

Steve Sisolak  
Governor

Richard Whitley, MS  
Director



**DEPARTMENT OF  
HEALTH AND HUMAN SERVICES**  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
*Helping people. It's who we are and what we do.*



Lisa Sherych  
Administrator

Ihsan Azzam,  
Ph.D., M.D.  
Chief Medical Officer

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## Variance #720

NEVADA STATE BOARD OF HEALTH  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
4150 Technology Way, Suite 300  
CARSON CITY, NV 89706

**APPLICATION FOR VARIANCE**

Please check the appropriate box that pertains to the NAC for which you are requesting a variance.

Division Administration  
(NAC 439, 441A, 452, 453A, & 629)

Health Care Quality & Compliance  
(NAC 449, 457, 459 & 652)

Child, Family & Community Wellness  
(NAC 392, 394, 432A, 439, 441A, & 442)

Health Statistics, Planning,  
Epidemiology and Response  
(NAC 440,450B, 452, 453, 453A, & 695C)

Public Health & Clinical Services  
(NAC 211, 444, 446, 447, 583, &  
585)

Date: 07/22/2021

Name of Applicant: Valley Hospital

Phone: 702-546-0911

Mailing Address: 620 Shadow Lane

City: Las Vegas

State: NV

Zip: 89106

We do hereby apply for a variance to NAC 449.3154(2) of the Nevada  
chapter/section \_\_\_\_\_

Administrative Code (NAC). (For example: NAC 449.204)

Title of section in  
question: Construction, remodeling, maintenance and change of use: General  
requirements; prerequisites to approval of licensure

Statement of existing or proposed conditions in violation of the NAC:

- (1) 2.1-8.7.2 Elevators: The facility has an existing elevator that is sized to meet the requirements of FGI 2014. The facility had a variance approved in December 2018 from The Nevada State Board of Health concerning the existing elevator.

Date of initial operation (if existing): July 5, 2018

**ATTENTION: Please read this section closely. Your request for variance will be examined against these criteria:**

NEVADA STATE BOARD OF HEALTH  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
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CARSON CITY, NV 89706

**APPLICATION FOR VARIANCE**

Any person who, because of unique circumstances, is unduly burdened by a regulation of the State Board of Health and thereby suffers a hardship and the abridgement of a substantial property right may apply for a variance from a regulation. (NAC 439.200(1))

1. The State Board of Health will grant a variance from a regulation only if it finds from the evidence presented at the hearing that:
  - (a) There are circumstances or conditions which:
    - (1) Are unique to the applicant;
    - (2) Do not generally affect other persons subject to the regulation;
    - (3) Make compliance with the regulation unduly burdensome; and
    - (4) Cause a hardship to and abridge a substantial property right of the applicant; and
  - (b) Granting the variance:
    - (1) Is necessary to render substantial justice to the applicant and enable him to preserve and enjoy his property; and
    - (2) Will not be detrimental or pose a danger to public health and safety.
2. Whenever an applicant for a variance alleges that he suffers or will suffer economic hardship by complying with the regulation, he must submit evidence demonstrating the costs of his compliance with the regulation. The Board will consider the evidence and determine whether those costs are unreasonable. (NAC 439.240)

**Therefore, it is important for your variance request to be as complete as possible. It is your responsibility to attach documentation supportive of your variance request.**

Statement of degree of risk of  
health: NO Risk

The variance requested (elevator) poses no health risk to patients, visitors, or staff at Elite Medical Center. The facility is not changing the use of the existing facility.

The elevator in question has an approved variance from the Nevada State Board of Health. The variance was approved in December 2018. The elevator in question ("Variance Elevator") poses no health risk to patients, visitors, or staff at Elite Medical Center. The Variance Elevator is considered a secondary elevator for the facility, located near the pedestrian entrance to the facility and used for ambulatory or wheelchair transport. It is primarily used by visitors, which helps maintain patient privacy.

Although the Variance Elevator in question is smaller than required, Elite Medical Center has confirmed that it can accommodate a reclined gurney if necessary and can be fully utilized by Emergency Medical Services ("EMS"). A photograph of the reclined gurney in the Variance Elevator is attached. (Exhibit 1 and 2) All medical services of the facility are available without leaving the second floor except for CT. Elite Medical Center's primary elevator ("Primary Elevator") meets all current guidelines, meaning transport by gurney in the Variance Elevator would only be necessary if the Primary Elevator were out of service. As such, the elevator variance poses no risk to patients, visitors, or staff at Elite Medical Center.

