Department of Health Care Access and Information

2025 TITLE 24 California Administrative Code and Building Code update

October 23, 2025 1:00 P.M.

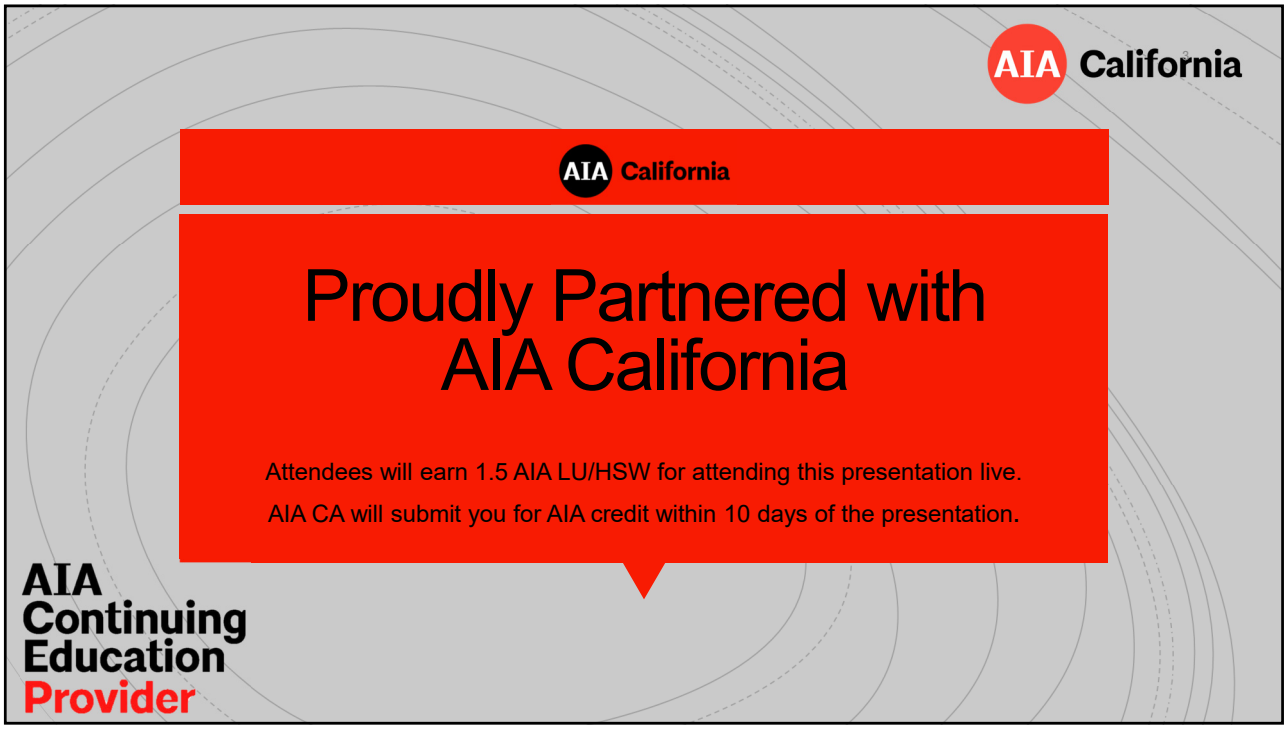
Published July 1, 2025

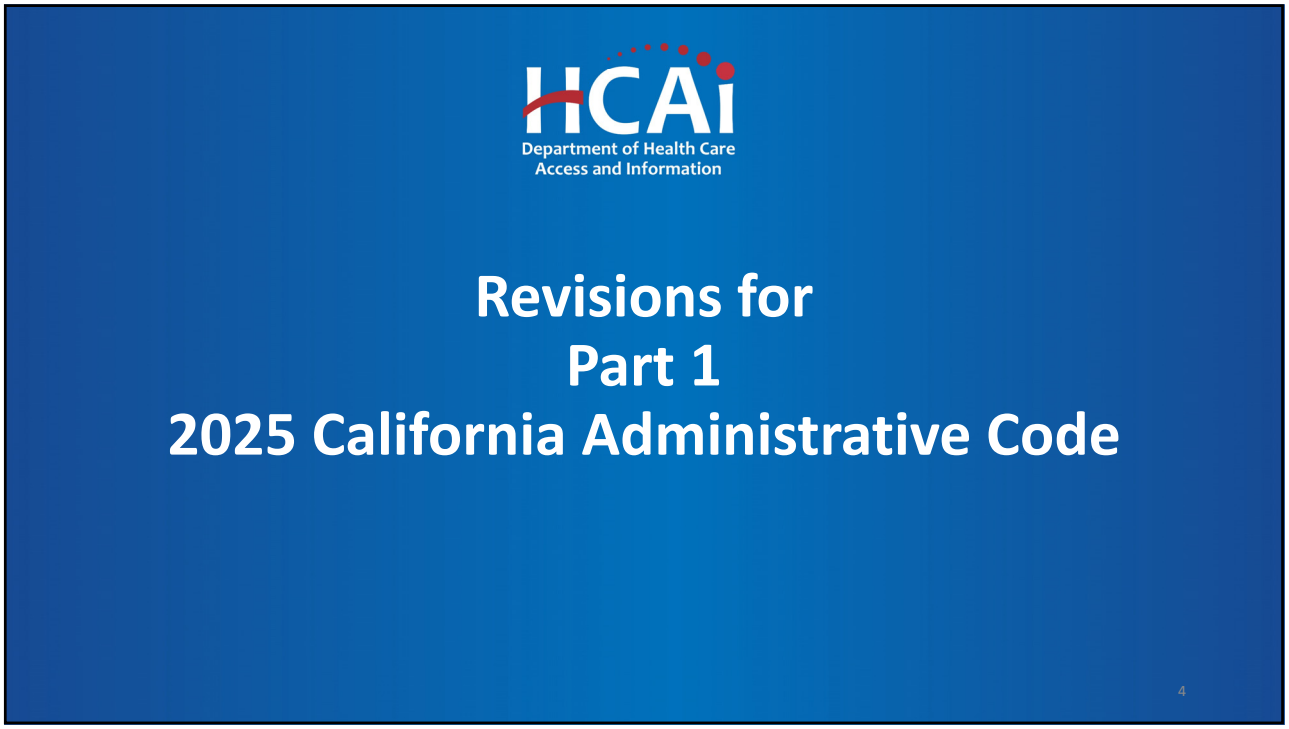
1

Presenters

Mia Marvelli, Architect, AIA
Supervisor of the Building Standards Unit
Office of Statewide Hospital Planning & Development (OSHPD)
California Department of Health Care Access & Information (HCAI)

Samantha Miller, Architect
Senior Architect
Office of Statewide Hospital Planning & Development (OSHPD)
California Department of Health Care Access & Information (HCAI)


AIA California
AIA California
Proudly Partnered with AIA California
Attendees will earn 1.5 AIA LU/HSW for attending this presentation live.
AIA CA will submit you for AIA credit within 10 days of the presentation.
AIA Continuing Education Provider


HCAi
Department of Health Care Access and Information
Revisions for
Part 1
2025 California Administrative Code
4

California Administrative Code

Chapter 6
SEISMIC EVALUATION PROCEDURES FOR HOSPITAL BUILDINGS

5

Seismic Compliance Unit Webinar Series

- Information on the HCAI OSHPD Webinar page: https://hcai.ca.gov/facilities/building-safety/resources/building-safety-construction-webinars/

