Environmental Documentation Checklist (EDC)

Despite the documentation and attestations received, surveyors reserve the right to inspect any building feature for code compliance pursuant to **Title 10 of the New York Code, Rules and Regulations (10 NYCRR), Part 400.**

For certifications that reference a specific code, submissions must also include the edition of that code. Acceptable editions are listed in **10 NYCRR, Part 711.2** - **Pertinent technical standards** or the Dear Administrator letter at https://www.health.ny.gov/professionals/hospital_administrator/letters/2017/2017-01-26_dal_17-01-02_fgi_standards_letter.htm. The use of acceptable code editions is discussed in greater detail in the Dear Administrator letter and are dependent on the date of project approval.

Some projects may include programmatic, clinical and/or other policy and procedure reviews and inspections in addition to review of the environmental documentation indicated in this checklist. If clinical review is required, please review the clinical document checklist.

Guidance on Use and Applicability: If the services are new and to be added to the operating certificate, or moved into space that requires different types of support functions (such as the installation of medical gases), then a description of the services to be added will be required in terms of the functional program.

#	**Required Documentation** (as applicable to project)	**Minimum Certifications or Report Requirements**. Codes used in the preparation of certifications and reports must be referenced. This column assumes that the item is newly installed, constructed, renovated as part of the Certificate of Need project (CON), or is a facility new to the Public Health Law.	**Guidance on Use and Applicability** **Notes:** 1) the guidance in this column assumes that an on-site inspection is conducted and 2) an existing facility is defined as one that already holds an Article 28 operating certificate.
	Fire Safety		
1	Building Construction Type	Architect's certification of building construction type in accordance with **NFPA 220-Standard on Types of Building Construction.**	Architect's determination of building construction type must be submitted, unless identified in a previous phase of the project.
2	Fire Alarm and Smoke Control Systems	Certification that all fire alarm systems (e.g., pull stations, smoke & fire detection devices) have been fully installed, inspected, tested, and connected to the fire alarm system, in accordance with **NFPA 72-National Fire Alarm Code.**	For existing facilities, the most recent fire alarm test report(s) for the fire compartment(s) associated with the project must be submitted, if requested by the reviewer, irrespective of whether the required fire alarm system was modified. For new fire alarm systems and/or components, the fire alarm system and components must be certified that they meet **NFPA 72** requirements. Smoke control systems must be certified using appropriate **NFPA** criteria referenced in either **NFPA 101, FGI 2010/2014**, or **10 NYCRR Title 10, Part 711.2.**
3	Fire Alarm System Record of Completion	The Record of Completion, usually prepared by the fire alarm system installation contractor, stating that the Fire Alarm System has been installed in accordance with **NFPA 72-National Fire Alarm Code.**	A record of completion must be provided for a new installation. For modifications, the initial installation shall have the original record of completion, revised to show all changes from the original information, and shall include a revision date. See **NFPA 72** for the format for the Record of Completion.