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CARSON CITY, NV 89706

**APPLICATION FOR VARIANCE**

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Please state in detail the circumstances or conditions which demonstrate that:

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1. An exceptional and undue hardship results from a strict application of the Regulation:
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The existing elevator has an approved variance. The original variance request noted that to bring the elevator into strict compliance with the guidelines it would require an estimated 41 weeks to complete, at an estimated cost of \$343,000.00 per the architectural estimate. Based on the updated time and cost estimate from the architect, to bring the Variance Elevator into strict compliance with the guidelines would require 51 weeks to complete at an estimated cost of \$499,750.00 per the attached architectural estimate (Exhibit 3). Upgrading would pose significant operational and financial hardship to the facility.

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2. The variance, if granted, would not:
- A. Cause substantial detriment to the public welfare.

The Variance Elevator is used mostly by pedestrian visitors or wheelchair transport and is fully accessible by and functional for EMS use and transportation by gurney. As stated in the original variance approval, Elite Medical Center purchased a gurney, which will be on hand in the event that 1) patient transport between floors is necessary; 2) the Primary Elevator is out of service; and 3) the patient cannot be transported via wheelchair. As Elite Medical Center does not have an intensive care unit ("ICU") to receive severe cases, it would be a rare occasion that bed or gurney elevator transportation would be necessary.

Elite Medical Center's second floor provides all services of the facility with the exception of CT, meaning second floor patients will typically not require transportation to the first floor for medical care. The facility's Primary Elevator, compliant with guidelines, is primarily used for patient transportation.

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- B. The variance if granted, would not Impair substantially the purpose of the regulation from which the application seeks a variance.
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NEVADA STATE BOARD OF HEALTH  
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**APPLICATION FOR VARIANCE**

This elevator regulation is intended to ensure safe, reliable patient transport between floors for medical treatment and emergency access. Elite Medical Center is able to ensure such transport availability through a combination of the following available equipment and unique features:

- Small facility with two (2) floors:
  - o fifteen (15) Emergency Department patient beds on the Ground/First Floor, and
  - o twenty-two (22) inpatient beds on the Second Floor.
- Two (2) available elevators:
  - o The Primary Elevator - fully compliant with guidelines, able to accommodate patient transport via hospital bed, and used primarily for patient transport
  - o the Variance Elevator - primarily used by ambulatory visitors, able to accommodate wheelchair and gurney transportation if Primary Elevator out of service
- All medical services of the facility are available without leaving the second floor except CT, making patient transportation between floors relatively infrequent.
- The facility has no ICU, and to date, all non-ambulatory patient transportation between floors has been by wheelchair.
- The Variance Elevator is fully accessible by EMS.
- Elite Medical Center purchased its own gurney to have on hand if needed.

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The bureau may require the following supporting documents to be submitted with and as a part of this application:

1. Legal description of property concerned
2. General area identification map

NEVADA STATE BOARD OF HEALTH  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
4150 Technology Way, Suite 300  
CARSON CITY, NV 89706

**APPLICATION FOR VARIANCE**

- \_ 3. Plat map showing locations of all pertinent items and appurtenances
- \_ 4. Well log (if applicable)
- \_ 5. Applicable lab reports
- \_ 6. Applicable engineering or construction/remodeling information
- \_ 7. Other items (see following pages)

This application must be accompanied by evidence demonstrating the costs of your compliance with regulations or specific statutory standards. Your request will be placed on the Board of Health agenda 40 days or more after receipt in this office if accompanied by the required fee (NAC 439.210). The application and supporting documentation will form the basis for the Division of Public and Behavioral Health staff report and recommendation(s) to the Board. Failure to respond to the above statements may cause the Board to deny consideration of the application at the requested Board meeting.

Please schedule this hearing during:

The next regularly scheduled Board of Health meeting, regardless of location.

The next scheduled meeting in Carson City.

The next scheduled meeting in Las Vegas.

Signature: Sean Applegate

Printed Name: Sean Applegate

Title: Senior Regional Project Manager

Date: 7/23/2021

NEVADA STATE BOARD OF HEALTH  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
4150 Technology Way, Suite 300  
CARSON CITY, NV 89706

**APPLICATION FOR VARIANCE**

**PLEASE SUBMIT YOUR APPLICATION FOR VARIANCE BY USING  
ANY OF THE FOLLOWING METHODS:**

**MAIL TO:**

Lisa Sherych, Administrator  
Division of Public and Behavioral Health  
4150 Technology Way, Suite 300  
Carson City, NV 89706

**FAX:**

775-687-7570

**EMAIL:**

[DPBH@health.nv.gov](mailto:DPBH@health.nv.gov)

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Governor

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Director



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Lisa Sherych  
Administrator

Ihsan Azzam,  
Ph.D., M.D.  
Chief Medical Officer

## NOTICE OF PUBLIC HEARING

### VALLEY HOSPITAL IS REQUESTING A VARIANCE, #720, FROM THE NEVADA STATE BOARD OF HEALTH REGULATIONS.

NOTICE IS HEREBY GIVEN that VALLEY HOSPITAL has requested a variance from Nevada Administrative Code (NAC) 449.3154(2).

