

Architectural and Engineering Guidelines for Submission, Approval, and Inspection of Occupancies Licensed by the Tennessee Health Facilities Commission



HFC

Health Facilities Commission

10/2025

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A. General Requirements:

The following notes are intended to help expedite review of your project drawings as submitted to this department. Review is performed only for facilities which are required to be licensed by this department. These include:

REGULATIONS at: <https://publications.tnsosfiles.com/rules/0720/0720.htm>

1. Minimum Standards for Hospitals	0720-14
2. Minimum Standards for Prescribed Child Care Centers	0720-15
3. Minimum Standards for Nursing Homes	0720-18
4. Minimum Standards for Ambulatory Surgical Treatment Centers	0720-20
5. Minimum Standards for Homes for the Aged	0720-21
6. Minimum Standards for Residential Hospices	0720-23
7. Minimum Standards for Birthing Centers	0720-25
8. Minimum Standards for Assisted-Care Living Facilities	0720-26
9. Minimum Standards for HIV Supportive Living Facilities	0720-29
10. Minimum Standards for End Stage Renal Dialysis Clinic	0720-33
11. Minimum Standards for Outpatient Diagnostic Centers	0720-36
12. Minimum Standards for Adult Care Homes – Level 2	0720-37
13. Minimum Standards for Traumatic Brain Injury Residential Homes	0720-38

Plans and specifications shall be submitted to the department for review and approval when new construction, additions to an existing building, or substantial alterations to an existing building are planned by any facility required to be licensed by the department. However, instead of plans and specifications for the conversion only of an existing single-family dwelling into a licensed residential health care facility with six (6) or fewer beds, schematics shall be submitted to the department for approval. Facilities licensed for the first time or changing their licensure category to provide a different service are considered new and must comply with all current and applicable regulations.

Before construction is started, approval of the plans and specifications must be obtained from the department with respect to compliance with the minimum standards and/or regulations. Plans and specifications must be prepared by an architect and/or engineer registered in the state of Tennessee and shall bear their signed and dated seal(s) on every drawing.

A plans review will not be scheduled until the Plans Review Submittal Form and fee, the Certificate of Need (if required) and license fee (if required) are submitted. Meetings will be at the discretion of the department and made on a case-by-case basis. Reviews will be conducted on a first-in first-out basis.

Two (2) sets of plans, specifications, addenda, etc., must be submitted to the department to allow one set to maintain on the job site for the life safety surveyor's reference. Transportation of the plans to the jobsite is the responsibility of the architect or engineer and may be picked up from our office or by providing us with an appropriate self-addressed mailing container pre-supplied with adequate postage. The other set will be maintained in the plans review section until a legible CD-Rom is received. Once the CD-Rom is received, the hard copy set of plans held by plans review can be picked up by the architect, engineer, or facility representative.

Sprinkler shop drawings and calculations must be submitted for review and approved prior to installation. All sprinkler installations in Tennessee must be performed by a contractor currently licensed by the Tennessee Department of Commerce and Insurance to perform such installations, including all underground piping used solely for fire protection. Final approval of the project plans will not be granted until the sprinkler shop drawings are approved.

All construction documents submitted to the plans review section must be properly signed, sealed, and dated by the design professional responsible for the content, must be in accordance with the requirements of the State Board of Architect and Engineering Examiners, contain the assigned project number, and are public record.

Plans approval is also required for any change to the physical plant of a licensed facility which affects any of the following: the function or use of an area; the facility's structural integrity; active or passive fire safety systems; exit corridors; or door assemblies. Renovations which do not meet the substantial renovation requirements as defined by the Board for Licensing Health Care Facilities, per Interpretive Guidelines (see Sections I and K), may not have to submit plans; however, sufficient information must be submitted to the department for review, approval, and inspection.

For all projects requiring a Certificate of Need (CON), the plans must be submitted with the CON number and dates (approval date and expiration date). Plans review on a project will be terminated on the CON expiration date if the project has not been approved and occupied by that date. Projects requiring a CON will not be scheduled for a meeting or review until the CON is obtained.

After approval of plans, prior to construction, the regional life safety inspector shall be notified for scheduling of the progress inspections.

To request a final inspection, the following must be submitted and received by the appropriate office at least four (4) weeks prior to the requested/scheduled final inspection date:

1. The final approved plans on CD-Rom, clearly labeled with the project name, county and assigned project number must be received in the plans review section; and
2. A letter to the appropriate Regional Office requesting the final inspection must be received in the regional office.

