
TECHNICAL HANDBOOK FOR ENVIRONMENTAL HEALTH AND ENGINEERING
VOLUME II - HEALTH CARE FACILITIES PLANNING
PART 13 - PLANNING DOCUMENTS AND REPORTS

Chapter 13-6 PROGRAM JUSTIFICATION DOCUMENT FOR STAFF QUARTERS (PJDQ)

This chapter contains the prototype Program Justification Document for Staff Quarters (PJDQ). The prototype is a generic "fill-in-the-blank" model that prompts for minimum essential information. The Indian Health Service (IHS) Area Office is expected to use this prototype PJDQ as a guide and supplement with additional information as required for clarity. All PJDQs are approved at the IHS Headquarters by the Director, Division of Facilities and Environmental Engineering, Office of Public Health, unless authority for approval is delegated otherwise.

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PROGRAM JUSTIFICATION DOCUMENT
for
STAFF QUARTERS
INDIAN HEALTH SERVICE
[Name of Health Care Facility]
[Location], [State]
(Project No. **[Number assigned by IHS HQ]**)

[Month] [Year]

[Name of Area] AREA INDIAN HEALTH SERVICE
INDIAN HEALTH SERVICE
PUBLIC HEALTH SERVICE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

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PROGRAM JUSTIFICATION DOCUMENT
for
STAFF QUARTERS
INDIAN HEALTH SERVICE
[Name of Health Care Facility]
[Location], [State]

RECOMMEND APPROVAL:

[Name]
[Assistant Surgeon General (If applicable)]
Director
[Name of Area] Area Indian Health Service
Indian Health Service

Date

APPROVE:

[Name]
[Assistant Surgeon General (If applicable)]
Director
Division of Facilities and Environmental Engineering
Office of Public Health
Indian Health Service

Date

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Program Justification Document
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LIST OF ABBREVIATIONS

ADA	Americans with Disabilities Act	IHS	Indian Health Service
		km	kilometers
AI/AN	American Indian & Alaskan Native	LP	local private sector housing
BIA	Bureau of Indian Affairs	m	meters
BR	bedroom	m ²	square meters
CEO	Chief Executive Officer	NP	non-local private sector housing
ES	Engineering Services (-Dallas or -Seattle)	OMB	Office of Management and Budget
FY	fiscal year	PJD	Program Justification Document
GQ	Government quarters	PJDQ	Program Justification Document for Quarters
GQ-M	Government quarters - modular	POR	Program of Requirements
GQ-P	Government quarters - permanent	PORQ	Program of Requirements for Quarters
GQ-T	Government quarters - house trailer	PTP	private trailer pad
GSM	gross square meters	QCPS	Quarters Construction Priority System
GTP	Government trailer pad	SSER	Site Selection and Evaluation Report
ha	hectares	SU	Service Unit
HC	handicapped accessible	SUD	Service Unit Director
HFCPS	Health Facilities Construction Priority System	UFAS	Uniform Federal Accessibility Standards
HFPM	Health Facilities Planning Manual		
HVSR	Housing Verification Survey Report		

(NOTE TO PROGRAMMER: Add and delete abbreviations as appropriate to specific document.)

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Program Justification Document
for
Staff Quarters
Indian Health Service
[Name of Health Care Facility]
[Location], [State]

I. INTRODUCTION

This Program Justification Document for Staff Quarters (PJDQ) presents data and reasoning to justify **(NOTE TO PROGRAMMER: As applicable, modify wording to reflect what is being done.)** the replacement of **[number(quantity)]** rental house trailers, the providing of **[number(quantity)]** additional rental units, the replacement of **[number(quantity)]** transient house trailers, and the providing of **[number(quantity)]** additional transient units for quarters at the Indian Health Service (IHS) **[health care facility name]** in **[location of health care facility]**. Title 5, U.S. Code 5911, authorizes Government agencies to provide quarters units and related facilities for use by their employees and authorized transients. Current IHS policy requires, as projects are processed in the Quarters Construction Priority System, all existing house trailers to be replaced. The IHS will provide quarters units at **[describe location in relation to health care facility and location of the health care facility]**. This project will ensure the availability of safe, suitable housing for personnel essential to the continuity of the health care delivery system. This PJDQ authorizes the real property inventory for housing to be decreased by **[]** gross square meters (GSM) for the **[number(quantity)]** house trailers designated for disposal, then, increased by **[]** GSM, for a net change from **[]** GSM to **[]** GSM for staff housing at this health care facility. **(NOTE TO PROGRAMMER: As applicable, modify wording to reflect what is being done.)** The IHS land area needs for housing is estimated to be **[]** hectares (ha).

(NOTE TO PROGRAMMER: This paragraph is to be modified, as applicable, to reflect what is being done; i.e., the renovation of existing or disposal of existing housing that will not be continued for use. In some cases, the exact description of how authorized quarters will be provided will not be determined until the Program of Requirements for Quarters (PORQ) is issued.)

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II. GENERAL

(NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the Program Justification Document (PJD) for a health care facility, omit the contents of this section in the Tab H PJDQ and state that the information provided in the PJD, Section II, "General" applies, if such section is included in the PJD.)

The IHS is the component of the Department of Health and Human Services responsible for the administration of the principal Federal health care programs for American Indian and Alaska Native (AI/AN) people. The IHS provides a unique health delivery system which is comprehensive for approximately one million AI/AN people, living on or near Federal Indian reservations or in traditional Indian country, such as in the states of Oklahoma and Alaska.