#	Required Documentation	Minimum Certifications or Report Requirements	Guidance on Use and Applicability
4	Sprinkler System Installation	Contractor's certification letter stating that the installation was performed in accordance with **NFPA 13-Standard for Installation of Sprinkler Systems.**	For newly installed and modified systems, the contractor must certify that the installation and acceptance testing was performed in compliance with **NFPA 13**. Use and submittal of the Material and Test Certificate for Underground Piping from **NFPA 13** is required.
5	Sprinkler System Test Report	Testing must be in accordance with **NFPA 25-Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems.**	For existing facilities, the most recent sprinkler system test report(s), for the fire compartment(s) associated with the project, must be submitted if requested by the reviewer, irrespective of whether the required sprinkler system was modified. A test report(s) is/are required for each system associated with the CON, and must address the testing frequency listed in **NFPA 25**.
6	Stand-pipe System	For new systems or systems requiring redesign, a Contractor's Certification and Test Certificate is required in accordance with **NFPA 14-Standard for Installation of Standpipes and Hose Systems.** For existing systems, the owner must certify that owner, occupant, or management firm or individual must certify that the stand-pipe is in good working condition.	The installation of a new system, or the redesign of an existing system, as the result of upgrading or adding a floor or wing to an existing standpipe system, requires certification in accordance with **NFPA 14**. The individual or firm certifying an existing system must demonstrate compliance with the inspection, testing, and maintenance requirements of **NFPA 25.** This also includes provisions for hose outlets, fire pumps, sprinklers, fire service piping, and valves. The most recent of these records must be submitted if requested by the reviewer, irrespective of whether the stand-pipe system was modified.
7	Fire Pumps	Contractor's Certification in accordance with the requirements of **NFPA 20-Standard for Installation of Stationary Pumps for Fire Protection.**	The system must be certified in accordance with **NFPA 20**. Unless requested by the reviewer, certification is not required for existing facilities where no changes have been made to the fire pump(s).
8	Ventilation Control and fire protection for commercial cooking equipment	Certification that ventilation control and fire protection equipment for commercial cooking equipment has been installed and tested in accordance with **NFPA 96-Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations.**	The system must be certified in accordance with **NFPA 96.** Unless requested by the reviewer, certification is not required for existing facilities where no changes have been made to the cooking equipment.
9	Fire Response Procedures	Policy & Procedure manual	Plans must be site specific and available at the site. Fire Plans will be reviewed for new facilities, a new wing, floor, service and/or department of a facility, or at the discretion of the reviewer.

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10	Emergency Preparedness Plans	Policy & Procedure manual	For existing facilities, plans addressing the space or service defined by the CON must be submitted for review. Examples are: suites; clinics; service areas such as dialysis, or interventional radiology, etc. For new facilities, Emergency Preparedness plans will be reviewed in their entirety. General information for the preparation of these plans may be found at: https://www.health.ny.gov/environmental/emergency/health_care_providers/. Plans that are too large to be uploaded may be reviewed on-site, at the discretion of the surveyor.
11	Fire Safety and Evacuation Training	Facility's documentation regarding *staff training* for fire response procedures, and documentation indicating staff attendance at fire drills where required. Training must be held at the frequencies listed in **NFPA 101.**	Staff training specific to the space or service defined by the CON must be submitted for review. For example, the training associated with staff assigned to the addition of a new service such as lithotripsy, located in a space built for this purpose, will be reviewed. In instances when staff have not yet occupied the space, allowances may be made to allow the training to be performed immediately after the space is occupied.
12	Smoking Signs	Signs consistent with facility's fire safety policy in accordance with **NFPA 101**.	Signs indicating where smoking is, and is not, permitted shall be available at the facility and properly posted. Pictures of no smoking signage can be uploaded for review.
13	Furnishings and Decorations	Manufacturer's specifications detailing flame propagation and fire testing criteria for furnishings and decorations in accordance with **NFPA 101.**	Items requiring documentation include: upholstered furniture; mattresses; drapes; curtains, and other similar loosely hanging furnishings; and decorations. Documentation must specify testing used in accordance with **NFPA 101,** and classification if specified by test used (A, B, C, I, II, etc.). Document must be available on-site, if not submitted in its entirety, or requested to be submitted by the surveyor.
14	Classification of interior finishes materials	Manufacturer's specifications detailing fire retardant features and ratings of floor and wall finishes, and ceiling tiles (critical radiant flux, flame spread, smoke development, etc.), in accordance with **NFPA 101.**	Documentation must specify test used in accordance with **NFPA 101,** and classification if specified by test used (A, B, C, I, II, etc.). Document must be available on-site, if not submitted in its entirety, or requested to be submitted by the inspector.
15	Fire Stopping	The facility shall ensure, and provide written certification, that all fire/smoke barrier walls were inspected, and that any penetrations were sealed with a listed Through Penetration Firestop System. The facility shall also provide copies of the listed systems that were used.	Certification of fire resistive sealing is ONLY required for new construction, or when modifications are made to existing walls, ceilings and floors, which are required fire resistive barriers and/or smoke separations. Facility is responsible for ensuring the fire stopping has been completed prior to DOH inspection, and maintained thereafter.

