



PUBLIC HEALTH DIVISION
Office of Health Care Regulation and Quality Improvement

Kate Brown, Governor

Oregon
Health
Authority

Oregon Health Authority
Public Health Division
Health Care Regulation and Quality Improvement

Amendments to:

2018
Facility Guidelines Institute
Guidelines for Design and Construction of
Hospitals

for purposes of the following administrative rules:

OAR 333-071-0580(5)(a)

OAR 333-76-1050

OAR 333-535-0015

1.1 Introduction

1.1-2 New Construction

Project submittal criteria shall comply with OAR 333-675-0000. Projects with any of the following scopes of work shall be considered new construction and shall comply with the requirements in the *Guidelines for Design and Construction of Hospitals*:

1.1-3.1.1.2 Major renovation projects

Project submittal criteria shall comply with OAR 333-675-0000. Projects with either of the following scopes of work shall be considered a major renovation and shall comply with the requirements for new construction in the *Guidelines for Design and Construction of Hospitals* to the extent possible as determined by the authority having jurisdiction:

1.1 Introduction

1.1-3.1.2.1 Where major structural elements make total compliance impractical or impossible, exceptions shall be considered **in accordance with the Oregon administrative rules specific to the physical environment of the type of hospital under consideration.**

***1.1-3.1.2.2** Minor renovation or replacement work shall be permitted to be exempted from the requirements in Section [1.1-3.1.1](#) (Compliance Requirements) provided they **meet the criteria specified in OAR 333-675-0000(2) or (3) and** do not reduce the level of health and safety in an existing facility.

1.1-3.1.4 Temporary Waivers

When parts of an existing facility essential to continued overall facility operation cannot comply with particular standards during a renovation project, a temporary waiver of those standards shall be permitted as determined by the authority having jurisdiction if patient care and safety will not be jeopardized as a result. **Reference Oregon administrative rules specific to the physical environment of the type of hospital under consideration.**

1.1-8 Codes, Standards, and Other Documents Referenced in the *Guidelines* (additional reference added)

ASHRAE 62.1: *The Standards for Ventilation and Indoor Air Quality* (2016)

***Building Industry Consulting Services International (BICSI) Standards* (2018)**

NFPA 50: *Standard for Bulk Oxygen Systems at Consumer Sites* (2001)

NFPA 99: *Health Care Facilities Code* (2012 as adopted by CMS)

NFPA 101: *Life Safety Code*® (2012 as adopted by CMS)

1.2 Planning, Design, Construction, and Commissioning

~~1.2-2.1.2.3~~ Activities such as equipment replacement, fire safety upgrades, or minor renovations that will not change the facility's function or character shall not require a functional program.

~~*1.2-2.1.2.1~~ The governing body shall be responsible for having a functional program developed, documented, and updated. **The governing body may delegate documentation of the functional program to consultants with subject matter expertise. The governing body shall review and approve the functional program.**

A1.2-2.1.1 Functional program purpose

a. All projects, large and small, require a functional program to guide the design. The length and complexity of the functional program will vary greatly depending on project scope. ~~The functional program for a small, simple project might consist of a simple sketch or a description of a few sentences.~~

~~A1.2-2.1.2.1~~ The governing body may delegate documentation of the functional program to the architect or another consultant.

1.2 Planning, Design, Construction, and Commissioning

1.2-2.2.7.4 A description of the following:

- (a) Special design feature(s);**
- (b) Occupant load, numbers of staff, patients, visitors and vendors;**
- (c) Issue of privacy/confidentiality for patient;**
- (d) In treatment areas, describe:**
 - (A) Types of procedures;**
 - (B) Design considerations for equipment;**
 - (C) Requirements where the circulation patterns are a function of asepsis control; and**
 - (D) Highest level of sedation, if applicable.**

1.2 Planning, Design, Construction, and Commissioning

1.2-4.1.1.2 To support this goal, an interdisciplinary team shall develop a safety risk assessment (SRA). **A copy of the SRA shall accompany construction documents submitted to the Oregon Health Authority, Facility Planning and Safety program.**