- 2025 California Administrative Code, Part 1 Effective March 29, 2025 Final Express Terms available here:

Codes and Regulations – HCAI

https://www.dgs.ca.gov/-/media/Divisions/BSC/03-Rulemaking/2024-Triennial-Cycle/Commission-Meetings/2025-02-26/OSHPD-03-24-FET-PT1-SOS-Filing.docx

Seismic Compliance Unit Webinar Series

SEISMIC GRANT: Small and Rural Hospital Relief Program

February 20, 2025

- State grant funding to advance seismic resiliency improvements for small, rural and critical access hospitals.
- Facility eligibility details
- Eligible seismic projects
- Additions to the program due to Assembly Bill 869 (2024)
- Walk through of the application process

Seismic Compliance Unit Webinar Series

Continued…

Seismic compliance plan and extensions beyond the 2030 deadline

March 4, 2025 - (New regulations in the CA Administrative Code)

- Introduction to the new automated seismic compliance plan webtool for all facilities
- A recap of the 2030 Seismic Compliance Deadline
- AB 869 eligibility criteria for small, rural, critical access, district, and distressed hospital loan program recipients
- A discussion of the new Policy Intent Notice (PIN) for AB 869 implementation

California Administrative Code

Chapter 7
SAFETY STANDARDS FOR HEALTH FACILITIES

7-111. Definitions.