The organization and delivery of health care by the IHS has its basis in treaties and laws enacted by the Congress of the United States of America and judicial rulings. The Snyder Act of 1921 is the authorizing authority for the IHS and links the IHS services to congressional appropriations which provide for the use of "...such monies as the Congress may from time to time appropriate, for the benefit, care and assistance of Indians..." The Congress has authorized services primarily for members of Federally recognized tribes who live on or near reservations, or in traditional Indian country.

The goal of the IHS is to elevate the health of AI/AN people to the highest possible level. Its mission is threefold: (1) to provide and/or assure the availability of high quality comprehensive and accessible health care services; (2) to provide increasing opportunities for Indians to manage and operate their own health programs; and (3) to serve as an advocate for Indian people.

III. DESCRIPTION OF SERVICE UNIT AND SERVICE AREA

(NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the PJD for a health care facility, and the content of the below subsections are not different, omit the contents of the below subsections in the Tab H PJDQ and state: [The contents of Subsections A through I (revise accordingly) in this section are omitted from this PJDQ since the information is provided in the respective subsections of Section III, "Description of Service Area" of the basic PJD.]

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A. Location: The [name] Reservation is located in [describe part of State in which located and relationship to the IHS Area office]. Under the control of IHS [name] Service Unit, the [name of health care facility] is located in the community of [name], which is located [number] kilometers (km) [compass direction] of the headquarters office of the [name of IHS Area office] Area IHS in [location]. The [name] Service Unit covers approximately [size] square kilometers and is located in the [location/direction] part of [name of state]. The [name] Service Unit is subdivided into [number] primary service areas, the [name] Service Area and the [name] Service Area. (NOTE TO PROGRAMMER: Modify wording as required to reflect the number of service areas.) The [name] Service Area is located in the county/counties of [name(s)], and includes the communities of [list names of included communities], with health care services being provided from a [type of health care facility] in [name of location]. See Tab A for maps showing the location of the reservation, service unit and service area.

(NOTE TO PROGRAMMER: Maps are to note clearly, at a minimum, the locations of all IHS health care facilities with the area being shown.)

(NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the PJD for a health care facility, and the content of this subsection is not different, omit the contents of the subsection in the Tab H PJDQ and state: [See PJD Subsection III.A."Location."].

B. Access: (NOTE TO PROGRAMMER: Describe Service Area in terms of isolation, type, size, condition, and general maintenance of roads. Include the type and frequency of restricted driving conditions or road closures due to weather, etc. Describe the availability of public transportation.)

(NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the PJD for a health care facility, and the content of this subsection is not different, omit the contents of the subsection in the Tab H PJDQ and state: [See PJD Subsection III.B."Access."].

C. Demographics: The [name] Service Unit serves an estimated fiscal year (FY) [date] population of [number]. The population density of the reservation is [number] persons per square kilometer. (NOTE TO PROGRAMMER: Discuss population trends of the reservation in terms of ages, births, and deaths in relation to the population of non-Indians in the

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surrounding community, state, and nationally. Also discuss Indian population concentrations and their distances from the health facility.)

The major cities within driving distance of the [name] Reservation are (NOTE TO PROGRAMMER: Give the name, state, distance, direction, and population of the cities.)

(NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the PJD for a health care facility, and the content of this subsection is not different, omit the contents of the subsection in the Tab H PJDQ and state: [See PJD Subsection III.C."Demographics."].

D. Topography and Climate: The area is (NOTE TO PROGRAMMER: Describe the general features of the terrain. Give the altitude of the general location of the proposed facility.) The average high temperature in the summer is [degrees] Celsius and the average low temperature in the winter is [degrees] Celsius. The annual precipitation ranges from [number] millimeters to [number] millimeters. (NOTE TO PROGRAMMER: Describe any unusual weather conditions that are common to the area, such as winds, fog, etc.)

(NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the PJD for a health care facility, and the content of this subsection is not different, omit the contents of the subsection in the Tab H PJDQ and state: [See PJD Subsection III.D."Topography and Climate."].

E. Housing and Public Facilities: (NOTE TO PROGRAMMER: Describe the housing in the area and its availability. List the amenities available in the community, such as grocery/convenience stores, service stations, restaurants, post office, police and fire departments, churches, transportation facilities, etc. Discuss any planned future community developments.)

(NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the PJD for a health care facility, and the content of this subsection is not different, omit the contents of the subsection in the Tab H PJDQ and state: [See PJD Subsection III.E."Housing and Public Facilities."].

F. Utilities: (NOTE TO PROGRAMMER: Describe what utilities are available and who provides them. Describe to what extent the utilities, such as telephone, water and sewer, electricity, natural gas, etc., are available to all reservation households. Describe what alternative fuel services are

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available. Describe what media services are available, how many and what frequency.)

(NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the PJD for a health care facility, and the content of this subsection is not different, omit the contents of the subsection in the Tab H PJDQ and state: [See PJD Subsection III.F."Utilities."])

G. Education: (NOTE TO PROGRAMMER: Describe the school systems available on and off the reservation, including the available grade levels. Identify any new schools being planned and/or funded. Describe the level of education of the reservation population.)

(NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the PJD for a health care facility, and the content of this subsection is not different, omit the contents of the subsection in the Tab H PJDQ and state: [See PJD Subsection III.G."Education."])

H. Economy: (NOTE TO PROGRAMMER: Describe the economy of the service area, identifying the principal sources of income for the population. Give the level of unemployment for the population. List any significant natural resources, such as timber, minerals, etc.)

(NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the PJD for a health care facility, and the content of this subsection is not different, omit the contents of the subsection in the Tab H PJDQ and state: [See PJD Subsection III.H."Economy."])

I. Social and Political Profile: (NOTE TO PROGRAMMER: Describe the social profile of the reservation. Give a brief history of the tribe, when it was Federally recognized, and its political structure.)

(NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the PJD for a health care facility, and the content of this subsection is not different, omit the contents of the subsection in the Tab H PJDQ and state: [See PJD Subsection III.I."Social and Political Profile."])

J. Available Health Care Services: (NOTE TO PROGRAMMER: Describe what health care services are or will be available for staff in the service area.)

(NOTE TO PROGRAMMER: For any of the above items that would apply differently for "non-local" employees at an IHS facility, who are NOT AI/AN people and

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would NOT have the same privileges or the service would not be available to "non-locals," who are NOT AI/AN people, on the reservation, so note in the descriptions that are provided for the above.)

IV. EVALUATION OF STAFF QUARTERS NEEDS

A. Overview:

With the construction of the proposed [new or replacement] IHS [type of health care facility; i.e., hospital, health center, etc.] in [location and state], Government staff quarters are needed for the non-local positions, for which housing is not available. (NOTE TO PROGRAMMER: Briefly describe why new and/or additional quarters units are required and how existing Government quarters units, including transient units, will be used to meet proposed needs.)

Table I shows the number of rental and transient quarters units that will continue to be used and the proposed new quarters units to be provided. (NOTE TO PROGRAMMER: Revise this sentence to reflect that which is being done by the project.) IHS Government quarters units are designated as either "rental" or "transient" as defined in Chapter 13 - "Quarters Management Program," Part V, Indian Health Manual.

- C Rental Quarters Units - Quarters intended for other than transient occupancy by an IHS employee or other authorized person. Persons assigned to rental quarters units are always charged for rent and utilities.
- C Transient Quarters Units - Quarters units intended for short-term occupancy of up to 90 days. Their purpose is to accommodate official visitors, guests, volunteers, short-term employees and contractors, and other transient personnel. Persons assigned to transient quarters units are charged for rent and utilities.

TABLE I - STAFF QUARTERS NEEDS

	NUMBER OF GOVERNMENT QUARTERS UNITS		
	TOTAL REQUIRED	EXISTING FOR CONTINUED USE	ADDITIONAL REQUIRED ¹
Single Family Rental			

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2 - Bedroom	[]	[]	[]
3 - Bedroom	[]	[]	[]
4 - Bedroom	[]	[]	[]
Multi-Family Rental			
1 - Bedroom	[]	[]	[]
2 - Bedroom	[]	[]	[]
3 - Bedroom	[]	[]	[]
Subtotal Rental Units	[] (Equals Item C on Table V)	[] (Equals Item D on Table V)	[] (Equals Item F on Table V)
Transient (Multi-Unit)			
1 - Bedroom	[]	[]	[]
Subtotal Transient Units	[] (Equals Item G on Table V)	[] (Equals Item H on Table V)	[] (Equals Item I on Table V)
TOTAL QUARTERS UNITS	[] (Equals Items C + G on Table V)	[] (Equals Items D + H on Table V)	[] (Equals Item J on Table V)

Note for Table I:

1. The "ADDITIONAL REQUIRED" Column reflects a deduction for local private sector housing that is projected to be available for "Non-Local" staff. **[If there are no private sector housing units available, state: In this case, there are no private sector housing units available.]**

B. Staffing Analysis: Table II summarizes the planned staffing at the [health care facility name], as of [date data collected], and the authorized filled housing pattern, as provided in Tab B [or Tab H Appendix 1], which contains a complete listing of planned staffing for the [health care facility name], and provides information about family sizes, sizes of quarters authorized, and the existing conditions. Below are the definitions of terms used in

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Table II, Tab B [or Tab H Appendix 1], and elsewhere in this document.

POSITION TITLE: The position title as used in the Program of Requirements (POR) for the health care facility.

POSITION STATUS: The position status describes the status of employment, as follows:

FILLED: A currently authorized existing position for which an employee has been hired and is working at the time the data was collected.

VACANT: A currently authorized existing position for which an employee has not been hired at the time the data was collected.

NEW: An additional position that has been authorized in addition to existing positions to support a new or improved health care delivery program at the health care facility. This position is vacant at the time the data was collected.

EMPLOYEE STATUS: The employee status identifies if the position is filled or is expected to be filled with a "NON-LOCAL" or "LOCAL" employee. The term "NON-LOCAL" refers to those IHS employees residing greater than 75 kilometers (km) by road from the health care facility at the time of acceptance of their employment. For vacant and new positions, the employee status is a realistic estimate taking into account the type of positions to be filled, the availability of qualified personnel from the local area, and past experience in recruiting and retaining personnel.

(NOTE TO PROGRAMMER: The ratio of non-local staff to total staff for the currently filled positions should provide a close approximation in determining this ratio for new and vacant positions.)

OCCUPIED HOUSING TYPE: The occupied housing type is provided only for currently filled positions at the health care facility. It indicates whether that staff member currently resides in Government quarters, in local private sector housing, or in non-local private sector housing.