A public hearing will be conducted on September 3<sup>rd</sup>, 2021 at 9:00 am, by the Nevada State Board of Health to consider this request. This meeting will be held via online conference and at physical locations.

#### Meeting Locations:

- **Red Rock Conference Room,**  
Southern Nevada Health District,  
280 S. Decatur, Las Vegas, NV 89107
- **4150 Technology Way; Conference Room 303**  
4150 Technology Way, Third Floor  
Carson City, NV 89706

#### Join from computer using the meeting link:

<https://zoom.us/j/99339558897?pwd=dis1akphUFNIS1pTUE9BQTBINFRNUT09>

Meeting ID: 993 3955 8897

Passcode: 640932

One tap mobile: +12532158782,,99339558897,,,,\*640932# US

#### Join by Phone:

+1 669 900 9128

Meeting ID: 993 3955 8897

Passcode: 640932



**Valley Hospital is requesting a variance from NAC 449.3154(2), which states:**

**NAC 449.3154(2) Construction, remodeling, maintenance and change of use: General requirements; prerequisites to approval of licensure. ([NRS 439.200](#), [449.0302](#))**

1. Except as otherwise provided in this section, a hospital shall comply with the provisions of *NFPA 101: Life Safety Code*, adopted by reference pursuant to [NAC 449.0105](#).

2. Except as otherwise provided in this section, any new construction, remodeling or change in the use of a hospital must comply with the applicable provisions of the guidelines adopted by reference in paragraphs (c) and (d) of subsection 1 of [NAC 449.0105](#), unless the remodeling is limited to refurbishing an area of the hospital, including, without limitation, painting the area, replacing the flooring in the area, repairing windows in the area and replacing window or wall coverings in the area.

3. Except as otherwise provided in subsection 4, a hospital shall meet all applicable:

- (a) Federal and state laws;
- (b) Local ordinances, including, without limitation, zoning ordinances; and
- (c) Life safety, environmental, health, fire and local building codes,

related to the construction and maintenance of the hospital. If there are any differences between the state and local codes, the more restrictive standards apply.

4. A hospital which is inspected and approved by the State Public Works Division of the Department of Administration in accordance with the provisions set forth in [chapter 341](#) of NRS and [chapter 341](#) of NAC is not required to comply with any applicable local building codes related to the construction and maintenance of the hospital.

5. A complete copy of the building plans for new construction and remodeling of a hospital, drawn to scale, must be submitted to the entity designated to review such plans by the Division of Public and Behavioral Health pursuant to the provisions of [NAC 449.0115](#). Before the construction or remodeling may begin, plans for the construction or remodeling must be approved by the Division of Public and Behavioral Health.

6. The Bureau shall not approve the licensure of a hospital until all construction has been completed and a survey is conducted at the site. The plan review is only advisory and does not constitute prelicensing approval.

7. Notwithstanding any provision of this section to the contrary, a hospital which was licensed on January 1, 1999, shall be deemed to be in compliance with this section if the use of the physical space in the hospital does not change and the existing construction of the hospital does not have any deficiencies which are likely to cause serious injury, serious harm or impairment to public health and welfare.

(Added to NAC by Bd. of Health by R050-99, eff. 9-27-99; A by R076-01, 10-18-2001; R068-04, 8-4-2004; R122-16, 9-21-2017)

**The authority of the State Board of Health to consider and grant a variance from the requirements of a regulation is set forth at NRS 439.200 and NAC 439.200 – 439.280.**

Persons wishing to comment upon the proposed variance may appear at the scheduled public hearing or may submit written testimony at least five days before the scheduled hearing to:

Secretary, State Board of Health  
Division of Public and Behavioral Health  
4150 Technology Way, Suite 300  
Carson City, NV 89706

Anyone wishing to testify for more than five minutes on the proposed variance must petition the Board of Health at the above address. Petitions shall contain the following: 1) a concise statement of the subject(s) on which the petitioner will present testimony; 2) the estimated time for the petitioner's presentation.