The Commission's central and regional offices' mailing addresses are as follows:

Central Office:

Health Facilities Commission
Andrew Jackson Building
502 Deaderick Street, 9th Floor
Nashville, TN 37243

Plans Review Section:

Health Facilities Commission
Andrew Jackson Building
502 Deaderick Street, 9th Floor
Nashville, TN 37243

East Tennessee Regional Office:

Health Facilities Commission
East Tennessee Regional Office
7175 Strawberry Plains Pike, Suite 103
Knoxville, TN 37914

West Tennessee Regional Office:

Health Facilities Commission
West Tennessee Regional Office
295 Summar Drive
Jackson, TN 38301

B. Plans Submission and Review Steps:

Prior to any actions by the plans review section (meeting, review, approval, etc.), the Plans Review Submittal form and review fee, CON (if required), application (if required) and license fee (if required) must be received.

1. There are two options for project document submittal:
 - a. If the architect/engineer chooses to submit hardcopy plans, documents, etc., they must be delivered or mailed to the Tennessee Health Facilities Commission, Andrew Jackson Building, 502 Deaderick Street, 9th Floor, Nashville, TN 37243.

- b. If the architect/engineer chooses to submit electronic plans, documents, etc., they must be submitted via the Plans Review Portal (see Section K).
2. Upon initial submission, the plans will be assigned a project number. This project number must be referenced on all correspondence. Failure to reference the assigned project number on all subsequent correspondence and/or submittals may cause delays in the plans review process.
3. Phased construction plans must contain sufficient information to determine that the architect has the proper interpretations (life safety layout, egress routes and distances, construction type, fire walls, etc.) and to answer code interpretation questions prior to finalizing the design of the facility.
4. The plans review section will issue an approval for the project, deficiencies, or a combination of deficiencies and partial approval (i.e., foundation and /or shell approval). If deficiencies are cited, such deficiencies require correction by submitting revised plans, addenda, field orders, or change orders before the plans can be approved for construction.
5. All plans for a project must agree on the layout, wall ratings, room dimensions, smoke compartments, etc. Any change order, addendum, or other deviation from the approved plans must be submitted and approved prior to construction or change being made.
6. After all deficiencies have been satisfactorily resolved, an approval letter will be issued by the section, and construction may begin. Conveyance of the hard set of plans to the job site for reference by the inspector is the responsibility of the architect/engineer. Note: if the project architect chooses to submit drawings, documents, etc. via the Electronic Plans Review Portal it is the architect's responsibility to provide a hard copy set of plans, specifications, etc. on the job site for reference by the inspector.
7. Final inspection requests shall be directed to the appropriate Regional Office a minimum of four (4) weeks prior to the date of the requested inspection. Prior to the final inspection a CD-Rom disk of the final approved plans including specifications, addenda, field orders, change orders, sprinkler and hood and duct shop drawings, etc., must be submitted to the plans review section. The storage box containing the disk must be labeled with the project name, assigned project number and county. **The Tennessee Health Facilities Commission Inspection for Occupancy/Licensure will not be conducted until the plans on CD-Rom disk are received and approved.**
8. Projects intended to have phased occupancy inspections shall submit a letter signed and dated to the plans review section describing each area, scope of work for each phase, an estimated start/completion date for each phase, and all numbering of phases shall be consecutive numbers (e.g., 1, 2, 3, etc.). **Final Occupancy cannot be granted until all phases have been completed.**
9. Final inspections will be conducted by the regional fire safety personnel as scheduled. If deficiencies are discovered, re-inspection may not be rescheduled for at least thirty (30) days. **Utilizing and/or occupying any spaces is contingent upon inspections and occupancy approval letters being granted from the Central Office Licensure**