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GOVERNMENT QUARTERS (GQ) - This includes existing IHS quarters units which are IHS owned or leased and located 75 road km or less from the health care facility. It also includes other Government quarters units owned or leased by other Government agencies located 75 road km or less from the health care facility, which are available to IHS for occupancy by IHS staff. This category includes **GOVERNMENT QUARTERS - PERMANENT (GQ-P)** for permanent structures, **GOVERNMENT QUARTERS - MODULAR (GQ-M)** for modular structures, and **GOVERNMENT QUARTERS - HOUSE TRAILER (GQ-T)** for house trailer structure. (NOTE TO PROGRAMMER: Modify as required to reflect actual conditions for project.)

LOCAL PRIVATE SECTOR HOUSING (LP) - This is all types of housing units, except Government quarters units, located 75 road km or less from the health care facility, which the employee owns, rents, or otherwise occupies. This category includes **GOVERNMENT TRAILER PAD (GTP)** for Government house trailer pad, and **PRIVATE TRAILER PAD (PTP)** for private house trailer pad. (NOTE TO PROGRAMMER: Modify as required to reflect actual conditions for project.)

NON-LOCAL PRIVATE SECTOR HOUSING (NP) - This is all types of housing units, except Government quarters units, located more than 75 road km from the health care facility, which the employee owns, rents, or otherwise occupies.

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TABLE II
SUMMARY OF STAFFING AND AUTHORIZED FILLED HOUSING PATTERN

POSITION STATUS	CURRENT AUTHORIZED NON-LOCAL STAFF HOUSING PROFILE					NUMBER OF EMPLOYEES		
	4-BR	3-BR	2-BR	1-BR	TOTAL	SUB-TOTAL	TOTAL	
FILLED							[]	
NON-LOCAL						[]		
GQ-P	[]	[]	[]	[]	[]			
GQ-M	[]	[]	[]	[]	[]			
GQ-T	[]	[]	[]	[]	[]			
LP	[]	[]	[]	[]	[]			
GTP	[]	[]	[]	[]	[]			
PTP	[]	[]	[]	[]	[]			
NP	[]	[]	[]	[]	[]			
LOCAL						[]		
NEW							[]	
NON-LOCAL						[]		
LOCAL						[]		
VACANT							[]	
NON-LOCAL						[]		
LOCAL						[]		
SUBTOTAL NON-LOCAL EMPLOYEES						[]		
SUBTOTAL LOCAL EMPLOYEES						[]		
TOTAL STAFF							[]	

Notes for Table II:

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(NOTE TO PROGRAMMER: As needed, provide notes to explain allocations made in the table. Point out any sharing situations. Explain any LP category items that are not true local private housing situations, such as living in housing being provided by spouse's employer, etc. Provide details for any situation that does not agree completely with the definition for the category under which it is shown in the table. For GQ, reflect only those categories that apply; i.e., do not show the GQ-P, GQ-M, or GQ-T unless they apply. Likewise, only show the GTP or PTP if they apply.)

C. Existing Government Quarters Units:

(NOTE TO PROGRAMMER: Describe the number, condition, and location of the existing Government quarters within 75 road km of the health care facility for which the staff quarters support.)

Information concerning the status of these existing Government quarters units is contained in the "Housing Verification Survey Report" (HVSR), prepared by Engineering Services (ES)- [Dallas/Seattle]. The HVSR, found in Tab C [or Tab H Appendix 2], documents the status of all IHS owned or leased quarters units located 75 road km or less from the health care facility. This same information, as appropriate, is provided also for other Government quarters units located 75 road km or less from the health care facility which are available to IHS for occupancy by IHS staff.

The ES survey team, in preparing the HVSR, verifies the condition of existing IHS Government quarters units which had been classified "poor" or "obsolete/substandard," as defined by Chapter 13 - "Quarters Management Program," Part V, of the Indian Health Manual. "Poor" is defined as needing major repairs, with substantial deferred maintenance being evident. An "obsolete/ substandard" condition is one in which the quarters unit is not fit for human habitation, with major health and safety violations being evident. The IHS "Quarters Management Program" requires that any quarters unit designated as being in a "poor" condition must be repaired and upgraded to at least "fair" condition within one year from date of such designation. Otherwise, disposal action is to be initiated. Both the internal and external quarters unit condition must be rated at least "fair" in order to be suitable for the intended occupant.

For each existing IHS Government quarters unit designated as "poor" or "obsolete/substandard," the survey team also enumerates the major

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deficiencies, provides a cost estimate to renovate and correct the major deficiencies, determines the economic feasibility of renovation versus construction of a replacement unit, and recommends the proposed disposition of units determined to be unfeasible to renovate. Factors considered in this evaluation includes the cost of renovation versus cost of a new unit, which includes the projected service life of the unit, operation and maintenance requirements, etc.

For existing permanent staff quarters units, when the documented costs of repairs exceeds 50 percent of the replacement cost for that unit, the existing permanent quarters unit has been identified as not being continued for use and is identified in this project for replacement. Current IHS policy requires, as projects are processed in the Quarters Construction Priority System, that existing house trailer units be identified as not being continued for use as staff quarters. Accordingly, this project identifies all house trailers for replacement. All structures identified as not being continued for use as staff quarters will be disposed of in accordance with established procedures.

Table III summarizes the mix of existing Government quarters units which are available for continued use by non-local IHS employees. In determining the projected supply of Government quarters units which may be reasonably expected for non-local IHS employees at a particular location, all existing IHS Government quarters units were counted that were located 75 road km or less from the health care facility. This total was reduced by the number that were classified as either "poor" or "obsolete/ substandard," were determined to be unfeasible to renovate, and were determined, in accordance with the above stated policy, as not being available for continued use. Other Government quarters units located 75 road km or less from the health care facility, which were counted only to the extent they are available to IHS for occupancy by IHS staff, are identified separately in Table III.