This notice has also been posted at the following locations:

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH, 4150 TECHNOLOGY WAY, CARSON CITY, NV

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH WEBSITE:

<http://dpbh.nv.gov/Boards/BOH/Meetings/Meetings/>

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Lisa Sherych  
Administrator

Ihsan Azzam,  
Ph.D., M.D.  
Chief Medical Officer

August 04, 2021

**Memorandum**

To: Jon Pennell, DVM, Chairperson  
State Board of Health

From: Lisa Sherych, Administrator  
Division of Public and Behavioral Health

RE: Valley Hospital Medical Center

**Subject:** Case #720: Valley Hospital Medical Center's Request for Variance to NAC 449.3154(2), Facility Guidelines Institute, *Guidelines for Design and Construction of Hospitals*, (FGI Guidelines) Section 2.1-8.7.2.2 through 2.1-8.7.2.3, Elevator car number and elevator car size/dimension.

**Staff Review**

NAC 449.3154(2) states, "Except as otherwise provided in this section, any new construction, remodeling or change in the use of a hospital must comply with the applicable provisions of the guidelines adopted by reference in paragraphs (c) and (d) of subsection 1 of NAC 449.0105, unless the remodeling is limited to refurbishing an area of the hospital, including, without limitation, painting the area, replacing the flooring in the area, repairing windows in the area and replacing window or wall coverings in the area."

NAC 449.0105(1)(c) states, "The State Board of Health hereby adopts by reference:

(c) *Guidelines for Design and Construction of Hospitals*, in the form most recently published by the Facility Guidelines Institute, unless the Board gives notice that the most recent revision is not suitable for this State pursuant to subsection 2. A copy of the guidelines may be obtained from the Facility Guidelines Institute AHA Services, Inc., P.O. Box 933283, Atlanta, Georgia 31193-3283, at the Internet address <http://www.fgiguilines.org/> or by telephone at (800) 242- 2626, for the price of \$200."

The Facility Guidelines Institute, *Guidelines for Design and Construction of Hospitals*, 2018 Edition (FGI Guidelines) provide:

Section 2.1-8.7.2.2 Elevator Number.

(1) At least two hospital-type elevators shall be installed where 1-59 patient beds are located on any floor other than the main entrance floor.

Section 2.1-8.7.2.3 Dimensions and clearances

(1) Elevator cars/cabs shall have minimum inside clear dimensions of 5 feet 8 inches (1.73 meters) wide by 9 feet (2.74 meters) deep.

(2) Elevator car/cab doors shall have a minimum clear width of 54 inches (137 centimeters) and a minimum height of 84 inches (213 centimeters).

Valley Hospital Medical Center (VHMC) is located at 620 Shadow Lane, Las Vegas, Nevada 89106 (main campus) and licensed with 306 beds. Valley Hospital had acquired the formerly known hospital, Elite Medical Center, on 07/31/2021, which is located at 150 East Harmon Avenue, Las Vegas, Nevada 89109. This acquisition was a two-story hospital with 22 medical/surgical beds and emergency department with the former hospital departments becoming remote outpatient departments of VHMC. This acquisition raised VHMC's bed count to 328 beds. The outpatient beds are located on the second level, with an emergency department, laboratory, radiology department and all required support services located on the first level. The Elite Medical Center was designed and renovated using the 2014 Edition of the FGI Guidelines and was licensed 07/03/2018. VHMC acquisition was using the 2018 Edition of the FGI Guidelines. The Elite building was evaluated with over 80 general hospital code edition changes found between the 2014 and 2018 Editions of the FGI Guidelines, with only the elevator issue as a residual and needing a variance. This is not surprising given that Elite Medical Center required a variance (Case #696) for the elevator, which got approved by the Nevada Board of Health in December 2018.

When Elite Medical Center opened in 2018, it had two elevators: one that met the requirements (hospital-type) and one that did not (non hospital-type elevator, it was undersized). The 2014 Edition and the 2018 Edition of the FGI Guidelines concerning the elevator requirements had remained the same. Elite Medical Center relinquished their license and VHMC acquired the building adding the operations as remote outpatient departments to their main campus. The elevator variance does not automatically transfer to VHMC, thus the variance request. The elevators have not changed since 07/03/2018, and the Variance #696 justification is still valid, as described below.

The facility is requesting a variance to the requirements for having (1) two hospital-type (number) elevators and (2) having both elevators being of the required size/dimensions. The facility currently has two elevators, one elevator conforms to a hospital-type elevator (appropriate size and dimension) and another elevator that is a smaller passenger elevator (non hospital-type). The hospital-type elevator was installed with the building's renovation in 2017-2018. The non hospital-type elevator was pre-existing. The facility is requesting that the non hospital-type elevator be allowed to substitute as meeting the number of hospital-type elevator (requirement is two hospital-type elevators) without meeting the elevator car's opening requirement and the elevator car's size/dimensions.

