, education and experience to perform their role (e.g. professional licensure, trade certificate, previous hospital/non- hospital facility planning, design and construction project experience).

Once the IDT develops them, detailed design plans of the proposed facility layout are to be submitted to CPSBC for review to ensure that there are no concerns from an accreditation perspective.

Blueprints/layout drawings submitted to CPSBC for review must demonstrate conformance with CSA Z8000 and include:

- a detailed description of the facility's functional program including scope of services such as types of anesthesia, medical/surgical specialties (e.g. ophthalmology, endoscopy, orthopedics), projected procedural volumes at full capacity and population needs (e.g. overnight stay, pediatrics)
- placement of all rooms and areas (clinical and non-clinical) within the facility
- area measurements (m<sup>2</sup> or ft<sup>2</sup>) for each clinical and non-clinical room, bay or space and clearances around stretchers/chairs
- placement of all major pieces of furniture, equipment and fixtures (e.g. hand hygiene sinks, stretchers, imaging equipment, sterilizers, doors, windows, cabinetry)
- written sign-off on the blueprints/layout drawings by all core members of the IDT

Only detailed designs developed by the IDT and which comply with CSA Z8000 are to be submitted to CPSBC. Blueprints/layout drawings submitted without the required details and sign-off will be returned without being reviewed. If construction is commenced based on design plans that CPSBC has not reviewed, the risk of substantial redesign costs to meet accreditation requirements is incurred by the facility.

### **Role of the NHMSFAP**

As the subject matter expert in the regulation and accreditation of non-hospital facilities, the NHMSFAP's role in the review of blueprints/layout drawings is to verify limited elements for conformance with CSA Z8000 standards, such as the appropriate spacing and placement of clinical and non-clinical rooms, infection, prevention and control parameters and room size(s)/space allocations. Following its review, the NHMSFAP's role is to advise the medical director if there are any concerns with the proposed layout where, if constructed, the facility

would not meet accreditation standards. It is not the role of the NHMSFAP to design the non-hospital facility or to provide technical or engineering review or advice.

Through its accreditation processes, the NHMSFAP also requires the submission of letters of assurance and other supporting documentation from the registered professionals of the IDT confirming conformance with the CSA health-care infrastructure standards (i.e. Z8000, HVAC, electrical). These

letters are required to bear the registered professional's seal and signature and provide the NHMSFAP with the assurance that the registered professionals have sufficient personal knowledge and involvement in the project/system/infrastructure to confirm conformance with the required CSA standard(s).

## Responsibility

Role	Responsibility
Medical director	<ul style="list-style-type: none"> <li>• Provide written notification to the NHMSFAP Committee of the intent to build a new facility or commence renovations for the purpose of modifying and/or upgrading the existing facility or new construction</li> <li>• Submit an application as directed</li> <li>• Establish an interdisciplinary design team (IDT) with, at minimum, the required core members</li> <li>• Submit blueprints/layout drawings for review</li> <li>• Ensure blueprints/layout drawings submitted for review have been signed off by all core members of the IDT confirming design conformance with CSA Z8000</li> </ul>
NHMSFAP staff	<ul style="list-style-type: none"> <li>• Review submitted blueprints/layout drawings to verify limited elements for conformance with CSA Z8000</li> <li>• Advise the medical director if there are any concerns with the proposed layout where, if constructed, the facility would not meet accreditation standards</li> </ul>
NHMSFAP Committee	<ul style="list-style-type: none"> <li>• Establish standards, rules, policies and guidelines for applications for renovations or new construction</li> <li>• Determine if a facility should be granted accreditation</li> </ul>

## References

1. Canadian Standards Association. Canadian health-care facilities. 2nd ed. Toronto: Canadian Standards Association; 2018. 518 p. CSA Standard: Z8000-18.
2. Non-Hospital Medical and Surgical Facilities Accreditation Program; College of Physicians and Surgeons of British Columbia. Policy: renovations and new

construction to a facility [Internet]. Vancouver: College of Physicians and Surgeons of British Columbia; 2017 [cited 2021 Aug 20]. 3 p.

3. Non-Hospital Medical and Surgical Facilities Accreditation Program; College of Physicians and Surgeons of British Columbia. Policy: major renovations for reasons of maintenance or restoration [Internet].
4. Vancouver: College of Physicians and Surgeons of British Columbia; 2019 [cited 2021 Aug 20]. 4 p.