(NOTE TO PROGRAMMER: If there are no existing Government quarters units, use the following in lieu of that shown above:

This is a proposed new [type of health care facility] with supporting staff quarters. There are no existing Government quarters units at the site for the proposed new health care facility.

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Table III normally summarizes the mix of existing Government quarters units which are available for continued use by non-local IHS employees. In this case, there are none available. {Show the Table III with zeros for all elements.}}

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**TABLE III
EXISTING GOVERNMENT QUARTERS UNITS AVAILABLE FOR CONTINUED USE**

TYPE OF UNIT	NUMBER OF UNITS					
	THIS LOCATION		OTHER LOCATIONS		TOTAL	
	RENTAL	TRAN ¹	RENTAL	TRAN ¹	RENTAL	TRAN ¹
SINGLE FAMILY						
2 - Bedroom	[]		[]		[]	
3 - Bedroom	[]		[]		[]	
4 - Bedroom	[]		[]		[]	
MULTIPLE FAMILY						
1 - Bedroom	[]	[]	[]	[]	[]	[]
2 - Bedroom	[]		[]		[]	
3 - Bedroom	[]		[]		[]	
4 - Bedroom	[]		[]		[]	
TOTAL EXISTING GOVERNMENT QUARTERS UNITS AVAILABLE FOR CONTINUED USE	[]	[]	[]	[]	[]	[]

Notes for Table III:

1. TRAN = Transient.

(NOTE TO PROGRAMMER: If existing government quarters units are available for long term usage at installations other than at the IHS health care facility for which this document addresses, identify such in the "OTHER LOCATIONS" column in Table III.)

D. Local Private Sector Housing Market: The HVSR, prepared by Engineering Services - [Dallas or Seattle], which is contained in Tab C [or (Tab H Appendix 2)], reports a survey of the private sector housing units available for sale and rent in communities located 75 road km or less from the health care facility. The surveyed

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communities (including the community in which the health care facility is located) consist of all local "recognized" communities and other local communities where a "demonstrated preference" to reside is indicated. Population and distance (based on road km using the most efficient time route) figures are taken from the latest edition of the Rand McNally Road Atlas.

A "recognized" community is an incorporated or unincorporated city or town (located 75 road km or less from the health care facility) having a year-round population of 1,500 or more.

A "demonstrated preference" community is one with a population of less than 1,500 that is located 75 road km or less from the health care facility, and where a demonstrated preference to reside is indicated by non-local IHS staff currently residing in this community. Non-local refers to employees who resided more than 75 road km from the health care facility at the time of their employment in that facility.

It is normally assumed that 25 percent of the housing units for sale or rent from the local housing market will be suitable, available, and affordable to non-local IHS employees. Where more than one IHS facility is within 75 km of the community, the total number of private sector quarters units (i.e., the average vacancy rate determined in the housing verification survey) will be used to calculate housing available for each nearby facility. The vacancy rate is a recurring rate to which the local economy will continue to adjust and which will remain constant over time. Therefore, available vacant private sector housing is not prorated among nearby facility locations. However, if the survey team considers a 25 percent adjustment factor either too high or too low for a specific community, a more accurate factor is to be recommended and supported with justification in the HVSR.

The information in the HVSR regarding the number of housing units from the local private sector housing market which may reasonably be expected to be suitable, available, and affordable to Non-Local IHS employees is summarized in Table IV.

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TABLE IV - LOCAL PRIVATE SECTOR HOUSING MARKET ¹

COMMUNITY	AVERAGE DISTANCE FROM HEALTH CARE FACILITY (km)	POPULATION	PROJECTED PRIVATE HOUSING UNITS AVAILABLE	ADJUSTMENT FACTOR ²	HOUSING UNITS AVAILABLE FOR IHS NON-LOCAL STAFF
TOTAL HOUSING UNITS AVAILABLE FOR IHS NON-LOCAL STAFF					

Notes for Table IV:

1. Information for this table is taken from the HVSR.
2. Normally it is assumed the 25 percent of the housing units available for sale or rent from the local housing market will be suitable, available, and affordable to Non-Local IHS employees. When the HVSR survey team considers that a 25 percent adjustment factor is either too high or too low for a specific community, a more accurate factor is used with supporting justification for such being provided in the HVSR. **(NOTE TO PROGRAMMER: If no housing is available, add: No adjustment is required in this case.)**

E. Transient Quarters: There is a need for a total of [number (quantity)] transient quarters units at the new proposed [health care facility name] in [location], which would be used for short-term occupancy of up to 90 days. In many cases, the term would be for one to four weeks. The occupancy rate for these transient quarters is expected to be 90 to 95 percent throughout the year. The purpose of these quarters is to accommodate official visitors, guests, volunteers, short-term employees and contractors, and other transient personnel. Transient quarters are used to house students in the fields of medicine, nursing, pharmacy, physical therapy, optometry, and

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engineering during short term rotations at the facility. Also, these transient quarters will be used to house substitute health care providers at this site.

(NOTE TO PROGRAMMER: Revise the above as required to explain why there is a need for transient units, who will occupy the units, the frequency of anticipated use, and the history of usage of any existing transient quarters units over the past three years.)

F. Determination of New Government Quarters Required: Using information provided in Tables II, III, and IV, and Subsection E of this document, Table V provides the determination of the number of new Government quarters units required.