#	Required Documentation	Minimum Certifications or Report Requirements	Guidance on Use and Applicability
	Electrical		
16	Electrical Inspection Certification	Contractor's certification that all electrical systems have been installed in accordance with applicable codes, including **NFPA 70-National Electrical Code,** and approved plans.	Uninterrupted power supply (UPS) systems, when required, should be included in the contractor's certification. In municipal subdivisions, the local codes department may certify the installation of electrical components, in addition to, or in lieu of, the contractor. Third party inspections requiring certification may also be required for electrical installations in certain instances (NY Board of Fire Underwriters, Commonwealth, etc.).
17	Battery Operated Lighting and Emergency Lighting	Facility's documentation showing compliance with **NFPA 101**.	New installations shall include certification of compliance with **NFPA 101, Chapter 7.** For existing installations, testing records in accordance with **NFPA 101, Chapter 7** shall be submitted, unless the surveyor indicates that they will be reviewed on-site. In instances where the generator services the emergency lighting, the generator must be maintained in accordance with **NFPA 110** irrespective of whether the facility is required to have a generator.
18	Emergency Generator Test Report	Certification per **NFPA 99-Health Care Facilities Code** and **NFPA 110-Standard for Emergency and Standby Power Systems.**	A generator report compliant with provisions of **NFPA 101, NFPA 99,** and **NFPA 110** must be available on-site for review for facilities that require a generator. The report must include inspection, maintenance, and testing for the prior year, unless the facility was surveyed during the 12 months prior to the submission of EDC documents. Unless requested by the reviewer, certification is not required for generators installed at existing facilities where no changes to the generator(s), or generator component(s), has been made, and when clinical services requiring modifications to the generator and its components are not part of the project.
19	Emergency Electrical Systems	Certification that the Essential Electrical System (EES) complies with applicable sections **NFPA 101, NFPA 110-Standard for Emergency and Standby Power Systems, NFPA 70-National Electrical Code,** and **NFPA 99-Health Care Facilities Code.** A listing of functions served by specific EES branches should also be submitted when EES certification is applicable.	When listing functions, see **NFPA 99 (2012) Appendix B** or **NFPA 99 (1998 Appendix C)** for the suggested format to be used for listing functions and for maintenance criteria.

#	Required Documentation	Minimum Certifications or Report Requirements	Guidance on Use and Applicability
	Plumbing		
20	Plumbing Certification	Contractor's certification that the plumbing systems have been installed in accordance with the applicable plumbing code (e.g. national standard or international plumbing code).	Specifics that the water system was flushed, pressure checked, etc. are considered covered by this item, and need to be specified only when applicable. In some municipal subdivisions, the local codes department may certify the installation of plumbing components in addition to, or in lieu of, the contractor.
21	Backflow Prevention Certification	Certification that installation is in accordance with the approved plans, along with test and maintenance information, for each backflow prevention device. Results should be shown on the NYS DOH-1013 (Bureau of Public Water Supply Protection) form most recently submitted by facility.	Unless requested by the reviewer as part of the EDC submittal, certification is not required for existing Article 28 facilities where no changes to the facility's backflow preventer (s) have been made. When required, certification for service connections should be made using the standard DOH form at: https://www.health.ny.gov/environmental/water/drinking/cross/doh1013.pdf. If a backflow preventer on the service connection is not present, the facility must demonstrate that one is not needed.
22	Water Supply Certification	For new systems or alterations to existing systems, provide documentation that the system has been approved and/or tested in accordance with **10 NYCRR, Part 5**.	1) For new systems meeting the definition of a public water supply under **10 NYCRR, Part 5**, documentation that the system has been reviewed and approved by the local health department is required (County Health Department or DOH District Office). 2) For new connections to an existing approved public water supply (e.g. connection to a municipal system) provide documentation that the connection was approved by the local authority having jurisdiction (generally the water purveyor or local code enforcement office). 3) Requirements for new systems that are too small to be classified as a public water supply as defined in **10 NYCRR, Part 5** will be established in conjunction with the DOH's Bureau of Water Supply Protection and the DOH Regional Office. 4) Where distribution piping to the facility is installed or repairs are made, two compliant coliform free samples are required following disinfection and flushing in accordance with **AWWA Standard C651**.
23	Septic System Certification	For those facilities on a septic system, certification that both an existing and new system has been inspected and approved by the authority having jurisdiction.	Certification is required in all cases where the facility is on a septic system. Guidance on septic system requirements may be found at authorities having jurisdiction.
24	Water Analysis and bacteriological cultures for renal dialysis equipment	Pre and post water treatment, both bacteriological and chemical, test results must be provided in accordance with **10 NYCRR, Section 757,** and CMS guidelines regarding **AAMI** standards.	This item is only applicable to renal dialysis units and/or equipment, as applicable to project.

