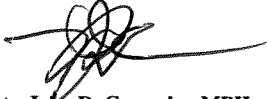


**GUAM MEMORIAL HOSPITAL AUTHORITY
ADMINISTRATIVE MANUAL**

APPROVED:  Peter John D. Camacho, MPH Hospital Administrator/CEO	RESPONSIBILITY: Planning, Facilities Maintenance, Hospital-wide	EFFECTIVE DATE: February 20, 2018	POLICY NO: A-EC300	PAGE: 1 of 2
TITLE: GUIDELINES FOR CAPITAL IMPROVEMENTS – APPROVAL PROCESS				
LAST REVIEWED/REVISED: 10/2017				
ENDORSED: EOC 10/2017, MEC 11/2017, EMC 12/2017				

PURPOSE:

To establish guidelines for capital improvements relative to the Approval Process.

POLICY:

Request for construction, renovations, remodeling or modifications to the structure of the building(s) must be reviewed and approved by GMHA’s primary Capital Improvement Projects (CIPs) Coordinators. However, final approval of such projects shall lie with the Hospital Administrator (or designee). The primary CIPs Coordinators are comprised of the following Planning and Facilities Maintenance (FM) Departmental Managers:

- Hospital Chief Planner (or designee); and
- Facilities Maintenance Manager (or designee).

DEFINITIONS:

Requests for construction, renovations, remodeling or modifications will be classified into one of two categories:

1. Facility Maintenance Improvements - small changes to the building that have no impact on the structure and that can be performed by Hospital personnel.
2. Structural Improvements - work that changes the physical attributes of the facility (e.g., work flow, walls, windows, doors, utilities, ceilings and floors). These are works that would require review for conformance with the Guidelines for Design and Construction of Health Care Facilities.

PROCEDURE:

1. Within one week of receiving a request for “capital improvement(s),” either the Facilities Maintenance Manager or the Hospital Chief Planner will assign the request to the appropriate FM Shop (e.g., Electrical, Carpentry, Plumbing, Mechanical, and Refrigeration).
2. The appropriate FM Shop will evaluate each request with the respective department head, based upon the following:
 - a. Effect on patient care and patient satisfaction;
 - b. Whether or not the Request is included in Strategic Plan, Operational Plan or Budget;

- c. Urgency of the Request;
 - d. Impact to rated walls or smoke barriers;
 - e. Impact or compromise of Life Safety issues;

 - f. Impact to utilities; and for
 - g. Compliance with the most recent Guidelines for Design and Construction of Health Care Facilities put forth by The Facility Guidelines Institute and The American Institute of Architects (AIA) Academy of Architecture for Health.
3. After completing their evaluation, the appropriate FM Shop shall make a recommendation to the primary CIP Coordinators. The recommendation shall include the following:
 - a. scope of work required;
 - b. cost of labor and materials; and
 - c. anticipated duration of the proposed project.

 4. The CIP Coordinators submit their recommendation(s) to the Executive Management Council (EMC) **if** the request is not reflected in the Plans/Budget but shall have a positive effect on patient care or it is required to meet either the *Joint Commission (JC)* Standards or the *Centers for Medicare and Medicaid (CMS)* Guidelines.

 5. Relative to the status of such projects, the primary CIP Coordinators shall report either formally or informally to the EMC, Directors Meetings and/or the Hospital Administrator/CEO. The primary CIP Coordinators also direct FM staff (for projects that can be done via internal staffing) or the Architectural/Engineering (A/E) Firm and/or Construction Contractor to proceed with the respective CIP.

RELATED POLICIES:

- A-EC310, Guidelines for Facility Improvements – Implementation, of the Administrative Manual.
- LS6480-003, Interim Life Safety Measures – Contractor/Infection Control Risk Assessment – New Construction, of the Life Safety Manual.
- LS6480-004, Interim Life Safety Measures – Maintenance and Facility Improvements, of the Life Safety Manual.
- LS6480-010, Infection Control Guidelines for Construction, of the Life Safety Manual.
- LS6480-012, Noise Control During Construction, of the Life Safety Manual.
- 6120-5, Patient Rights During Construction, of the Administrative Manual.

RESCISSIONS:

6120-D-20, Guidelines for Capital Improvements – Approval Process, of the Planning Department Manual made effective May 1995.