C. Plans Requirements:

1. **Civil Engineering Plans** must delineate existing grade structure and improvements, all site utilities, parking spaces (including handicapped spaces), handicapped access to the facility, all area fire hydrants, access roads for emergency vehicles, property lines, other buildings or structures, tanks, etc. Details must be provided for all pits, curbs, depth of bury for piping, etc. Projects which require sprinklers are to show the location, elevation, all related piping and grades, and flow data of the test hydrant. The hydrant test must have been performed within the past twelve (12) months and the time, date and who performed the test must be included in the sprinkler plans.
2. **Architectural Plans** must include floor plans which are drawn to a minimum of 1/8" scale and large-scale plans of typical rooms with net square footage and cubic footage. Architectural plans must show, include, identify, and provide details for all walls and their ratings, all doors, windows, casework and millwork, fixed equipment and plumbing fixtures, the function of each space, how ratings are obtained, how penetrations are to be sealed, schedules on doors, hardware, finishes, etc., all handicapped accessible spaces and the provision of all required handicapped spaces in accordance with the Americans with Disabilities Act.
3. **Life Safety Plans** must provide a single sheet floor plan showing fire/smoke compartment (including size), fire ratings of all walls, travel distances, exit markings, calculation of required exit units, etc.
4. **Mechanical Plans** must show/provide color coding of supply, return and exhaust systems, pressure relationships between all areas, design criteria for all HVAC units, including the percent of outside air (OSA) to be supplied at a minimum and the required OSA changes required for each space, the systems connections to the fire alarm including all shutdowns, cubic footage of room areas and the calculations of the air flow changes for total air changes and for outside air changes.
5. **Electrical Plans** must provide/show: a one-line diagram of normal and alternate power systems showing service entrance, switchboards, transfer switches, distribution and panel boards, and a description of loads, color coding of systems connected to emergency power; all fire alarm zones, red outlets for outlets on emergency power, a fire alarm system diagram, and a description of operation of all devices. Outlets in critical care areas of hospitals must be marked as to the panel and circuit from which it is fed. Ground fault interrupter outlets are to be installed in all wet areas, i.e., physical therapy, laundry, kitchen, central baths, janitor closets, etc.
6. **Plumbing Plans** must provide a general layout of the plumbing system showing all piping, cleanouts, etc. The plumbing plans must also provide/show a layout of all medical gas lines with all control valves and alarms as defined in NFPA 99, where applicable. No piping shall run above food preparation or storage areas per the U.S. Food and Drug Administration, Food Code.

7. **Sprinkler Plans** must provide a general layout of the sprinkler system including head locations, riser location, flow test data, underground location, test hydrant location, and hydraulic calculations, etc. A Sprinkler Standard of Care must be submitted within the Architectural set for review, if applicable.
8. **Outline Form** must be included as a cover sheet and provide/show an index of the construction data, type of construction (both NFPA and IBC types and occupancies), codes editions used, U.L. assemblies used to obtain the required ratings, areas of construction; delineation between new and existing areas noting “fire walls”, allowable area per IBC, etc., allowable area calculations and appropriate drawings to show clearances and when a CON is required, the CON number and date of expiration.
9. **Legends** must be included for each discipline (mechanical, electrical, plumbing, architectural, etc.) clearly delineating all symbols and assemblies used.
10. **Building Height and Area** will be established by the adopted building code and occupancy classification determined by NFPA 101.

D. Safety Considerations in Demolition and Renovation Areas:

Demolition and renovation of areas within an existing facility must be carried out in a manner which considers all factors affecting patients, staff and public safety and must not expose patients to hazardous conditions.

Patient safety during construction/renovation of a facility is of highest priority and is the responsibility of the facility. It may be necessary that nursing wings, beds or even certain areas of the facility be temporarily closed to patients and staff until such time that the area can be rendered safe again for use. During renovation, a greater degree of awareness of potential fire and safety hazards must be maintained by the facility staff and construction personnel. Temporary adjustments must be made in the fire evacuation plans and housekeeping procedures until the facility is restored to a condition of normalcy (i.e., all life and safety systems and safeguards are operational or complete). Close coordination with the regional office and local fire officials is necessary prior to and during renovation to obtain professional safety input and to identify the need to implement patient safety requirements.

Fire and Life Safety Systems requiring a temporary shut-down must be returned to operation as quickly as possible. Alternate safety provisions must be planned for and implemented during any shut-down. Prior to temporary shut-down of the fire alarm, smoke detection and/or sprinkler systems, the facility must contact and coordinate the shut-down with local fire officials and the regional office.

During any construction or renovation, occupied portions of the facility must be kept clean and safe. Appropriate barriers must be placed to separate the operational portion of the facility from areas under construction to prevent dust, debris, traffic, etc. from affecting the facility’s operation. During construction or renovation, operation of the facility must be contained to rooms or areas properly separated from the construction and appropriate egress(es) must

be maintained. Exit/egress arrangements are also to be coordinated with our regional office and the local building official. The facility must have written policies and procedures regarding safety during construction or renovation.

E. Portable Fire Extinguishers:

As various types of fire extinguishers are not equally effective on all types of fires, consideration must be given to the class of fire which may occur, the activity in the area of probable use, and contents of the building when selecting extinguishers. Extinguishers must be conspicuously located, installed, sized, and maintained according to NFPA 10. Extinguishers must be located in accordance with the maximum travel distance does not exceed the requirements specified by NFPA 10.