1.2-4.6.1 Behavioral and Mental Health Elements of the Safety Risk Assessment

The SRA report shall identify areas where patients at risk of mental health injury and suicide will be served. **Elements of the assessment shall include but are not limited to:**

- (1) A statement explaining the psychiatric population groups served;**
- (2) A discussion of the capability for staff visual supervision of patient ancillary areas and corridors;**
- (3) A discussion of the risks to patients, including self-injury, and the project solutions employed to minimize such risks; and**
- (4) A discussion of building features and equipment, including items which may be used as weapons, that is intended to minimize risks to patients, staff and visitors.**

1.2 Planning, Design, Construction, and Commissioning

~~*1.2-8 Commissioning~~

Subsections 1.2-8.1 through 1.2-8.3.3 are deleted in entirety.

1.2 Planning, Design, Construction, and Commissioning

~~*1.2-9 Record Drawings and Manuals~~

Subsections 1.2-9.1 through 1.2-9.3.1.6 are deleted in entirety.

2.1 Common Elements for Hospitals

2.1-2.8.2.1

This area shall include the following:

- (2) Hand-washing station(s)
 - (a) At least one hand-washing station shall be **provided within 20 feet and not through a door. See section 2.1-7.2.2.8 (Hand-washing stations) for requirement. Located in, next to, or directly accessible to the administrative center or nurse station.**
 - ~~(b) A hand sanitation dispenser shall be permitted as a substitute for this requirement.~~

2.1 Common Elements for Hospitals

2.1-2.8.7.3

Additional requirements for hand-washing stations that serve multiple patient care stations

- (1) At least one hand-washing station shall be provided for every four patient care stations or fewer. ~~and for each major fraction thereof.~~

2.1 Common Elements for Hospitals

2.1-2.8.10.1

~~In public areas, all~~ Ice-making equipment shall be of the self-dispensing type.

2.1 Common Elements for Hospitals

~~2.1-2.8.10.2~~ In areas restricted to staff only, use of storage bin type equipment for making and dispensing ice shall be permitted.

2.1-2.8.12.3 Soiled holding room.

This room shall contain the following:

- (1) Hand-washing station ~~or hand sanitation station~~

2.1 Common Elements for Hospitals

***2.1-4.2.8.7 Hand-washing station.**

A hand-washing station(s) shall be provided ~~either in an anteroom or immediately outside the room where open medication(s) are prepared~~ **within each separate room where open medication is prepared for administration except where prohibited by OAR chapter 855, division 045; USP 797 or USP 800. Where a hand-wash station is prohibited in the compounding room, a hand-wash station(s) shall be provided in an anteroom.**

2.1 Common Elements for Hospitals

2.1-4.3.1.3 Regulations. Construction, equipment, and installation of food and nutrition service facilities in a hospital shall comply with the requirements of:

(5) All offered dietary services shall comply with Oregon Health Authority Food Sanitation Rules, Chapter 333, division 150 and other authorities having jurisdiction.

2.1 Common Elements for Hospitals

2.1-5.2.2.2 Laundry facilities

- (2) Laundry processing room. This room shall have space for commercial or industrial washing and drying equipment that can process at least a seven-day supply of laundry during the regularly scheduled work week.
- (a) Washers/extractors. Washers/extractors shall be located between the soiled linen receiving and clean processing areas. Washers/Extractors shall provide a temperature of at least 160 degrees Fahrenheit for a minimum of 25 minutes or include use of a chemical disinfectant.**
- (b) Dryers**
- (c) Supply storage. Storage shall be provided for laundry supplies.**

2.1 Common Elements for Hospitals

2.1-5.4.1.3 Regulated waste holding spaces

- (1) Secured space shall be provided for regulated medical waste and other regulated waste types.
 - (a) Where provided as interior spaces, regulated medical waste or infectious waste holding spaces shall have cleanable floor and wall surfaces.
 - (i) Wall base shall be integral and coved with the floor, tightly sealed to the wall, and constructed without voids that can harbor insects.**
 - (ii) Shall have hand sanitation dispenser in or adjacent to interior regulated waste storage spaces.**
- (2) Such holding spaces shall provide:
 - (a) ~~Illumination to a minimum of 50 foot candles per~~ **Illuminating Engineering Society of North America (IES) standards**
 - (b) Protection from unauthorized entry
- (4) Regulated waste management shall be in accordance with the requirements of OAR Chapter 333, division 056**

2.1 Common Elements for Hospitals

2.1-6.2.7.1 Storage. ~~Where a wheelchair(s) owned by the health care organization is made available for patient use,~~ A designated area located out of the required corridor width and directly accessible to the entrance shall be provided for **storage of** at least one wheelchair.

