



The Department of Health Chief Executive Officer has a duty to approve the proprietor, the premises (entire site and building/s) and the arrangements for management, staffing and equipment when assessing an application for a private hospital licence. The building application is assessed for compliance with the Western Australia Health Facility Guidelines (WAHFG's) for Architectural Requirements, the WAHFG's for Engineering Services, the Building Guidelines for the construction, establishment and maintenance of Psychiatric Hostels (referred to as 'The Guidelines') and the Licensing Standards for the Arrangements for Management, Staffing and Equipment. The Licensing and Accreditation Regulatory Unit (LARU) is the delegated authority which administers the *Private Hospitals and Health Services Act 1927*.

The Building Approval Process is a gated approval process which requires that all matters are addressed at each approval phase prior to progressing to the next approval phase. The four phases are Concept Approval, Approval in Principle, Approval to Construct and Approval to Occupy.

<b>BUILDING APPROVAL PROCESS</b>				
<b>Process</b>	<b>Concept meeting</b>		<b>Documentation and Plans required by LARU</b>	<b>Timeframe</b>
<b>Concept Approval</b>  	<p>The concept meeting introduces the licence holder / applicant (or their authorised delegate), their agent/s and project director to the LARU team.</p> <p>The meeting provides the opportunity to assess high level plans for the proposed service provision, discuss the building design/redesign, outline any intended staging &amp; the timelines planned for each stage including consideration of impact on patient services. The requirement to comply with the National Construction Code for Class 9A Buildings and 'The Guidelines' is outlined.</p> <p>For a new licence application, this meeting also introduces the licence applicant to the legislative requirements for operating a private hospital and assists in determining the type of licence and the appropriate licensing application pack that will need to be completed.</p>		<p>It is required that the licence holder / applicant has undertaken their due diligence and consulted with an architect and engineer (depending on the project) prior to attending for concept meeting.</p> <p>High level drawings are required to be provided to <a href="#">LARU Building</a> <b>one week prior</b> to concept meeting.</p> <p>Email <a href="#">LARU Building</a> to organise a time for a concept meeting.</p> <p><b>Note 1:</b> The LARU requires confirmation that Development Approval with Local Council is underway or being considered (if applicable to the project).</p> <p><b>Note 2:</b> For building developments intended to provide care to mental health patients there is the requirement to ensure that the Office Chief Psychiatrist is formally notified in writing.</p>	<p>The LARU will provide formal correspondence advising if concept approval has been granted / not granted following the concept meeting.</p> <p>Verbal approval <b>may</b> be provided at the concept meeting, however, this will be at the discretion of the LARU and on a case by case basis.</p>
<b>Approval in Principle (AIP)</b>  	<p><b>Method of Submission</b></p> <p>Submit via <a href="#">MyFT</a> secure file transfer system.</p> <ul style="list-style-type: none"> <li>• Contact <a href="#">LARU Building</a> to request access to <a href="#">MyFT</a>.</li> <li>• A link will be sent via email to gain access to a folder within <a href="#">MyFT</a> to upload AIP 1 to 8 files.</li> <li>• Access to upload files will be available for 2 weeks.</li> </ul> <p>Further information is provided in the LARU Building <a href="#">MyFT</a> Instruction Sheet.</p>	<p><b>Method of Assessment</b></p> <p>To enable desktop audit one set of hard copy documentation and plans are required by LARU, as well as an electronic version submitted via the <a href="#">MyFT</a> platform.</p>	<p><b>Documentation and Plans required by LARU</b></p> <p><b>AIP1 Functional Brief</b> - Refer to information contained at the end of this document.</p> <p><b>AIP2 Contact List</b> The Contact List is the consultants and contract persons being used in the project. This should include name, company name and contact phone number for the following areas:</p> <ul style="list-style-type: none"> <li>• Project Co-ordinator</li> <li>• Clinical contact person/s</li> <li>• Infection Control Consultant</li> <li>• Architect</li> <li>• Mechanical Engineer</li> <li>• Electrical Engineer</li> <li>• Hydraulic Services Engineer</li> <li>• Structural Engineer</li> <li>• Fire and Security Engineer</li> <li>• Builder and associated contractor</li> </ul> <p><b>AIP3 Patient Management</b> Patient management must include information on whether patient services will be impacted, and if so, how patient safety, privacy and infection control risks are mitigated during the building works. This section will advise of planned time frames, how services will be maintained, temporary accommodation requirements, and how patient and staff services will be managed.</p> <p><b>AIP4 Timelines</b> The proposed timelines for construction which clearly identifies any staging. For redevelopments – information on continuation and cessation of patient services and scheduling for temporary accommodation is to be included.</p> <p><b>AIP5 Plans - Total Site (1:200)</b> For redevelopments - existing and proposed total site plan shall be provided.</p> <p><b>AIP6 Plans - Areas/Floors (1:100) – Architectural &amp; Fire</b> These plans shall include the architectural layout and fire engineering design. For redevelopments - architectural layouts of the specific areas/floors of the redevelopment shall be provided. Department boundaries (footprint) are required with an overlay on the existing floor plans. Temporary accommodation must be clearly identified. Areas of exclusion from the redevelopment shall be nominated and identified.</p> <p><b>AIP7 Plans - Traffic Flow Patterns (1:100)</b> On a separate architectural layout diagrammatically indicate the traffic flow patterns (using separate colours) for patients, clinical staff and support staff services (goods &amp; waste) in each unit. This should include the required regulatory activities and all functional staff/patient relocations (temporary and permanent).</p> <p><b>AIP8 Conceptual Engineering Design</b> Outline the extent of engineering work and the concept for the area/floor.</p>	<ul style="list-style-type: none"> <li>• LARU - Four to six weeks for assessment and review.</li> <li>• Proprietor - Four weeks to respond.</li> <li>• LARU - Four to six weeks to review responses.</li> <li>• Process repeats until all AIP mandatory items are addressed and AIP is completed.</li> </ul>