Item A of Table V - "The Number of Government Owned or Leased Quarters Units Currently Occupied by "Non-Local" IHS Staff" is determined from Table II by using the recorded number of filled staff having a "Non-Local" employee status and a "GQ" housing type. For locations with existing Government quarters units, it is assumed that the pattern of current Non-Local staff residency (i.e., in Government quarters units, or in local or non-local private sector housing units) will not change after the construction of additional quarters units. (NOTE TO PROGRAMMER: If conditions at a specific location do not support this assumption, provide needed justification in this section and reflect the adjusted figure in Item "A" of Table V.)

Item "B" of Table V - "Number of Quarters Units Required for "Non-Local" Staff Expected to Fill "Vacant" and "New" IHS Positions" is determined from Table II by using 90 percent of the sum of "Non-Local" staff with a "new" or "vacant" position status numbers. This process determines the number of quarters units required for unfilled positions and is based on the assumption that 10 percent of the non-local staff will prefer to build their house, choose to live more than 75 road km from the health care facility, or be married to another IHS employee and require only one quarters unit for both. (NOTE TO PROGRAMMER: If an adjustment factor different than 90 percent is warranted for a specific location, provide needed justification in this section, and reflect a revised adjustment factor in Table V, Item "B" calculations.)

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TABLE V
DETERMINATION OF NEW GOVERNMENT QUARTERS UNITS REQUIRED

Number of Government Owned or Leased Quarters Units Currently Occupied by "Non-Local" IHS Staff (From Table II, as noted.)	(A)	[]
Number of Quarters Units Required for "Non-Local" Staff Expected to Fill "Vacant" and "New" IHS Positions (From Table II)(Vacant)[] + (New)[] = [] x 0.9 =	(B)	[]
Total Quarters Units Required for "Non-Local" Staff (A) + (B) =	(C)	[]
Number of Existing Government "Rental" Quarters Units Available for Continued Use (From Table III)	(D)	[]
Number of Local Private Sector Housing Units that are Suitable and Available for IHS Non-Local Staff (From Table IV)	(E)	[]
Additional Government "Rental" Quarters Units Required (C) - (D) - (E) =	(F)	[]
Total "Transient" Quarters Units Required (From Section "E")	(G)	[]
Number of Existing Government "Transient" Quarters Units Available for Continued Use (From Table III)	(H)	[]
Additional Government "Transient" Quarters Units Required (G) - (H) =	(I)	[]
Total New Government Quarters Units Required (F) + (I) =	(J)	[]

G. Housing Pattern:

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(NOTE TO PROGRAMMER: For a health care facility that has existing staff housing, use the following.)

For the existing staff at [health care facility name], Tab B [or Tab H Appendix 1] includes the sizes of families and numbers of bedrooms in existing rental quarters now occupied, in addition to the number of bedrooms authorized for each family size, as specified in the Office of Management and Budget (OMB) Circular No. A-45, as implemented by the assignment criteria provided in Chapter 13 - "Quarters Management Program" of the Indian Health Manual. Table II summarizes from Tab B [or Tab H Appendix 1] the current authorized "Non-Local" staff housing profile. Table VI reflects an analysis of the reported existing pattern of family sizes in comparison with the current projected probable pattern of family size for quarters at this health care facility. To assist with the projection process, the existing mixtures of nearby IHS health care facilities are analyzed in Table VI(A). This projection considers the existing pattern of family size, the agency experience, changes in staffing patterns, and national trends in family size, as related to that which is authorized by OMB.

Table VI - HOUSING PATTERN ANALYSIS

SIZE OF UNIT BY NO. OF BEDROOMS	QUARTERS UNITS					
	ACTUAL CURRENT MIX		ADJUSTED ACTUAL MIX BASED ON OMB AUTHORIZED NUMBER OF BEDROOMS / FAMILY SIZE		PROPOSED MIX	
	NUMBER	PERCENT	NUMBER	PERCENT	PERCENT	NUMBER
1						
2						
3						
4						
TOTALS						

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**Table VI(A) - HOUSING PATTERN ANALYSIS (FAMILY SIZES)
 for
 OTHER NEARBY IHS FACILITIES**

LOCATION	PERCENTAGE OF NON-LOCAL STAFF BY FAMILY SIZE					
	FAMILY SIZE (NUMBER OF PERSONS IN FAMILY)					
	1	2	3	4	5	6
[NAME 1ST LOCATION]						
[NAME 2ND LOCATION]						
[NAME 3RD LOCATION]						
[NAME 4TH LOCATION]						
Auth. No. Bedrooms						

[OR]

(NOTE TO PROGRAMMER: For a new health care facility that has no existing staff housing, use the following.)

Since the proposed [health care facility name] is new, there are no existing staff for which data can be shown in Tab B [or **Tab H Appendix 1**] about the sizes of families and numbers of bedrooms, nor any information about the number of bedrooms authorized for each family size, as specified in the Office of Management and Budget (OMB) Circular No. A-45, as implemented by the assignment criteria provided in Chapter 13 - "Quarters Management Program" of the Indian Health Manual. Accordingly, Table II does not include a summary from Tab B [or **Tab H Appendix 1**] of the current authorized "Non-Local" staff housing profile. In order to be able to develop a probable pattern of family size, and, in turn, the number of bedrooms mixture, the existing mixtures of nearby health care facilities are analyzed in Table VI(A). This analysis considers the existing pattern of family size at the other facilities, the agency experience, changes in staffing patterns, and national trends in family size, as related to that which is authorized by OMB, in order to develop the proposed mixture reflected in Table VI(B).