The non hospital-type elevator (existing passenger elevator) has the following measurements:

a) Elevator inside clear dimensions:

6 feet 7 and 7/16 inches wide (5 feet 8 inches required) – requirement met

4 feet 8 and 9/16 inches deep (9 feet deep required) – requirement not met

b) Elevator car/cab doors minimum clear width and height dimensions:

Car/cab doors clear width 43 and 3/4 inches (54 inches clear width required) – requirement not met

Car/cab doors minimum height 84 and 9/16 inches (84 inches clear height required) – requirement met

The facility reasons that patient safety is not impaired by the size of the existing elevator as the primary use for the elevator is for visitors and not for the transport of patients on beds. The facility also notes that the existing elevator can accommodate an emergency medical system stretcher, which allows the patients head and torso to be raised into an upright position allowing the stretcher to fit into the elevator.

**Intent of the Regulation:**

The intent of the regulation is to provide elevator car/cab sizes and openings to accommodate a patient bed with attendants and equipment. The requirement for two hospital-type elevators allows for redundancy, taking into account the possibility that one hospital-type elevator could be out of service and not readily available for patient transport.

**Degree of risk to public health and safety:**

There is always an inherit risk when necessary equipment is not available, not designed correctly or not functioning properly. However, alternative approaches can be evaluated to establish equivalency (see below Staff Recommendations) and research for precedence of similar variances allowed by the Nevada Board of Health in the past (see next).

A similar elevator variance, Case #305, was for St. Rose Dominican Hospital, Siena Campus in June 2000. This variance was for the elevators being undersized relative to the code at that time (the *1996/1997 Guidelines for Design and Construction of Hospital and Health Care Facilities*, American Institute of Architects (AIA) Section 7.30.B2, “Hospital-type Elevator Car Dimensions”).

Granting this variance would not impair the purpose of the regulation or cause a substantial detriment to the public welfare if the facility implements physical and operation approaches as identified in the Staff Recommendations (see below) and as required since Elite has been operating. The non hospital-type (existing) elevator car’s opening, and car’s size/dimension would not allow a standard emergency room stretcher or hospital bed to fit into this existing elevator limiting its universality. Fortunately, the bed count is low (22-beds) to the second level and the non hospital-type elevator can accommodate an emergency medical system stretcher.

**Exceptional and undue hardship:**

The facility’s Architect original (2018) estimate for updating the existing elevator to a hospital-type elevator would cost approximately \$343,500.00. The Architect further estimated the timeline for planning and construction would be approximately 41 weeks. For this same elevator, the same Architect indicated the August 2021 updated time and cost estimates to bring the Variance Elevator into strict compliance with the 2018 Edition FGI Guidelines would require 51 weeks to complete at a revised cost of \$499,750.00. Also, the upgrading would pose additional operational and financial hardship to the facility.

**Staff Recommendation**

Staff recommends that the Board of Health approve the variance with conditions for Valley Hospital Medical Center’s request for Variance #720 to NAC 449.3154(2), *Guidelines for Design and Construction of Hospitals and Outpatient Facilities*, Section 2.1-8.7.2.2 through 2.1-8.7.2.3, Elevator car number and elevator car size/dimension. The proposed conditions include:

- a) The facility must purchase and have available at least two emergency medical system sized stretchers at all times.
- b) When the facility’s hospital-type elevator is out of service, the facility must not admit patients requiring admission to the second floor.
- c) The facility must ensure that the elevators (both hospital-type and non-hospital type) are serviced to maintain them operational in accordance with all applicable codes.
- d) The facility must continuously maintain their elevators’ (both types) service and maintenance logs and retain this information for regulatory review. These logs must be readily available upon request for review going back at least at least two-years.

**Public Comments:** None

**Presenter:** Steve Gerleman, Health Facilities Inspection Manager, Bureau of Healthcare Quality and Compliance

**Attachments:** None.

BEFORE THE STATE BOARD OF HEALTH

IN THE MATTER OF)  
VALLEY HOSPITAL MEDICAL CENTER'S ELITE MEDICAL CENTER)  
VARIANCE REQUEST: CASE #720)

The Nevada State Board of Health ("Board"), having considered the application for variance and all other related documents submitted in support of the application in the above referenced matter, makes the following Findings of Fact, Conclusions of Law and Decision.