<b>Approval to Construct (ATC)</b>  	<b>Method of Submission</b>	<b>Method of Assessment</b>	<b>Documentation and Plans required by LARU</b>	<b>Timeframe</b>
	<p>Submit via <a href="#">MyFT</a> secure file transfer system.</p> <ul style="list-style-type: none"> <li>Contact <a href="#">LARU Building</a> to request access to <a href="#">MyFT</a>.</li> <li>A link will be sent via email to gain access to a folder within <a href="#">MyFT</a> to upload ATC1 to 5 files.</li> <li>Access to upload files will be available for 2 weeks.</li> </ul> <p>Further information is provided in the LARU Building MyFT Instruction Sheet.</p>	<p>To enable desktop audit one set of hard copy documentation and plans are required by LARU, as well as an electronic version submitted via the <a href="#">MyFT</a> platform.</p>	<p><b>ATC</b> Full set of construction drawings and specifications (typically the tender documents)</p> <p>The construction drawings shall include:</p> <p><b>ATC1</b> Architectural  <b>ATC2</b> Electrical Engineering  <b>ATC3</b> Hydraulic Engineering  <b>ATC4</b> Mechanical Engineering  <b>ATC5</b> Fire Engineering</p>	<p><b>Note 3:</b></p> <ul style="list-style-type: none"> <li>All high priority life safety mandatory items must be addressed prior to ATC being granted.</li> <li>All other mandatory items shall be addressed prior to progressing to an ATO inspection.</li> </ul>
<b>Approval to Occupy (ATO)</b>	<b>Documentation required at ATO</b>	<b>Method of Assessment</b>	<b>Required by LARU prior to ATO inspection</b>	<b>Timeframe</b>
	<ul style="list-style-type: none"> <li>One set of certification documents.</li> <li>'As Constructed' drawings – final floorplan.</li> <li>Workforce education records (fire evacuation and emergency training).</li> <li>Operational and clinical policies.</li> <li>Roster schedules.</li> <li>Infection Control audits or reports.</li> <li>Occupational Health &amp; Safety audits or reports.</li> </ul> <p>Clinical Commissioning - The building/area is furnished (furniture and equipment), staffed and ready for occupation.</p>	<ul style="list-style-type: none"> <li>Verification at the site inspection of the 'As Constructed' drawings which reflects the final build and includes any changes/variations further to the construction drawings provided at ATC.</li> <li>Review of the documentation</li> <li>Documentation provided following the ATO inspection is to be sent as separate attachments and not embedded into the reports.</li> </ul>	<p><b>ATO Inspection can only occur when</b></p> <ul style="list-style-type: none"> <li>All building works have been completed.</li> <li>The building/area is furnished (furniture and equipment), staffed and ready for occupation.</li> <li>All consultant design and commissioning certifications and contractor installation and safety certifications as detailed in 'The Western Australia Health Facility Guidelines for Architectural Requirements and Engineering Services' Appendix 1 are available at the time of inspection, or prior if requested by LARU.</li> </ul> <p><b>ATO - Step 1</b></p> <ul style="list-style-type: none"> <li><b>Four weeks prior to practical completion</b>, request in writing a tentative date for an Approval to Occupy inspection.</li> </ul> <p><b>ATO - Step 2</b></p> <ul style="list-style-type: none"> <li>ATO Inspection Declaration will be sent by LARU Building approximately two weeks prior to the ATO inspection and is to be completed and returned <b>5 working days</b> prior to the ATO inspection.</li> </ul>	<ul style="list-style-type: none"> <li>Dependant on ATO scheduling and consultant availability.</li> <li>Proprietor to notify LARU four weeks in advance of practical completion.</li> <li>ATO inspection is to be scheduled at least one week prior to planned occupancy.</li> </ul>
<b>Additional Information</b>	<ol style="list-style-type: none"> <li>WA Health approval does not negate the need to comply with the requirements of the National Construction Code, Australian Standards and other statutory authorities, for example, the Water Corporation, Western Power, Local Council Authority, Economic Regulation Authority (ERA), Environmental Protection Authority (EPA) and the Department of Fire and Emergency Services (DFES).</li> <li>All approvals are valid for 12 months (Concept, AIP, ATC).</li> <li>Existing Dispensations/Conditions - if a facility has a dispensation and/or condition on the licence that will be impacted by the proposed works then the dispensation/condition will be reviewed in the context of the project.</li> <li>No AIP or ATC submissions will be accepted and no ATO inspections will be conducted between 10 December and 10 January (inclusive) each year due to the unavailability of LARU's external consultant panel.</li> <li>Documentation received after midday Friday will be date-stamped 0900 on the following Monday.</li> </ol>			