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**Table VI(A) - HOUSING PATTERN ANALYSIS (FAMILY SIZES)
 for
 OTHER NEARBY IHS FACILITIES**

LOCATION	PERCENTAGE OF NON-LOCAL STAFF BY FAMILY SIZE					
	FAMILY SIZE (NUMBER OF PERSONS IN FAMILY)					
	1	2	3	4	5	6
[NAME 1ST LOCATION]						
[NAME 2ND LOCATION]						
[NAME 3RD LOCATION]						
[NAME 4TH LOCATION]						
Auth. No. Bedrooms						

**Table VI(B)
 HOUSING PATTERN ANALYSIS (PROPOSED MIX)**

SIZE OF UNIT BY NO. OF BEDROOMS	PROPOSED MIX OF QUARTERS UNITS	
	PERCENT	NUMBER
1		
2		
3		
4		
TOTAL		

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V. QUARTERS SUMMARY DATA

A. Proposed Site:

(NOTE TO PROGRAMMER: If this PJDQ is not associated with a project for a new health care facility and is not attached as Tab H to the PJD for a health care facility, use:)

The Phase I Site Selection and Evaluation Report (SSER) for these staff quarters was completed on [Month] [Day], [Year]. The site recommended for the proposed staff quarters is [(NOTE TO PROGRAMMER: describe site, including size, location, and general topography)].

(or NOTE TO PROGRAMMER: If this PJDQ is attached as Tab H to the PJD for a health care facility, use:)

The Phase I Site Selection and Evaluation Report (SSER) for these staff quarters is included with the Phase I SSER for the health care facility, which was completed on [Month] [Day], [Year] and approved on [Month] [Day], [Year]. The site recommended for the proposed staff quarters is approximately [number] hectares (ha) of the approximately [number] ha of trust [or whatever type of land is proposed for use] land that is needed for this project, which has been set-aside by the BIA and is located in [name] County in the State of [name], at [describe location]. The final amount of land the legal description will be in the Phase II SSER, that supports the approved Program of Requirements (POR) for this project. The project location is shown on maps in the PJD Tab A. (NOTE TO PROGRAMMER: Revise the above as required to describe site, including size, location, and general topography.)

(NOTE TO PROGRAMMER: Continue with below in either case.)

The Phase II SSER will be submitted with the POR.

B. Proposed Number of Units and Space: The proposed new staff quarters will assure the availability of safe, suitable housing for eligible personnel essential to the IHS health care delivery system for the new proposed [health care facility name] in [location]. The breakdown of the number of existing quarters that can continue to be used and the proposed number of new quarters to be constructed is contained in Table I. (NOTE TO PROGRAMMER: Revise the previous sentence to reflect the actual conditions for the project.) Applying the criteria provided in OMB Circular A-45, the authorized net and gross areas for

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space authorized for the proposed new staff quarters in this project are contained in Table VII.

TABLE VII - AUTHORIZED SPACE FOR PROPOSED NEW STAFF QUARTERS

	NO. NEW UNITS	AUTHORIZED NET UNIT AREA ¹ (m ²)	TOTAL NET AREA (m ²)	NET TO GROSS FACTOR	TOTAL GROSS AREA ² (m ²)	TOTAL GROSS UNHEATED SPACE ³ (m ²)
Single Family						
2 Bedroom	[]	93(102)	[]	1.25	[]	[] ⁴
2 Bedroom (HC) ⁵	[]	102(112)	[]	1.25	[]	[] ⁴
3 Bedroom	[]	131(145)	[]	1.25	[]	[] ⁴
3 Bedroom (HC) ⁵	[]	145(160)	[]	1.25	[]	[] ⁴
4 Bedroom	[]	155(171)	[]	1.25	[]	[] ⁴
4 Bedroom (HC) ⁵	[]	171(188)	[]	1.25	[]	[] ⁴
Multi-Family (NOTE TO PROGRAMER: For the below types, provide entries for each different type; i.e., quadplex, triplex or duplex.)						
1 Bedroom	[]	75(83)	[]	1.25	[]	[] ⁶
2 Bedroom	[]	93(102)	[]	1.25	[]	[] ⁴
3 Bedroom	[]	131(145)	[]	1.25	[]	[] ⁴
Transient (Multi-Unit)						
1 Bedroom	[]	51(56)	[]	1.25	[]	[] ⁷
1 Bedroom (HC) ⁵	[]	56(62)	[]	1.25	[]	[] ⁷
TOTAL STAFF QUARTERS	[]		[]		[]	[]

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Notes for Table VII:

1. **[NOTE FOR PROGRAMMER: (For normal location use:** The Authorized Net Unit Areas shown are for a normal location, based on OMB Circular A-45, Revised October 20, 1993.) **or (For remote location use:** The Authorized Net Unit Areas shown are for a remote location, as officially designated by IHS Headquarters, following guidance provided by OMB Circular A-45. The quarters units are to be designed to these authorized net floor areas.)]
2. The Total Gross Area is for heated spaces and does not include the unheated outside storage room and the car storage area (carport or garage).
3. Unheated spaces consist of outside storage and a car storage area (carport or garage).
4. The authorized unheated unit space for this type of quarters unit consists of a three gross m² outside storage area and a 50 gross m² two car garage.
5. Handicapped accessible designated units. To comply with handicapped accessibility standards, the net unit areas for five percent of the new quarters have been increased by 10 percent.
6. The authorized unheated unit space for this type of quarters unit consists of a three gross m² outside storage area and a 25 gross m² one car garage.
7. The authorized unheated unit space for this type of quarters unit consists of a 25 gross m² one car carport.