FINDINGS OF FACT

1. The Division of Public and Behavioral Health received a request for variance from NAC 449.3154(2).

2. NAC 449.3154.2 states, "Except as otherwise provided in this section, any new construction, remodeling or change in the use of a hospital must comply with the applicable provisions of the guidelines adopted by reference in paragraphs (c) and (d) of subsection 1 of NAC 449.0105, unless the remodeling is limited to refurbishing an area of the hospital, including, without limitation, painting the area, replacing the flooring in the area, repairing windows in the area and replacing window or wall coverings in the area."

NAC 449.0105.1.(c) states, "The State Board of Health hereby adopts by reference: (c) *Guidelines for Design and Construction of Hospitals and Outpatient Facilities*, in the form most recently published by the Facility Guidelines Institute, unless the Board gives notice that the most recent revision is not suitable for this State pursuant to subsection 2. A copy of the guidelines may be obtained from the Facility Guidelines Institute AHA Services, Inc., P.O. Box 933283, Atlanta, Georgia 31193-3283, at the Internet address <http://www.fgiguilines.org/> or by telephone at (800) 242- 2626, for the price of \$200."

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*Guidelines for Design and Construction of Hospitals and Outpatient Facilities* (2018 Edition)

2.1-8.7.2.2 Elevator Number

(1) At least two hospital-type elevators shall be installed where 1 to 59 patient beds are located on any floor other than the main entrance floor.

And

#### 2.1- 8.7.2.3 Dimensions and Clearances

(1) Elevator cars/cabs shall have minimum inside clear dimensions of 5 feet 8 inches (1.73 meters) wide by 9 feet (2.74 meters) deep.

(2) Elevator car/cab doors shall have a minimum clear width of 54 inches (137 centimeters) and a minimum height of 84 inches (213 centimeters).

3. Valley Hospital Medical Center's Elite Medical Center is a two-story hospital with 22 medical/surgical inpatient beds. The inpatient beds are located on the second level, with an emergency department, laboratory, radiology department and all required support services located on the first level. Valley Hospital Medical Center had acquired the Elite Medical Center (former hospital) at the end of July 2021, and inherited with the building an undersized elevator car size and its undersized car door opening. The former hospital (Elite Medical Center) had obtained a Nevada Board of Health Variance #696 for these elevator issues with the December 2018 Board of Health meeting. The elevator variance did not automatically transfer to Valley Hospital Medical Center with the acquisition. The facility is requesting a variance to the requirement for two hospital sized elevators. Specifically, the facility currently has two elevators, one elevator conforms to a hospital-type elevator (appropriate size and dimension) and another elevator that is a smaller passenger elevator (non hospital-type). The hospital-type elevator was installed with the building's original renovation in 2017. The non hospital-type elevator was pre-existing. The facility is requesting that the non hospital-type elevator be allowed to substitute as meeting the number of hospital-type elevator (requirement is two

hospital-type elevators) without meeting the elevator car's opening requirement and the elevator car's size/dimensions.

4. Granting this variance would not impair the purpose of the regulation or cause detriment to the public welfare. The facility reasons that patient safety is not impaired by the size of the existing elevator as the primary use for the elevator is for visitors and not for the transport of patients on beds. The facility also notes that the existing elevator can accommodate an emergency medical system stretcher, which allows the patients head and torso to be raised into an upright position allowing the stretcher to fit into the elevator.

5. Compliance would cause exceptional and undue hardship for the applicant. The facility's Architect estimates that updating the existing elevator to a hospital-type elevator would cost approximately \$499,750.00. The Architect further estimates the timeline for planning and construction would be approximately 51 weeks.



## CONCLUSIONS OF LAW

1. This matter is properly before the Nevada State Board of Health pursuant to NRS 439.200 and determination of the matter on the merits is properly within the subject matter jurisdiction of the board.
2. NRS 439.200 provides:  
The State Board of Health may grant a variance from the requirements of a regulation if it finds that:
  - (a) Strict application of that regulation would result in exceptional and undue hardship to the person requesting the variance; and
  - (b) The variance, if granted would not:
    - (1) Cause substantial detriment to the public welfare; or
    - (2) Impair substantially the purpose of the regulation.
3. The Board finds that strict application of the regulation would result in an exceptional and undue hardship.
4. The Board finds that granting this variance would not impair the purpose of the regulation or cause a substantial detriment to the public welfare.