#	Required Documentation	Minimum Certifications or Report Requirements	Guidance on Use and Applicability
	General Regarding Environmental Health		
25	Certificate of Occupancy or Certificate of Completion	The **Certificate of Occupancy (COO)** or **Certificate of Completion (COC)** for building construction issued from the local authority having jurisdiction (AHJ), usually the local codes enforcement officer.	A **Temporary Certificate of Occupancy (TCO)** may be acceptable in some circumstances. A new/revised **Certificate of Occupancy or Completion** is generally required for all construction projects. A statement from the AHJ may be required in some instances when a **COO** or **COC** is not issued.

#	Required Documentation	Minimum Certifications or Report Requirements	Guidance on Use and Applicability
26	Letter of Certification for Completed Projects	Two certifications from the Licensed Design Professional may be required: 1) Facilities that are in earthquake or flood prone areas must provide certification, from the facility or architect, stating that the facility complies with **10 NYCRR, Part 711.3 (d)** for projects in earthquake prone areas, and **10 NYCRR Part 711.3 (e) (4)** for those projects located in a 100-year flood plain. The certification related to the flood plain must state that no floor level or basement is located below the 100-year flood crest level, unless specifically approved by the commissioner, or the facility is protected by flood walls. 2) A Certification of Completion document shall certify compliance with applicable code requirements. This documentation must attest to the project "as built", in contrast to the architect's design letter that may have been submitted as part of the project application and/or plan approval stage. The Certification must have the signatures of a licensed design professional (architect and/or engineer), the applicant, and a notary.	The additional certification required for projects located in an area prone to seismic activity or within a 100-year flood plain is due to the specific site requirements listed in **10 NYCRR, Part 711.3**. A separate certification may also be required for each phase of a project. The certification should be dated near the day of the pre-opening inspection/review and after the architect/engineer has reviewed all required certifications. The required letter format may be found at https://www.health.ny.gov/facilities/cons/more_information/docs/3-alc_for_completed_projects.pdf
27	Nurse Call System	Contractor's letter certifying compliance regarding installation and testing.	The facility must certify that the nurse call system has been inspected and installed in accordance with applicable sections and editions of **FGI 2010/2014, NFPA 70**, and **NFPA 99**. Unless requested by the reviewer, certification is not required for existing facilities where no changes to the nurse call system were made.
28	Ventilation System - Installation Certification	Contractor's letter certifying that the ventilation system has been installed in accordance with design criteria and complies with **ASHRAE** criteria, per **FGI 2010/2014**.	Certification is not required for existing facilities unless otherwise requested by the reviewer as part of the EDC submittal.
29	HVAC Balance Reporting	The Heating, Ventilation, and Air Conditioning balance report showing actual ventilation flow results, demonstrating compliance with **FGI 2010/2014**. The report shall include a cover letter by a licensed design professional certifying compliance/noncompliance with referenced codes.	The facility must certify that: 1) the mechanical systems conform to installation criteria listed in **FGI 2010/2014,** as well as applicable references, and; 2) the ventilation system has been balanced in accordance with **ASHRAE** criteria. Certification is not required for existing facilities when no modifications were made to the mechanical systems.

