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Illinois Health Facilities Review Board
525 West Jefferson Street, 2nd Floor
Springfield, IL 62761

**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

Re: Public comments issues relating to the Certificate of Need for Project No. 11-111:
The IVF Center at RMI

Dear Board Members,

At the request of the Oakbrook Surgical Center, we have reviewed the plan for the IVF Suite, at 2425 West 22nd Street in Oakbrook for compliance with the Ambulatory Surgical Treatment Center Licensing Requirements.

Jensen & Halstead, established in 1868, is the oldest Architectural Firm in Chicago and has specialized in Healthcare for over 50 years. I started practicing architecture in 1987, with healthcare being my main focus. I have been involved in hundreds of healthcare projects in the State of Illinois, including small renovations to major additions, new buildings and life safety analyses. I also currently serve on the Advisory Committee to IDPH (per the Hospital Licensing Act, Section 250.2443) which advises the Department and conducts informal dispute resolution concerning the application of building codes for new and existing construction and related Department rules and standards under the Hospital Licensing Act.

For the purposes of this review, we verified with the Design Standards Unit of IDPH that this facility would be reviewed under Title 77, Chapter I, Subchapter 6, Part 205 Ambulatory Surgical Treatment Center Licensing Requirements.

We have drawing sheets A2.0, A2.1 and A3.0 labeled "Preliminary Revisions – DEC. 20, 2010" for the existing space. These sheets also have additional issue dates as follows:

Preliminary Design 11-01-10
Issued for Demolition Permit 11-01-10
Issued for Building Permit 11-03-10
Revised for Building Permit 11-16-10

In addition to these drawings, I was briefly in the space twice during construction for the purpose of verifying that the General Contractor was maintaining the required one-hour fire rated barrier to the adjacent Ambulatory Surgery Center.

Since we only have a partial set of construction drawings and have limited experience within the space, this review is only a partial list of items that do not conform to the Licensing Requirements and is limited in scope to the physical building requirements.

Following are items that we feel need to be addressed to obtain licensure:

1. Section 205.1350 Administration Department and Public areas.
 - a. There does not appear to be space for wheel chair storage in the lobby of the ASTC.
 - b. There are no provisions for public toilets, public telephone or drinking fountain within the lobby of the ASTC. These facilities are provided in the building lobby and may be acceptable to the Department.

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A HISTORY OF INNOVATION IN ARCHITECTURE



2. Section 205.1360 Clinical Facilities

- a. There are no provisions for an examination room.
- b. The procedure rooms have a clear area of 137 square feet with dimensions of 13'-0" x 10'-6". Licensure requires "at least one procedure room with a minimum clear area of 250 square feet and a minimum dimension of 14 feet...."
- c. The plan shows provisions for four (4) Recovery Bays; two (2) are 5'-8" x 7'-8" and two (2) are 5'-8" x 8'-8" with a moveable partition shown between each pair. It is our understanding that I.V. sedation will be used in this facility.
 - i. The regulation states "For each procedure room using general, spinal, or epidural anesthesia, or IV sedation, there shall be at least one stretcher for Stage I recovery and two additional stretchers or lounge chairs for Stage II recovery."
With two (2) procedure rooms, six (6) recovery bays will be required.
 - ii. The regulations also have provisions for minimum clearances around both the stretchers and the lounge chairs. Given the clearance requirements, none of the individual bays will comply. If the moveable partition is opened there is only proper clearance for either one (1) stretcher or one (1) lounge chair in the reclined position; **therefore, there are only two (2) compliant recovery bays.**

3. Section 205.1370 Support Service Areas

- a. There are no provisions for a soiled work room for the exclusive use of the surgical staff.
- b. There is no clean workroom within the sterile area.
- c. We do not see provisions for anesthesia storage facilities.
- d. We do not see provisions for medical gas supply storage.
- e. There are no provisions for a storage area for equipment and supplies used in the surgical suite.
- f. There are no provisions for male and female staff changing areas; with lounge, lockers, toilets and lavatories; arranged to provide a one-way traffic pattern from the non-sterile area to the sterile area.
- g. There is no provision for stretcher storage out of the direct line of traffic.
- h. There is no provision for a janitor's closet within the surgical suite.

4. Section 205.1400 Details and Finishes

- a. There are no 8'-0" corridors/aisles for exiting of patients transported on stretchers.
- b. All doors appear to be 3'-0". "The minimum width of doors needing access for stretchers (procedure rooms, recovery) shall be 3'-8".

5. Section 205.1540 Air Conditioning, Heating and Ventilation Systems


- a. It is doubtful whether the existing HVAC unit has 25% pre-filters with 90% final filters required for the procedure and recovery rooms.

Again, we would like to preface that due to the limited information available, this is not an all-encompassing review. But even from this limited review, it is easy to conclude that there is no way to make this facility compliant with the Ambulatory Surgical Treatment Center Licensing Requirements without a major renovation of the space. In looking at the current plan, trying to save as much of it as possible, there looks to be at least 2,500 s.f. of space that would need to be demolished and rebuilt (2,500 s.f. at approximately \$165.00/s.f.= \$412,500.00).

If you have any questions, please feel free to contact me.

Sincerely,

Jensen & Halstead, Ltd



David K. Dastur, AIA, NCARB
Senior Principal