**ORDER**

Based upon the foregoing Findings of Fact and Conclusions of Law, and good cause appearing, therefore, IT IS HEREBY ORDERED, ADJUDGED, AND DECREED that the variance from NAC 449.3154(2) is APPROVED as presented; specifically, the hospital will be allowed to use the existing elevator with the following conditions;

1. The facility must purchase and have available at least two emergency medical system sized stretchers at all times.
2. When the facility's hospital-type elevator is out of service, the facility must not admit patients requiring admission to the second floor.
3. The facility must ensure that the elevators (both hospital-type and non-hospital type) are serviced to maintain them operational in accordance with all applicable codes.
4. The facility must continuously maintain their elevators' (both types) service and maintenance logs for period of time of at least two-years and have them available for review when requested.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 2021

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Lisa Sherych, DPBH Administrator,  
Secretary Nevada State Board of Health

CERTIFICATE OF MAILING

I hereby certify that I am employed by the Department of Health & Human Services,  
Division of Public and Behavioral Health, and that on the \_\_\_\_\_ day of \_\_\_\_\_, 2021,  
I served the foregoing FINDINGS OF FACT AND DECISION by mailing a copy thereof to:

Valley Hospital Medical Center

620 Shadow Lane

Las Vegas, NV 89106

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Exhibit #1



Exhibit #2



Exhibit 3  
**Elite Medical Center**

**Additional Elevator Budget and Timeline**

To Whom this May Concern:

We are requesting a waiver of the requirements to add a secondary “hospital grade” elevator to this facility. This was an existing building that had an existing passenger elevator, which is of adequate size to fit an EMS gurney inside of it. We added a large “hospital grade” elevator to the building as part of the renovation that was just completed, so there is a total of two elevators. The only service that is provided on the first floor that would ever need the potential transport of an inpatient patient in a hospital bed is a CT Scanner. We believe the spirit of the code that requires two elevators is for hospitals that have the need for constant transport of patients between floors. That is not the case in this facility.

4000 PEARSON  
ATLANTA  
KUSTON  
SPRINGFIELD  
CHICAGO  
DALLAS/FORT WORTH  
DENVER  
HOUSTON  
HOUSTON  
LAS VEGAS  
LOS ANGELES  
SAN FRANCISCO

**Estimated Cost:**

Architecture / Engineering:	\$ 45,000.00
Permits:	\$ 5,000.00
Demo of Existing Elevator:	\$ 52,500.00
New Elevator:	\$187,500.00
Foundations:	\$ 15,000.00
CMU Elevator Shaft:	\$ 60,000.00
Elevator Shaft Roof:	\$ 12,750.00
Repair of Existing Canopy:	\$ 22,500.00
Electrical:	\$ 22,500.00
GC General Conditions:	\$ 40,000.00
GC Fees:	\$ 37,000.00

**Total Estimated Cost: \$499,750.00**

**Estimated Timeline:**

Planning Approval:	12 Weeks
Design / Engineering:	8 Weeks (Concurrent with Planning)

**PGAL LLC**

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Ryan Loschowski, PE | Sharon Long | Michael H. Lord, A.A. | David R. Moss, AIA | Greg Mullin, AIA | Ian A. Nestor, AIA | John Pitt, A.A.  
Chris Ruebush, AIA | Debra S. Vinick, PE | Jeffrey A. Warner, AIA

Permitting:	14 Weeks
Elevator Lead Time:	36 Weeks
Construction of Elevator Shaft:	6 Weeks
Elevator Installation:	6 Weeks
<u>Final Inspections:</u>	<u>3 Weeks</u>

**Total Duration from Start: 51 Weeks**

Please feel free to contact me directly with any questions.

Thank you,

A handwritten signature in black ink, appearing to be the initials 'BG' with a long horizontal stroke extending to the right.

Benjamin Girardin, AIA, NCARB, LEED AP  
Principal Architect



## Exhibit 4 Elite Medical Center Inpatient Person of Size Accommodations Budget and Timeline

### To our top Management Concerns

We are requesting a waiver of the requirement to add Person of Size accommodations to the existing facility. This is an existing operating hospital clinic that was designed under the 2010 GI Geriatric accommodations. There are a part of the 2010 GI clinic that facility meet 2010 GI expanded on the the requirement and classified the a Person of Size POS. To accommodate at the second floor inpatient patient room the existing Private ISO / ADA Patient Room 200 Ante Room 207 and SS 200 would need to be modified. Ante Room 207 would need to be relocated and the door expanded. Patient Toilet Room 200 would need to be demolished and expanded into a portion of SS 200 and total result to meet the POS requirement. SS 200 would likely need to be relocated entirely. Final to meet the access to the room clinic would need to be a well.