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30	Elevator Certification	Certification that all elevators have been inspected, tested, and meet applicable requirements.	The facility must provide certification that the elevator(s) has been installed and tested in accordance with **FGI.** Elevator certification is not required for existing facilities when no modifications have been made to the existing elevator system(s).
31	Fume Hood Certification	Certification by a competent third party is expected for each hood, as applicable. A certification is to be affixed to the hood or be available at the facility.	Various hood types may be encountered - applicable to laboratories, pharmacies, chemotherapy/IV prep rooms, radiology processing rooms, central sterilization rooms, nuclear medicine, and perhaps morgues.
32	Regulated Waste Removal	Policy and procedures including a contract from a qualified vendor for the removal, transport, and disposal of regulated medical waste.	Policy & Procedure Manual and signed contract usually needs to be available on-site. Additional guidance is provided by **10NYCRR, Part 70**.
33	Sterilizing Equipment - Certification	Certification from the contractor that sterilization equipment has been installed and tested in accordance with the manufacturer's instructions.	The facility must meet applicable sections of regulations from the **Code of Federal Regulation (CFR) 482.42 or 416.51**, and generally accepted standards such as CDC Guidelines for Disinfection and Sterilization in Healthcare Facilities, AORN Perioperative Standards and Recommended Practices, or AAMI Sterilization in Health Care Facilities.
34	Sterilizing Equipment Results	Documentation via test runs and bacteriological samples that sterilization equipment is functioning in accordance with the manufacturer's instructions.	Generally, the facility should submit Bowie-Dick test results as well as printouts for cycle verification as required by the manufacturer and recommended by AMMI, AORN, APIC, and/or the CDC.
35	Boiler Inspection	Boiler Inspection Certificate	Unless requested by the reviewer as part of the EDC submittal, certification is not required for existing facilities where no changes to the boiler system have been made. Otherwise, for new and modifications to existing boilers, the facility must certify that the boiler has been installed/modified and tested in accordance with the manufacturer's instructions, **FGI** requirement as well as applicable state labor law.

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36	Medical Gas and Vacuum Systems	For new and modified systems, five certifications are required: 1) that the installation and storage of medical gases conforms to all applicable requirements of **FGI 2010/2014** and **NFPA 99;** 2) that the medical gases have been tested in accordance with and meet **NFPA 99** requirements; 3) that brazing was performed by a qualified individual(s) as required by **NFPA 99;** 4) that piping for nonflammable medical gas systems is Type K or L (**ASTM B819**), per **NFPA 99**-**Health Care Facilities Code**, and that pipe (tube), fittings, valves, and other pipeline components are cleaned for oxygen service and are marked and sealed per **NFPA 99**-**Health Care Facilities Code**; and 5) that the installed vacuum piping is corrosion resistant as required by **NFPA 99**.	Unless requested by the reviewer as part of the EDC submittal, certifications are only required if the installation is new, the existing system has been modified, or the system has been dormant. Zone valve boxes must be installed in accordance with **NFPA 99**.
37	Medical Gas and Vacuum Systems Test Report	The test report shall include all values for static pressure, flow, and dynamic pressure for all outlets, dew point, hydrocarbon results, purity results for each medical gas, etc. in accordance with **NFPA 99**.	Unless requested by the reviewer as part of the EDC submittal, testing is only required for newly modified, new, or systems that have been dormant.
38	Imaging Equipment Installation	Certification that newly installed imaging equipment (e.g., x-ray, MRI) and nuclear medicine equipment has been installed and tested in accordance with manufacturer's instructions, and references listed in **10 NYCRR, Part 711.2** and **FGI 2010/2014.**	For all newly installed equipment, documentation should include evidence that the facility's radiation equipment has been registered with NYS DOH Bureau of Environmental Radiation Protection (e.g., correspondence to or from the Bureau regarding registration), complies with **10 NYCRR, Part 16**, references in **10 NYCRR, Part 711.2**, and conforms to **FGI** criteria. For MRI devices, manufacturer's/installer's certification for the imager and associated equipment is required.
39	Physicist's Report/Certification	The certification report should contain: 1) Radiation exposures for locations surrounding the equipment room. This includes all areas adjacent to the room, including the roof, if applicable, and; 2) Acceptance testing as required for commissioning the radiation producing equipment.	Documentation is applicable to X-ray, CT, LINAC, fluoroscopy, mammography, C-arm, and similar type devices. Acceptability testing reports need to be commensurate with the type of device. [Note: MRI devices do not emit ionizing radiation.]. A schematic showing the 5 Gauss line is required for a MRI and an exposure diagram for x-ray producing equipment.
40	Swimming or therapeutic use pools	Written approval from DOH Center for Environmental Health, based on plan review by the Bureau of Community Environmental Health and Food Protection, in accordance with **10 NYCRR, Subpart 6-1.** The **September 6, 2012 Dear Administrator Letter,** which discusses the approval process, is available from the Regional Office.	Pools must be certified as compliant with **FGI** criteria and **10 NYCRR Subpart 6-1**. Certification is not required for existing pools when no changes are made.