2.1 Common Elements for Hospitals

2.1-7.2.2.11 radiation protection.

(4) All imaging facilities and radiation producing equipment installations must comply with OAR Chapter 333, divisions 100 through 123, and be licensed by the Oregon Health Authority, Radiation Protection Services program.

2.1-7.2.2.15 Work Surfaces:

***Work areas.* Where a work space, work area, work counter, or work surface is provided, it shall have a minimum of 4 square feet (.37 square meter) of contiguous clear surface for each person programmed to work in the space at the same time. A mobile cart meeting these requirements shall be permitted.**

2.1 Common Elements for Hospitals

*2.1-7.2.3.1 Flooring and wall bases

(7) Floor and wall base assemblies

(a) The room types listed in this section shall have floor and wall base assemblies that are monolithic and have an integral coved wall base that is carried up the wall a minimum of 6 inches (150 mm) and is tightly sealed to the wall.

(i) Operating room

(ii) Class 2 and Class 3 imaging rooms

(iii) Cesarean delivery room

(iv) Procedure rooms where cystoscopy, urology, and endoscopy procedures are performed

(v) Endoscope processing room

(vi) IV and chemotherapy preparation room

(vii) Airborne infection isolation (AII) room

(viii) Protective environment (PE) room

(ix) Anteroom to AII and PE rooms, where provided

(x) Sterile processing facility

(xi) Bathing and toilet rooms

(xii) Soiled workrooms and soiled hold rooms

(xiii) Environmental services rooms

(xiv) Pharmacy clean and anterooms

(xv) Emergency department trauma rooms

(xvi) Emergency department exam/treatment rooms

2.1 Common Elements for Hospitals

A2.1-7.2.4 Furnishings

~~b. *Work areas.* Where a work space, work area, work counter, or work surface is provided, it should have a minimum of 4 square feet (.37 square meter) of contiguous clear surface for each person programmed to work in the space at the same time.~~

2.1 Common Elements for Hospitals

2.1-8.3.3.1 Essential electrical system

*~~(2) Where~~ Stored fuel is required **and**, storage capacity shall permit continuous operation for at least ~~96~~**24** hours. **An Extended Stay Center shall provide fuel for emergency power to meet longest expected patient stay.**

~~A2.1-8.3.3.1 (2) Storage of fuel for at least 96 hours should be considered for facilities in locations likely to experience an extended power outage.~~

2.1 Common Elements for Hospitals

***2.1-8.3.5.2 Electronic health record system servers and centralized storage.**

This equipment shall be provided with an uninterruptible power supply: **and connected to the essential electrical system.**

2.1 Common Elements for Hospitals

***2.1-8.4.2.5 Heated potable water distribution systems**

- (2) Heated potable water distribution systems serving patient care areas shall be under constant recirculation to provide continuous hot water at each hot water outlet **and shall meet the standards specified in Table A2.1-a.** ~~Non-recirculated fixture branch piping shall not exceed 25 feet (7.62 meters) in length.~~

2.1 Common Elements for Hospitals

2.1-8.4.2.6 Drainage systems

(1) Piping

*(a) Where **sanitary or storm** drainage piping is installed above the ceiling of, or exposed in, operating and delivery rooms, procedure rooms, trauma rooms, nurseries, central kitchens, sterile processing facilities, Class 2 and 3 imaging rooms, electronic mainframe rooms (TSERs and TECs), main switchgear and electrical rooms, electronic data processing areas, or electric closets, the piping shall have special provisions (e.g., double wall containment piping or oversized drip pans) to protect the space below from leakage and condensation.