- ALEXANDRIA
- ATLANTA
- AUSTIN
- BOCA RATON
- CHICAGO
- DALLAS/FORT WORTH
- DENVER
- HOBOKEN
- HOUSTON
- LAS VEGAS
- LOS ANGELES
- SALT LAKE CITY
- SAN DIEGO

### Estimated Cost:

Architecture / Engineering	\$ 000,000.00
Permit	\$ 0,000.00
Design	\$ 1,000,000.00
Slab Patch	\$ 1,000,000.00
General Construction	\$ 12,000,000.00
Door	\$ 0,000.00
Tile floor / wall	\$ 3,000,000.00
Accessories	\$ 1,070,000.00
Patient Lift Site	\$ 0,000,000.00
Plumbing	\$ 0,000,000.00
Electrical	\$ 0,000,000.00
GC General Condition	\$ 0,000,000.00
GC Fee	\$ 2,000,000.00

**Total Estimated Cost: \$360,250.00**

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Matthew Ellis, AIA | Samuel J. Ferreri, AIA | Beth Funk | Cheryl Gajeske, AIA | Costas Georghiou, PE | Benjamin J. Girardin, AIA  
Ryan Josefovsky, PE | Sharon Lang | Michael H. Lloyd, AIA | David F. Moss, AIA | Greg Mullin, AIA | Ian A. Nestler, AIA | Iván Pire, AIA  
Cris Ruebush, AIA | Derron S. Vincik, PE | Jeffrey A. Weiner, AIA

**Estimated Timeline:**

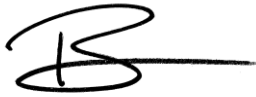
Design / Engineering	10 weeks
Permitting/ State Seal	1 week
Construction	10 weeks
Final Inspection	3 weeks

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**Total Duration from Start: 37 Weeks**

Please feel free to contact me directly and any questions

Thank you



Benjamin Girardin AIA CAR L D AP  
Principal Architect





Exhibit 5  
**Elite Medical Center**

**Additional Elevator Budget and Timeline**

To ☐ ☐☐ t☐☐Ma☐Concern☐

We are requesting a waiver of the requirements to add a secondary “hospital grade” elevator to t☐☐ facilit☐☐T☐☐☐a☐an existing ☐☐lding t☐at ☐ad an existing pa☐enger elevator☐☐ic☐ i☐ o☐ade☐ate ☐☐e to fit an ☐MS g☐rne☐ in☐ide o☐it☐☐ e added a large “hospital grade” elevator to the building as part of the renovation that was just completed☐☐ t☐ere i☐ a total o☐t☐o elevator☐☐T☐☐e on☐☐☐er☐ice t☐at i☐ provided on t☐e first floor t☐at ☐o☐ld e☐er need t☐e potential transport o☐an inpatient patient in a ☐☐pital bed i☐ a CT Scanner☐☐ e ☐elieve t☐e ☐pirit o☐t☐e code t☐at require☐ t☐o elevator☐ i☐ for ☐☐pital☐ t☐at ☐a☐e t☐e need for constant transport o☐patient☐ bet☐een floor☐☐T☐☐at i☐ not t☐e ca☐e in t☐☐ facilit☐☐

- ALEXANDRIA
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- DENVER
- HOBOKEN
- HOUSTON
- LAS VEGAS
- LOS ANGELES
- SALT LAKE CITY
- SAN DIEGO

**Estimated Cost:**

Arc☐tecture / ☐ngineering☐	☐ ☐☐,000.00
Per☐ it☐☐	☐ ☐,000.00
De☐ o☐☐existing ☐levator☐	☐ 2,000.00
☐e☐ ☐levator☐	☐ 17,000.00
☐o☐ndation☐☐	☐ 1,000.00
CM☐ ☐levator S☐a☐t☐	☐ 0,000.00
☐levator S☐a☐t☐ Roo☐☐	☐ 127,000.00
Repair o☐☐existing Canop☐☐	☐ 22,000.00
☐lectrical☐	☐ 22,000.00
GC General Condition☐☐	☐ 0,000.00
GC ☐ee☐☐	☐ 37,000.00

**Total Estimated Cost: \$499,750.00**

**Estimated Timeline:**

Planning Appro☐al☐	12 ☐ ee☐☐
De☐ign / ☐ngineering☐	☐☐ ee☐☐ (Conc☐rrent ☐it☐ Planning☐)

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Cris Ruebush, AIA | Derron S. Vincik, PE | Jeffrey A. Weiner, AIA

Permitting	1 week
Inspector Lead Time	3 weeks
Construction of Inspector Staff	1 week
Inspector Installation	1 week
Final Inspection	3 weeks

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**Total Duration from Start: 51 Weeks**

Please feel free to contact me directly if you have any questions.

Thank you



Benjamin Girardin AIA CARL D AP  
Principal Architect