#	Required Documentation	Minimum Certifications or Report Requirements	Guidance on Use and Applicability
	Forms filed with, or obtained from, DOH Bureaus or other agencies		
41	DOH Registration for Ionizing Equipment	**NYS DOH Certificate of Registration, DOH-3376** form**,** per **10 NYCRR, Part 16, Section 16.50.**	A current **DOH-3376** for the facility must be available. A NYC Department of Health and Hygiene certificate is required for NYC facilities, in place of the **DOH-3376**. [Note: This does not apply to MRI devices.]
42	FDA Report of Assembly Form	**FDA Report of Assembly, FDA-2579** form.	The installer of a radiation emitting device must file an **FDA-2579.** A copy must be available at the facility. The facility should have a copy of the FDA operating certificate, if applicable, during the on-site inspection.
43	Laboratory Permit	NYS DOH permit issued by the Wadsworth Center Clinical Laboratory Evaluation Program (CLEP), in accordance with **NYS Public Health Law, Article 5, Title V: Clinical Laboratory and Blood Banking Services.**	A laboratory permit is required when laboratory services or point of care testing is provided. A new permit must be obtained for new facilities, and when there are changes in services, location, laboratory owner or laboratory director.
	Other		
44	Floor Plan	A floor plan should be provided for each area undergoing review. Generally, an 11" x 17" plan is sufficient. Multiple floor plans may be necessary under circumstances where multiple floors are undergoing review, or where the floor plan is unreadable due to the size of the renovated area. A floor plan showing the level of exit discharge is required when the level of exit discharge is on a floor that is different from the floor where construction has taken place.	Additional schematics or floor plans may be needed, based on renovations and construction, as applicable to the project and requested by the reviewer.
45	Board of Pharmacy Review and/or Certification	Required for new pharmacies, satellite pharmacies, and areas of compounding, at the discretion of the Board of Pharmacy, NYS Department of Education.	For new pharmacies or satellite pharmacies, the facility must contact the Board of Pharmacy (BOP) to determine whether certification, a BOP inspection, or other BOP review is required. BOP participation may not be required, but the BOP must make this decision. Communication with the BOP must be documented.
46	Mobile, Transportable, and Relocatable Units	Certification from the manufacturer that the unit meets the applicable criteria of **FGI Chapter 5** and, for relocatable units, Department of State Certification that the unit was inspected and approved. The architect must also certify the unit.	Division of Building Standards and Codes, NYS Department of State, approval is required for relocatable units.

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47	Programmatic Infection Control Risk Assessments (ICRAs)	One or more ICRAs may be required. An ICRA to proactively address infection control, specifically to identify and mitigate risks during construction, is required. Another ICRA could be needed to address design elements that are incorporated into the functional program for airborne infection isolation rooms, protective environment rooms, and combination airborne infection isolation/protective environment rooms. It is expected that a construction ICRA will be completed for all projects involving construction, while the ICRA for the functional program will be developed for projects where this need has been identified.	This requirement applies to acute care hospitals, outpatient facilities, hospice facilities, and Mobil, Transportable, and Relocatable Units. For additional guidance, refer to the **Chapter 1.2-3 of FGI 2010/2014** titled *Infection Control Risk Assessment*.
48	Other	Certification or documents that may be required by the Department based on project specific considerations.	For example: approval letter or operating certificate from the Office of Alcohol and Substance Abuse Services or Office of Mental Health; clean room testing certifications; etc.