(c) FM 1680 compliant no-hub couplings shall be acceptable in lieu of standards specified in paragraphs (a) and (b).

(3) Kitchen grease traps

(c) Location of grease trap may be determined by owner when site does not allow grease trap to be located out-of-doors, in accordance with items (a) and (b).

2.2 Specific Requirements for General Hospitals

2.2-2.2.4.6 Medical psychiatric room(s)

- (2) Where the room is part of a medical/surgical patient care unit, the provisions of Section [2.1-2.2.2](#) (Medical/Surgical Patient Care Unit—Patient Room) shall apply, with the following exceptions:
- (a) Each room shall be for single patient occupancy.
 - (b) Each room shall be located to permit staff observation of the entrance.
 - (c) Each patient room and adjoining patient toilet room shall be designed to minimize the potential for escape, concealment, injury, or suicide.
 - (i) A lay-in ceiling shall not be permitted.
 - (ii) Security film or glazing shall be provided on window(s).
 - (iii) Where a mirror is provided in the patient toilet room, it shall be shatterproof.
 - (iv) Ceiling and air distribution devices, lighting fixtures, sprinkler heads, and other appurtenances shall be a tamper-resistant type.
 - (v) **Hidden alcoves are prohibited.**

2.2 Specific Requirements for General Hospitals

Section 2.2-3.1.2 Basic Emergency Care

Sections 2.2-3.1.2 through 2.2-3.1.8 are deleted in entirety.

2.2 Specific Requirements for General Hospitals

***2.2-3.1.3.3 Reception and triage areas.** The emergency department shall be designed to ensure that access control can be maintained at all times.

***(3) The triage area, room or bay shall be a minimum of 80 square feet and** shall include the following:

2.2 Specific Requirements for General Hospitals

***2.2-3.1.4.3 Secure holding room. If psychiatric services are provided, ~~where~~ a secure holding room shall be is provided and, it shall meet the following requirements.**

2.2 Specific Requirements for General Hospitals

2.2-3.1.8.2 Administrative center or nurse station

(4) ~~Where feasible, v~~ Visual observation of all traffic into **and within** the unit ~~and of all patients~~ shall be provided from the nurse station **through direct or indirect visual observation.**

***2.2-3.1.8.12 Soiled workroom(s) or soiled holding**

room(s). A soiled workroom(s) ~~or soiled holding room(s)~~ shall be provided for the exclusive use of the emergency department in accordance with Section [2.1-2.8.12](#) (Soiled Workroom or Soiled Holding Room).

2.2 Specific Requirements for General Hospitals

~~2.2-3.1.8.17 Human waste disposal facilities~~

~~(1) Provisions for disposal of solid and liquid waste shall be provided in the emergency department.~~

~~(2) A clinical sink with a bedpan-rinsing device in the soiled workroom in Section 2.2-3.1.8.1.2 (Soiled workroom or soiled holding room) shall be permitted to serve this function.~~

2.2 Specific Requirements for General Hospitals

2.2-3.3.1.1 Location and Layout

*(4) The surgery department shall be divided into three designated areas—unrestricted, semi-restricted and restricted—that are defined by the physical activities performed in each area.

(a) **Unrestricted area:** Any area of the surgery department that is not defined as semi-restricted or restricted. These areas shall include a central control point for designated personnel to monitor the entrance of patients, personnel, and materials into the semi-restricted areas; staff changing areas; a staff lounge; offices; waiting rooms or areas; pre- and postoperative patient care areas; and access to procedure rooms (e.g., endoscopy procedure rooms, laser treatment rooms). Street clothes are permitted in these areas. Public access to unrestricted areas may be limited based on the facility's policy and procedures.

(b) **Semi-restricted area:** Peripheral areas that support surgical services. These areas shall include storage for equipment and clean and sterile supplies; work areas for processing instruments; sterile processing facilities; hand scrub stations; corridors leading from the unrestricted area to the restricted area of the surgical suite; and entrances to staff changing areas, pre- and postoperative patient care areas, and sterile processing facilities. The semi-restricted area of the surgical suite is entered directly from the unrestricted area past a nurse station or from other areas. Semi-restricted areas have specific HVAC design requirements associated with the intended use of the space (see Part 3: ANSI/ASHRAE/ASHE 170: *Ventilation of Health Care Facilities*). Personnel in the semi-restricted area shall wear surgical attire and cover all head and facial hair. Access to the semi-restricted area shall be limited to authorized personnel and patients accompanied by authorized personnel.

