

TEST PRACTICE GREENHEALTH - HEALTHCARE FACILITY WITH BEDS BUT NO ORS — no.1678818

## Partner for Change (Beds) - 2016: Green Building

## Introduction

<u>1.</u>

The built environment plays an important in role in both the promotion of healing in patients and the health of building occupants. Facilities understand that a high performance healing environment can make a substantive difference in their ability to provide high quality care as well as their ability to attract and retain outstanding employees. Please highlight your facility's accomplishments and strategies relative to Green Design, Renovation & Construction.

## **Green Design and Construction**

Has the facility designed and built any projects	in the last five (5) years?	
• Yes	in the last live (3) years:	
○ No		
Please highlight green elements in building proje	ects in Table A below.	
1.a If your building is not complete, please	briefly describe your project in the space provided but do not fill out Table A.	
Table A. Green Building Projects		
Project Name:	<u>1.b</u>	
Type of Project:	<u>1.c</u>	
	Select an option	▼
Year Completed:	1.d	
Square Feet:	<u>1.e</u>	

Certification:	<u>1.f</u>
	Select an option
Brief Project Story:	1.g
Project Name:	1.h
Type of Project:	1.i
	Select an option
Year Completed:	1.i
Square Feet:	1.k
Certification:	1.1
	Select an option
Brief Project Story:	1.m
Project Name:	<u>1.n</u>
Type of Project:	1.0
	Select an option
Year Completed:	<u>1.p</u>
Square Feet:	1.q
Certification:	1.r
	Select an option
Brief Project Story:	<u>1.s</u>

<sup>\*\*</sup>Unfortunately PGH can only give credit for **completed projects**.

<sup>&</sup>lt;u>2.</u> If the facility has completed more than three LEED projects in the last 5 years, please attach a file describing additional projects here.

## Infrastructure for Green Design & Construction

Yes	
<u>3.a</u>	Please explain which sustainable elements have been incorporated:
3.b	Please attach documentation for green attributes in Master Specifications:
3.c	What year were sustainable elements added?
	other green building) design standard?
(or and Yes	other green building) design standard?
(or and	other green building) design standard?
(or and Person of Yes On No A.a A.b	Please indicate which design standard:  Please attach policy or commitment language.  Please attach policy or commitment language.  Organization required to build to a certain minimum LEED standard (certifiable) due to municipal, state, region or federal legislative ements?

6. Does the organization require its designers, builders and contractors to have experience with LEED or other green building rating systems?

<u>7.</u>	Has the organization added language to contract specifications that building contractors will follow LEED or GGHC requirements and provide documentation?			
	Yes			
	<u>7.a</u>	Please explain:		
Inno	vative C	Green Building Elements		
<u>8.</u>		e facility installed a green or living roof or wall?		
	<ul><li> Yes</li><li> No</li></ul>			
	8.a	Please indicate square footage of green roof or wall space:		
<u>9.</u>	Has the	e facility created a <b>healing garden</b> for patients, visitors or staff?		
	© Yes ○ No			
	<u>9.a</u>	Please indicate square footage of garden space:		
	<u>9.b</u>	Please attach description and a drawing, schematic or image.		
<u>10.</u>	Does th	ne organization have a <b>food-producing garden</b> onsite?		
	<ul><li>Yes</li><li>No</li></ul>			
	<u>10.a</u>	Please indicate square footage of garden space:		
	10.b	Please attach description and a drawing, schematic or image.		

Yes

Table B. Avoiding Chem	nicals of Concern		
Product Category	Chemicals Avoided	Included in Specifications?	Other Details
<u>11.a</u>	11.b	11.c	<u>11.d</u>
Select an option		Select an option	<u>•</u>
NONE	NONE	NONE	
	NONE		NONE
11.e	11.f	11.g	<u>11.h</u>
Select an option	<u> </u>	Select an option	▼
NONE		NONE	
	NONE		NONE
	<u>11.j</u>	11.k	<u>11.l</u>
Select an option	¥		<b>•</b>
NONE		NONE	
	NONE		NONE
11.m	<u>11.n</u>	<u>11.0</u>	11.p
Select an option	•	Select an option	•
NONE		NONE	
	NONE		NONE
11.q	11.r	<u>11.s</u>	11.t
Select an option	<u> </u>	Select an option	▼
NONE		NONE	
	NONE		NONE

13. Has the facility installed energy systems that exceed ANSI/ASHRAE/IESNA Standard 90.1-2013?

○ No	
13.a	Please indicate the percentage improvement range in the proposed building performance rating when compared with the baseline building performance rating per Appendix G of ANSI/ASHRAE/IESNA Standard 90.1-2013 or LEED for Healthcare EA Credit 12: Optimize Energy Performance.  C <10% C 10-25% C >25%
13.b	Please provide documentation.
Has the  Yes  No	facility installed water saving measures that will substantially reduce potable water use or reuse non-potable water?
<u>14.a</u>	Please describe:
Has the	facility integrated design elements that will reduce or reuse process water?
<u>15.a</u>	Please describe:
Has the	facility instituted other innovative green design and construction elements?
<u>16.a</u>	Example 1:
401	Evenuelo ()
<u>16.b</u>	Example 2:
	Has the Factor No  13.a  Has the Factor No  14.a  Has the Factor No  15.a  Has the Factor No

Yes

	<u>16.c</u>	Example 3:			
	<u>16.d</u>	Example 4:			
	<u>16.e</u>	Example 5:			
Cons	tructio	n & Demolition Debris			
<u>17.</u>	Does th	e facility recycle Constructi	on & Demolition debris (C&D)?		
	© Yes				
	○ No				
	Please	enter your Construction and	Demolition Debris data in the	Table C below (Please do <b>NOT</b> inclu	ude in Appendix A).
	Table C	C. Construction & Demolit	ion Debris		
	Constru	uction & Demolition Debris	TONS per Year Current	Annual Costs Current	% of Total Tonnage
	Dispos	ed as Solid Waste			0
	Recycle	ed (segregated on site or			
	offsite)				0
	Total		0	0	100%
	<u>17.i</u>	According to the data in Ta	able C. has the organization acl	hieved a minimum of 80% recycling	g rate for C&D waste from renovations and
		new construction?			•
		Yes			
		○ No			
Othe	r Green	<b>Building Successes</b>			
				program or projects at your facility	in the space provided below. Please feel
		e any other successes or ir commentary and/or attach		program or projects at your facility	in the space provided below. Please feel

<u>18.</u>	Success 1: Please describe
<u>19.</u>	Please attach any additional documentation (optional):
<u>20.</u>	Success 2: Please describe
<u>21.</u>	Please attach any additional documentation (optional):
<u>22.</u>	Success 3: Please describe
<u>23.</u>	Please attach any additional documentation (optional):