F. Automatic Sprinkler Systems:

All automatic fire extinguisher systems must be installed by a sprinkler contractor currently licensed in Tennessee to perform such installations, including all underground piping used solely for fire protection. The sprinkler contractor must obtain an approval from the plans review section prior to installation. Maintenance of the system must also be accomplished by a licensed contractor. Systems are to be designed in accordance with the appropriate NFPA codes for the type of system provided. If the system is required by the IBC, the system must be designed as an NFPA 13 system unless the exceptions listed in the NFPA 101 chapters apply.

G. Wall Construction and Penetrations:

All walls or partitions required to have a fire rating and all corridor walls shall be appropriately constructed of noncombustible materials, however, protected construction is allowed where wood framing is in compliance. This includes: fire rated partitions; fire/smoke rated barriers; fire rated walls.

All rated walls must be continuous from floor slab to roof or floor slab above and must be sealed “tight” with a tested assembly for the wall rating. Floor penetrations must also be protected by a tested assembly. The contractor is to keep copies of these tested assemblies on site in order for the inspector to ascertain that the penetration was properly sealed.

Non-rated, smoke-tight walls are to be sealed tight to prevent the passage of smoke from one side to the other. This must only be done on one side of the wall, as long as the integrity of the smoke barrier is preserved for the length of the wall. If the sealed side of the wall changes along the run of the wall, the smoke tight membrane must be run through the cross-section of the wall. Dry-wall compound may not be used to seal penetrations due to the fact that expansion and contraction or other movement of the items penetrating the wall will result in cracks over a period of time. Acoustical caulking may be applied in smoke tight wall penetrations.

H. Kitchen Requirements:

Materials/Finishes:

Washable finishes/materials must be provided in all areas in the kitchen for walls, floors and ceilings. Floors are to be sealed, junctures covered and must be graded to drain. GFCI outlets are to be used in all wet locations.

Lighting:

At least twenty (20) footcandles of light must be provided on all working surfaces. At least ten (10) footcandles of light must be provided on all other areas measured at thirty (30) inches above the finished floor.

Insect and Rodent Protection:

Outer openings must be screened or other adequate controls must to be provided. Outer doors and service windows are to be equipped with self-closers or approved air curtains.

Toilet and Handwashing Facilities:

Toilets must be conveniently located. Toilet rooms must be vented by exhaust fans which run continuously while occupied. Sinks must have wrist blades or other such devices to allow operation without hands and soap dispensers and towels must be provided. A handwashing sink is to be provided in the food preparation areas. Employee lockers and lounges must be supplied, but must not be located in the kitchen area.

Mop Sink Area:

A mop sink closet shall be provided with hot and cold water connections.

Plumbing:

Back siphonage protection must be provided for the dishwasher, potato peeler, disposals, steam tables, scraping troughs, dipper wells, waste pulper, submerged inlets, etc. Indirect drains must be provided for the dishwasher, steam table, potato peeler, ice bins/machines, etc. The walk in cooler/freezer must have an interior drain equipped with a backwater valve. Condensate drains and other piping which may cause contamination of food preparation and storage must not be run overhead in the kitchen area. Kitchen condensate drains must be equipped with appropriate backflow protection. Water registering 140°F. shall be provided for general usage. The water source for the dishwashing area and three compartment sink must have means of supplying 171°F. water to the rinse area. While the use of chemicals for sanitizing dishes allows for use of lesser temperature, this does not eliminate the need to have 171°F water available at all times.

Ventilation:

Kitchen systems must be designed in accordance with NFPA 96 and IMC Chapter 5. The air balance in the kitchen is to be positive in the food preparation area, and negative in the dishwashing area and areas leading to the corridor. Air is to flow from clean to soiled in order to prevent contaminating food and clean items.

I. Interpretive Guidelines:

The following guidelines have been developed to provide interpretations of the department's regulations, alleviate confusion, reduce the number of construction violations encountered, and prevent the need for costly corrections and/or construction delays:

1. "Substantial renovation" are projects that renovate more than ten percent (10%) of any smoke compartment. Areas renovated less than 10% must meet the following criteria to be exempt from submitting plans:
 - a) All work is executed in accordance with currently adopted codes;
 - b) Only one (1) renovation project is being initiated during the year's period;
 - c) No licensure deficiencies were cited on the facility's last survey;
 - d) The project involves no combustible or medical gas and is not classified as Hazardous areas;
 - e) There is no change or alteration to the existing life safety classification;
 - f) There is no change or alteration to the construction type or life safety of the facility; and
 - g) The project does not alter any of the following systems:
 - I. Fire Alarm System;
 - II. Fire Suppression System;
 - III. Mechanical System; or the
 - IV. Electrical System.