(c) **Restricted area:** A designated space contained within the semi-restricted area and accessible only through a semi-restricted area. The restricted area includes operating and other rooms in which operative or other invasive procedures are performed. Restricted areas have specific HVAC design requirements associated with the intended use of the space (see Part 3: ASHRAE/ASHE 170). Personnel in the restricted area shall wear surgical attire and cover head and facial hair. Masks shall be worn when the wearer is in the presence of open sterile supplies or of persons who are completing or have completed a surgical hand scrub. Only authorized personnel and patients accompanied by authorized personnel shall be admitted to this area."

2.2-3.2.8.2 Other observation unit support areas.

(4) Soiled workroom or soiled holding room. A soiled workroom or soiled holding room shall be provided in accordance with Section [2.1-2.8.12](#) (Soiled Workroom or Soiled Holding Room).

2.2 Specific Requirements for General Hospitals

A2.2-3.3.1.1 (4) Surgery department areas

a. Unrestricted area: Any area of the surgery department that is not defined as semi-restricted or restricted. These areas may include a central control point for designated personnel to monitor the entrance of patients, personnel, and materials into the semi-restricted areas; staff changing areas; a staff lounge; offices; waiting rooms or areas; pre- and postoperative patient care areas; and access to procedure rooms (e.g., endoscopy procedure rooms, laser treatment rooms). Street clothes are permitted in these areas. Public access to unrestricted areas may be limited based on the facility's policy and procedures.

b. Semi-restricted area: Peripheral areas that support surgical services. These areas may include storage for equipment and clean and sterile supplies; work areas for processing instruments; sterile processing facilities; and scrub stations; corridors leading from the unrestricted areas to the restricted area of the surgical suite; and entrances to staff changing areas, pre- and postoperative patient care areas, and sterile processing facilities. The semi-restricted area of the surgical suite is entered directly from the unrestricted area past a nurse station or from other areas. Semi-restricted areas have specific HVAC design requirements associated with the intended use of the space

(see Part 3: ANSI/ASHRAE/ASHE 170: *Ventilation of Health Care Facilities*). Personnel in the semi-restricted area should wear surgical attire and cover all head and facial hair. Access to the semi-restricted area should be limited to authorized personnel and patients accompanied by authorized personnel.

c. Restricted area: A designated space contained within the semi-restricted area and accessible only through a semi-restricted area. The restricted area includes operating and other rooms in which operative or other invasive procedures are performed. Restricted areas have specific HVAC design requirements associated with the intended use of the space (see Part 3: ASHRAE/ASHE 170). Personnel in the restricted area should wear surgical attire and cover head and facial hair. Masks should be worn when the wearer is in the presence of open sterile supplies or of persons who are completing or have completed a surgical hand scrub. Only authorized personnel and patients accompanied by authorized personnel should be admitted to this area.

2.2 Specific Requirements for General Hospitals

2.2-3.3.10.3 Patient changing area(s)

*(1) A changing area that includes the following shall be provided for patients.

- (a) Toilet(s) ~~Provisions for storing patients' belongings during procedures~~
 - (b) ~~Toilet(s)~~ Space for changing or gowning
 - (c) ~~Space for changing or gowning~~
- (2) Where private holding room(s) or cubicle(s) are provided, a separate changing area is not required.
- (3) Individual, lockable storage shall be provided for patients' belongings.**

2.2 Specific Requirements for General Hospitals

***2.2-3.4.1.3 Radiation protection.** For imaging services that require radiation protection, a certified radiation physicist or equally qualified expert representing the owner or appropriate state agency shall specify the type, location, and amount of radiation protection to be installed in accordance with the final approved imaging services layout and equipment selections.

