



**UTILITY  
SYSTEMS  
MANAGEMENT**

## Utility Systems Management

This standard is numbered EC.1.7 in the *CAMAC*, *CAMH*, *CAMLTC* and *CAMBHC*. Revisions become effective January 1, 2001. **New language is underlined.**

### Standard EC.1.7

**A management plan addresses utility systems.**

#### Intent of EC.1.7

A management plan describes how the organization will establish and maintain a utility systems management program to

- a. a. promote a safe, controlled, comfortable environment of care;
- b. b. reduce the potential for organizational-acquired illness;
- c. c. assess and minimize risks of utility failures; and
- d. d. ensure operational reliability of utility systems.

The plan provides processes for

- e. e. establishing criteria for identifying, evaluating, and taking inventory of critical operating components of systems to be included in the utility management program. These criteria address the impact of utility systems on
  - 1. 1. life support systems,
  - 2. 2. infection control systems,
  - 3. 3. environmental support systems,
  - 4. 4. equipment-support systems, and
  - 5. 5. communication systems.

**Note:** *All utility systems, rather than a limited selection of elements based on risk criteria, may be included in the management program.*

- f. f. inspecting, testing, and maintaining critical operating components.
- g. g. inspecting, testing, and maintaining critical components of piped medical gas system including master signal panels, area alarms, automatic pressure switches, shutoff valves, flexible connectors, and outlets.
- h. h. testing piped medical gas systems when the systems are installed, modified, or repaired including cross-connection testing, piping purity testing, and pressure testing.
- i. i. managing pathogenic biological agents in cooling towers, domestic hot water, and other aerosolizing water systems.

- j. j. installing and maintaining appropriate pressure relationships, air exchange rates, and filtration efficiencies for ventilation systems serving areas specially designed [see Note 1] to control air borne contaminants (such as biological agents, gases, fumes, and dust).
- k. k. developing and maintaining current utility system operational plans to help ensure reliability, minimize risks, and reduce failures.
- l. l. mapping the distribution of utility systems and labeling controls for a partial or complete emergency shutdown.

**Notes:**

- 1. 1. areas specially designed includes spaces such as operating rooms, special procedure rooms, delivery rooms, rooms for patients diagnosed or suspected of having airborne communicable diseases (e.g., pulmonary or laryngeal tuberculosis), rooms for patients in "protective isolation" (e.g., those receiving bone marrow transplants), laboratories, and sterile supply rooms.