## FUNCTIONAL BRIEF

The Functional Brief shall provide an overview of the functions that will be provided within the area/premises that are to be approved. It is used to guide the appropriate facility classification, type of licence and granting of occupancy at approval of premises inspection. For a new licence application, following the approval of premises, the Functional Brief is finalised and becomes the validated Statement of Function (SoF). The SoF will include a version number and a section at the end to facilitate future changes along with a 'LARU use only' section to capture change history and, as necessary the title/date of site plans demonstrating the changes. For redevelopment projects the existing SoF is updated at the end of the project and following LARU approvals.

Ensure that the Functional Brief (AIP1 document) addresses the following points in the Approval in Principle submission.

General information	Clinical service	Building	Staffing	Support services
<ul style="list-style-type: none"> <li>Name of the Facility.</li> <li>Address of Facility.</li> <li>Primary Function of the Facility - the normal or intended activities of the facility.</li> <li>The reason/rationale for the service.</li> <li>Service Philosophy/Scope of the service/Proposed level of service.</li> <li>Model of Care Provision.</li> <li>Hours of Operation.</li> <li>Funding Mechanism - for profit, not for profit.</li> </ul>	<ul style="list-style-type: none"> <li>The medical procedures, surgical procedures and psychological services to be provided.</li> <li>Throughput - number of beds by category, maximum numbers of patients to be treated at any one time and intended throughput (per area/speciality and average number per day).</li> <li>Referral Mechanism.</li> <li>The intended age range of patients and proportion of ages (where relevant).</li> <li>Infection Control.</li> <li>Sterile Supply.</li> <li>Pandemic Management (COVID-19).</li> </ul>	<ul style="list-style-type: none"> <li>Building Classification (BCA).</li> <li>Age of the facility.</li> <li>Anticipated life of the facility.</li> <li>Outline the layout of the rooms in the facility (name the facility rooms) - include the number of single, double and multiple rooms.</li> <li>Outline of staged building works (if applicable) - advise of planned time frames, how services will be maintained, temporary accommodation requirements and how patients will be managed during building works.</li> </ul>	<ul style="list-style-type: none"> <li>Intended staff mix and staff to patient ratio - per area/speciality.</li> <li>Support staff.</li> </ul>	<ul style="list-style-type: none"> <li>Equipment and Infrastructure.</li> <li>Food Services.</li> <li>Laundry &amp; Linen.</li> <li>Information Technology/Communications.</li> <li>Fire &amp; Security.</li> <li>Car Parking.</li> <li>Transport – Location to Public Transport.</li> <li>Security.</li> <li>Waste management.</li> <li>Ambulance access.</li> <li>Asset management/Facility Maintenance.</li> </ul>