(1) *(c) Shielded view window. The control alcove or room shall include a shielded view window designed to provide a full view of the examination/procedure table and the patient at all times, including a full view of the patient during imaging activities (e.g., when the table is tilted or the chest x-ray is in use).

(i) A minimum of 1 foot 6 inches between the view window and the outside partition edge shall be provided.

2.2 Specific Requirements for General Hospitals

2.2-3.5.8.15 Examination room

(2) Each examination room shall be equipped with a hand-washing **station and a work counter that meets the requirements of 2.1-7.2.2.15 (Work Surfaces)**.

2.2 Specific Requirements for General Hospitals

2.2-3.10.2.4 Patient privacy. Space shall be available to accommodate provisions for patient privacy **including when patients are examined or treated and body exposure is required. Privacy must be provided for the use of a bedpan or commode during dialysis, initiating and discontinuing treatment when the vascular access is placed in an intimate area, for physical exams, and for sensitive communications. There should be sufficient numbers of privacy screens or other methods of visual separation available and used to afford patients full visual privacy when indicated.**

2.2-3.10.2.5 Hand-washing stations

- (1) Hand-washing stations shall be provided in accordance with Section [2.1-2.8.7](#) (Hand-Washing Station).
- (a) **Wrist blade controls are not considered to be operable without the use of the hands.**
- (b) **Exception: Home training room hand-wash stations may be trimmed with residential style, ADA compatible controls.**

2.2-3.10.2.6 Body Fluid Disposal Sink

A fluid disposal sink shall be provided in each hemodialysis treatment area or room. Sink design including signage and location shall be constructed to prevent cross-contamination of the hand washing stations.

2.2-3.10.2.7 Emergency Equipment

Emergency cart and equipment storage located close to the patient treatment area, readily accessible by staff, and not located in an exit path.

2.2-3.10.3.2 This room shall contain the following:

- (1) Counter
- (2) Hand-washing station
- (3) Separate ~~drain~~ sink with identifying signage that it is for fluid disposal
- (4) **Emergency nurse call**

2.2-3.10.4 Special Patient Care Rooms

2.2-3.10.4.1 Isolation Room

2.2-3.10.4.1.1. An isolation room shall be provided for Hepatitis B positive (HBV+) patients to prevent contact transmission of HBV+ blood spills and other body fluids. The Isolation Room shall meet the following requirements:

- (1) Provides a door and walls that go to the floor, but not necessarily the ceiling, and allows for visual monitoring of the patient;**
- (2) Accommodates only one patient;**
- (3) A hand washing station; and**
- (4) A separate sink shall be provided within the Isolation Room for fluid disposal. Sink design including signage and location shall be constructed to prevent cross-contamination of the hand washing station.**

2.2-3.10.4.1.2 The isolation room shall have a minimum clear floor area of 120 square feet.

2.2-3.10.4.1.3 The isolation room shall allow for direct observation of the patient by staff from a patient care staff station. **Direct observation must include patient face and insertion point.**

2.2-3.10.4.5 – 2.2-3.10.7 Reserved

2.2-3.10.8.2 Nurse station

(2) The nurse station(s) shall be **no higher than 3 feet 8 inches and** be designed to provide **direct** visual observation of all individual dialysis treatment bays. **Direct observation must include patient face and insertion point.**

2.2-3.10.8.12 Soiled ~~workroom~~ holding room.

A soiled ~~workroom~~-holding room shall be provided in accordance with Section [2.1-2.8.12](#) (Soiled Workroom or Soiled Holding Room).

2.2 Specific Requirements for General Hospitals

2.2-3.10.8.14 Environmental services room. An environmental services room shall be provided that meets the requirements in Section [2.1-2.8.14](#) (Environmental Services Room) as well as the additional requirements included here:

- ~~(1) The environmental services room shall be adjacent to and for the exclusive use of the dialysis unit.~~
- ~~(2) Water supply and drain connection for testing machines shall be provided.~~

***2.2-3.10.8.19 Equipment repair room.** ~~Where~~ An equipment repair and breakdown room ~~is~~ **shall be** provided, ~~it and shall~~ be equipped with the following:

2.2 Specific Requirements for General Hospitals

2.2-3.11.10.3 Patient changing areas

(1) A changing area that includes the following shall be provided for patients:

(a) Provisions for storing patients' belongings.