All projects must be submitted to the Health Facilities Commission for consideration. Upon review of the data, the Director of Plans Review may require additional information or formal submittal from a licensed architect or engineer.

2. When a fire alarm system is required, all fire warning and detection devices must be connected to that fire alarm system. This includes duct detectors, kitchen exhaust extinguishing systems, alternate fire suppression systems, etc. The initiation of any device must set off the fire alarm system and shut down the air handling units.
3. The sound of the fire alarm or smoke detectors must be heard throughout the facility, and appropriate audible/visual alarm devices must be employed in sufficient number and type to accomplish this. In residential facilities the alarm sounded by the smoke detector must be clearly heard throughout the entire "unit" or facility, not just the sleeping

rooms.

4. “Fully sprinklered” includes all spaces including closets, electrical rooms, elevator shafts, elevator equipment rooms, MRI rooms, freezers, etc.
5. “Fan shutdown” must include all fans involved in recirculating air within the compartment of alarm origination and other fans as necessary to prevent the movement of smoke into other areas.
6. Smoke and fire dampers must be installed according to the manufacturer’s instructions with particular attention to their sealing and the use of mounting screws around breakaway clips and angles. Fire dampers must be installed within the plane of the rated assembly.
7. On dry pipe systems, the water is to begin to flow within one (1) minute at the most remote inspector’s test outlet. This means full water flow, not air and water mixed.

J. Applicable Codes:



**HEALTH FACILITIES COMMISSION
APPLICABLE CODES**

Project Name _____ **Assigned Project #** _____

County _____ **Certificate of Need #** _____

Regulations, Codes and Standards with which this project shall comply when reviewed by the Health Facilities Commission:

- 1. 2021 International Building Code**
- 2. 2021 International Plumbing Code**
- 3. 2021 International Mechanical Code**
- 4. 2021 International Fuel & Gas Code**
- 5. 2021 NFPA 1, excluding NFPA 5000**
- 6. 2021 NFPA 101 Life Safety Code**
- 7. 2017 National Electrical Code**
- 8. 2010 Americans with Disabilities Act (ADA) with 2002 Amendments**
- 9. 2018 Edition of the Guidelines for Design and construction of Hospitals, Outpatient Facilities, Residential Health Care and Support Facilities (FGI).**

Note: Please check with local building/fire officials to determine if any local building codes may be relevant to your project.

ADDITIONAL REGULATIONS that may be required:

- 1. Water Supply – Tennessee Dept. of Environment and Conservation (TDEC) - (615) 532-0625**
- 2. Wastewater – TDEC, Division of Water Resources - (615) 532-0625**
- 3. Radiological Protection – TDEC - (615) 532-0364**
- 4. Air Pollution Control – TDEC - (615) 532-0554**
- 5. Hazardous Waste Disposal – TDEC - (615) 532-0780**

K. Additional Resources:

Department Name Change Effective July 1, 2022: Pursuant to Public Chapter 1119, The Department of Health Office Licensing Health Care Facilities merged with Health Services & Development Agency to become Health Facilities Commission (HFC).

Board for Licensing Health Care Facilities Rules and Regulations:

<https://publications.tnsosfiles.com/rules/0720/0720.htm>

Plans Review:

[HFC Plans Review for construction plans and guidelines](#)

Interpretative Guidelines:

https://www.tn.gov/content/dam/tn/hfc/documents/HFC-BLHCF_Interpretive_Guidelines-Current.pdf

Centers for Medicare & Medicaid Services:

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs-Items/CMS1201984>

Plans Submission Steps:

1. Apply for a Certificate of Need (CON) if required: [Information on the Certificate of Need Program](#).
2. Complete Licensure Application for a new facility: [Tennessee HFC Licensure Applications and reports](#).
3. Notify Licensure, in writing, of work to be performed in existing facilities.
4. Complete and submit a Plans Review Submittal Form either hardcopy or electronically through the Electronic Plans Review Portal: <https://apps.tn.gov/tnhcf/>
5. Submit the required Review Fee for the project as required within Rules & Regulations 0720-43-.03: <https://publications.tnsosfiles.com/rules/0720/0720-43.20220701.pdf>
6. Submit Plans and Specifications either hardcopy or electronically. The submittal form (hardcopy or electronic) must remain the same throughout the project.
7. Submit Sprinkler shop drawings, hydraulic calculations, etc.
8. Submit Hood & Duct, Nurse Call/Emergency Call System, and Fire Alarm shop drawings, documents, etc.
9. Submit the project CD-Rom/DVD: the CD-Rom/DVD must contain all HFC stamped/approved drawing sheets, documents, etc.