

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF THE INSPECTOR GENERAL
DIVISION OF HEALTH CARE FACILITIES & SERVICES
FINAL INSPECTION CHECKLIST

Project Number LH _____ - _____

Project Name _____

Typical items required to grant approval for licensure and occupancy of hospital projects.
List is not all inclusive and may adjust for project type:

This will confirm our final inspection that was conducted on _____.
The following deficiencies were cited:

- 1) Approval for occupancy by the Office of Housing, Buildings and Construction. 902 KAR 20:009 Section 4
- 2) Nurse Call Certification. 902 KAR 20:009 Section 31
- 3) Plumbing certificate, and sprinkler certification. 902 KAR 20:009 Section 4
- 4) Med gas certification. 902 KAR 20:009 Section 31
- 5) Electrical certificate, and fire alarm certification. 902 KAR 20:009 Section 4
- 6) Final air balance report. 902 KAR 20:009 Section 4
- 7) Certification of final air balance report from M/E design firm that the project is balanced per plans. 902 KAR 20:009 Section 31
- 8) Certification from M/E design firm that the project is built per plans. 902 KAR 20:009 Sections 4 and 31
- 9) Certification from A/E design firm that the project is built per plans. 902 KAR 20:009 Section 4
- 10) The nurse call/code blue system must be installed. Certification of installation must be provided. 902 KAR 20:009 Section 32(7)
- 11) Provide certification from the equipment installer that the (medical equipment: radiology equip., MRI unit, sterilizers, etc.) has been completely installed and is ready for hospital use. 902 KAR 20:009 Sections 31 and 32
- 12) Provide most recent emergency generator test run. 902 KAR 20:009 Section 32(9)1
- 13) Provide emergency generator start up sheets. 902 KAR 20:009 Section 32(9)2(c)