Individual, lockable storage shall be provided.

2.2 Specific Requirements for General Hospitals

2.2-3.13.10.3 Patient changing rooms

- (1) Changing rooms for outpatients shall be provided and shall include:
 - (a) A seat or bench made of non-absorbable material
 - (b) A mirror
 - (c) Provisions for hanging patients' clothing and **individual, lockable storage** for securing valuables.

2.2 Specific Requirements for Freestanding Emergency Care Facilities

~~Chapter 2.3 Specific Requirements for Freestanding Emergency Care Facilities~~

Chapter 2.3 is deleted in entirety.

2.2 Specific Requirements for Critical Access Hospitals

~~Chapter 2.4 Specific Requirements for Critical Access Hospitals~~

Chapter 2.4 is deleted in entirety.

2.11 Specific Requirements for Psychiatric Hospitals

2.5-2.2.2.6 Patient toilet room

- (1) Each patient shall have access to a toilet room without having to enter a corridor. ~~Omission of this direct access requirement shall be permitted in specific patient bedrooms where the use of corridor access is part of the hospital's written clinical risk assessment and management program.~~

2.11 Specific Requirements for Psychiatric Hospitals

2.5-2.3.4 Outdoor Areas

An outdoor activity area shall be provided with a minimum of 50 square feet per patient but not less than 400 total square feet. ~~Where outdoor areas for play and therapy are provided see Section 2.5-2.2.3 (General Psychiatric Patient Care Unit—Outdoor Areas) for requirements.~~

~~2.5-2.3.2.1 Capacity. Maximum bedroom capacity shall be four children.~~

- (1) The maximum number of beds per room shall be one unless the necessity of a two-bed arrangement has been demonstrated. Two beds per room shall be permitted where approved by the authority having jurisdiction.**
- (2) Where renovation work is undertaken and the present capacity is more than one bed, the maximum room capacity shall be two beds.**

2.5-2.3.2.3 Patient toilet room

- ~~(1) Each patient shall have **direct** access to a toilet room either from the patient room or from the corridor outside the patient room.~~
- ~~(2) Where access is provided via a corridor, the following requirements shall be met:
 - ~~(a) The toilet room shall be located in the patient care unit.~~
 - ~~(b) The toilet room shall be located no more than 150 feet from the bedroom.~~~~
- (2) One toilet room shall serve no more than two patient bedrooms and no more than four patients.**
- (3) The toilet room shall contain a toilet and a hand-washing station.**
- (4) Toilet room doors
 - (a) Where indicated by the safety risk assessment, toilet room doors shall be equipped with keyed locks that allow staff to control access to the toilet room.**
 - (b) Where a swinging door is used, the door to the toilet room shall swing outward or be double-acting.****

2.11 Specific Requirements for Rehabilitation Hospitals

2.6-2.2.8.1 General

- (1) The support areas noted shall be provided in or readily accessible to each patient care unit and meet the requirements in Section (2.42-2.2.8) (Support Areas for Medical/Surgical Patient Care Units) as amended in this section.

2.11 Specific Requirements for Children's Hospitals

2.7-3.1.3.6 Treatment room. Treatment rooms shall meet the requirements in Section 2.2-3.1.3.6 (5)(a) (Pediatric treatment rooms).

2.7-3.1.2 Basic Emergency Services

~~Facilities for basic emergency services shall be provided in accordance with Section 2.2-3.1.2 (Basic Emergency Care) as amended in this section.~~

2.7-3.1.3.1 General. Children's hospitals ~~that offer more than basic emergency services~~ shall have facilities for the services they provide that meet the requirements in Section 2.2-3.1.3 (Emergency Department) as amended by the children's hospital-specific emergency department requirements in this section.

2.11 Specific Requirements for Mobile/Transportable Medical Units

2.8-1.3.7.4 Applicable local and state requirements.
All imaging facilities and radiation producing equipment installations must comply with OAR Chapter 333, divisions 100 through 123, and be licensed by the Oregon Health Authority, Radiation Protection Services program.