(NOTE FOR PROGRAMMER: For Table VII, above, in the Column identified as "Authorized Net Unit Area," are shown, for ready reference and use, the normal authorized net unit areas, with the authorized net unit areas for remote locations being shown in parentheses (). Remote areas are to be used only when so designated by IHS Headquarters. Only show either normal or remote numbers in this column, as applicable.)

C. Special Space: (NOTE TO PROGRAMMER: List and justify any special space, such as arctic entries, additional storage, recreation areas, etc.)

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D. Project Schedule: The estimated time schedule for the proposed quarters project, based on the IHS Budget Cost Estimating System, is as follows:

Design	[Number of months]
Contract Bidding	[Number of months]
Construction	[Number of months]

E. Cost Estimate: The following cost estimate for the proposed quarters project is based on the above schedule and the IHS Budget Cost Estimating System:

Design	\$(Amount)
Construction	[Amount]
Equipment	[Amount]
TOTAL	\$(Amount)

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TAB A

AREA, SERVICE UNIT, AND SITE MAPS

(NOTE TO PROGRAMMER: Provide map(s) showing location of new quarters units in relation to the health care facility, existing quarters units, local communities (75 road km or less), and any other features which will assist the reader in understanding this document.)

(NOTE TO PROGRAMMER: If this document is attached as Tab H to a PJD for a health care facility, omit this tab.)

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**TAB B [or TAB H APPENDIX 1]
STAFFING ROSTER AND HOUSING PATTERN**

This tab [or **Tab H Appendix 1**] provides a complete listing of planned staffing positions for [name of health care facility], and provides appropriate information about family sizes and sizes of quarters which are used to plan the needs for this project.

(or for a new facility where there are no existing housing units, use:)

This tab [or **Tab H Appendix 1**] provides a complete listing of planned staffing positions for the proposed IHS [type of health care facility] at [location]. Information for Columns (5), (6), (7), and (8) is not provided since there is no existing staff for this new health care facility.

(NOTE TO PROGRAMMER: The entries shown in this table are for illustration only. The actual table is to include the entire staffing roster, showing all filled, vacant and new positions.)

ITEM (1)	POSITION TITLE (2)	POSITIO N STATUS (3)	EMPLOYEE STATUS (4)	OCCUPIE D HOUSING TYPE (5)	FAMILY SIZE (6)	NON-LOCAL NO. OF BEDROOMS	
						OCPD (7)	AUTH (8)
11.0 ACUTE CARE NURSING							
1	Chief of Services	FILLED	NON-LOCAL	GQ	5	3	4
2	Gen. Medical Off.	FILLED	NON-LOCAL	GQ	2	2	1
3	Nurse Midwife	FILLED	LOCAL	LP			
4	Head Nurse	VACANT	NON-LOCAL				
5	Registered Nurse	NEW	NON-LOCAL				
6	Registered Nurse	FILLED	LOCAL	LP			
7	Secretary	VACANT	LOCAL				

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ITEM (1)	POSITION TITLE (2)	POSITIO N STATUS (3)	EMPLOYEE STATUS (4)	OCCUPIE D HOUSING TYPE (5)	FAMILY SIZE (6)	NON-LOCAL NO. OF BEDROOMS	
						OCPD (7)	AUTH (8)
21.0 LABORATORY							
8	Laboratory Tech.	FILLED	NON-LOCAL	GQ	6	4	4
9	Medical Technician	NEW	LOCAL				
10	Laboratory Worker	FILLED	LOCAL	LP			
11	Clerk Typist	FILLED	LOCAL	LP			
32.0 AMBULATORY CARE - MEDICAL CARE MODULE							
12	Prim. Care Provider	FILLED	NON-LOCAL	LP	5	4	4
13	Nurse Supervisor	FILLED	NON-LOCAL	NP	1	2	1
14	Registered Nurse	VACANT	NON-LOCAL				
15	Registered Nurse	FILLED	NON-LOCAL	LP	2	3	2
16	Nursing Assistant	FILLED	LOCAL	LP			

Total NON-LOCAL: []
Total LOCAL:[]
Facility Total: []

(NOTE TO PROGRAMMER: To assist in the review, validation and analysis processes, this table should be sorted by department in the same order as shown in the POR for the health care facility.)

(INFORMATION FOR PROGRAMMER ENTERING INFORMATION IN THIS TABLE:

Column (2): Enter position title as used in the POR for the health care facility.

Column (3): Enter either 'FILLED,' "VACANT," or "NEW," in accordance with previous definitions.

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Column (4): Enter either "NON-LOCAL" or "LOCAL," in accordance with previous definitions.

Column (5): Enter either "GQ," "LP," or "NP," in accordance with previous definitions.

Column (6): Enter total number of family members residing at the location of the health care facility.

Column (7): For NON-LOCALs only, enter the actual number of bedrooms now in housing occupied by employee.

Column (8): For NON-LOCALs only, enter number of bedrooms authorized by the assignment criteria provided by OMB and is specified in Chapter 13 - "Quarters Management Program" of the Indian Health Manual.

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**TAB C [or TAB H APPENDIX 2]
HOUSING VERIFICATION SURVEY REPORT**

(NOTE TO PROGRAMMER: Include the Housing Verification Survey Report prepared by the respective Engineering Services office (ES-Dallas or ES-Seattle.)