…

FREESTANDING ~~as applied to structures that are adjacent to a licensed hospital~~ ~~building~~ means a structure that *is separated from any adjacent structures or buildings and* meets the following criteria:

1. Structural separations ~~shall~~ comply with the applicable provisions of the *California Building Code.*
2. Fire-resistance-rated construction separations ~~shall~~ comply with the applicable provisions of the *California Building Standards Code.*
3. Buildings on the same lot ~~shall~~ comply with the height and area limitations of the *California Building Code.*

…

OFFICE means the ~~Facilities Development Division~~ Office of Statewide Hospital Planning and Development (OSHPD) within the ~~Office of Statewide Health Planning and Development~~ Department of Health Care Access and Information (HCAI).

7-113. Application for plan, report, or seismic compliance extension review.

2. Submission of documents to the Office shall be electronic and ~~may~~ shall be permitted to be in three consecutive stages:

A. Geotechnical/Geohazard Review: ~~Application for pan review and, when applicable, the site data must be attached.~~ All documents for this review shall be permitted to be submitted electronically in a format acceptable to the Office. Submittal shall include:

(1) An application for plan review,

(2) A description of the project prepared by the registered design professional (RDP) in responsible charge, when applicable, and

(3) A copy of the site data report(s).

B. Preliminary Review: Submit reports or preliminary plans and preliminary annotated specifications to the Office.

C. Final Review: The final construction documents and reports shall be submitted to the Office.

(b) Application for seismic compliance extension requires submission of OSHPD Application Form #OSH-FD-384, "Application for 2008 Extension/Delay in Compliance." The submittal ~~must~~ shall comply with the applicable requirements of Chapter 6, Article 1, Section 1.5.2 "Delay in Compliance."

7-115. Preparation of construction documents and reports.

(a) All construction documents or reports, except as provided in (c) below shall be prepared under an architect or professional engineer in responsible charge. Prior to submittal to the ~~o~~Office, the architect or professional engineer in responsible charge for a project shall sign every sheet of the drawings, and the title sheet, cover sheet or signature sheet of specifications and reports. A notation ~~may~~ shall be permitted to be provided on the drawings indicating the architect's or engineer's role in preparing and reviewing the documents.

1. Except as provided in paragraph 2 below, the architect or engineer in responsible charge of the work shall be an architect or structural engineer.
2. For the purposes of this section, a mechanical, electrical, ~~or~~ civil, or fire protection engineer ~~may~~ shall be permitted to be the engineer in responsible charge of alteration or repair projects that do not affect architectural or structural conditions, and where the professional engineer is duly qualified to perform the services in that branch of engineering. ~~work is predominantly of the kind normally performed by mechanical, electrical or civil engineers.~~
3. The architect or engineer in responsible charge ~~may~~ shall be permitted to delegate the preparation of construction documents and administration of the work of construction for designated portions of the work to other architects and/or professional engineers as provided in (b) below. Preparation of portions of the work by others shall not be construed as relieving the architect or engineer in responsible charge of his rights, duties and responsibilities under Section 129805 of the Health and Safety Code.

7-115. Preparation of construction documents and reports.

(b) Architects or engineers licensed in the appropriate branch of engineering, ~~may~~ shall be permitted to be responsible for the preparation of construction documents and administration of the work of construction as permitted by their license, and as provided below. Architects and engineers shall sign and affix their professional stamp to all construction documents or reports that are prepared under their charge. All construction documents shall be signed and stamped prior to issuance of a building permit.

1. The structural construction documents or reports shall be prepared by a structural engineer. ~~Architects may prepare construction documents and reports as permitted by their license.~~
2. A mechanical or electrical engineer ~~may~~ shall be permitted to prepare construction documents or reports for projects where the work is predominately of the kind normally prepared by mechanical or electrical engineers.
3. A civil engineer or an architect ~~may~~ shall be permitted to prepare construction documents or reports for the anchorage and bracing of nonstructural ~~equipment~~ components.
4. A fire protection engineer shall be permitted to prepare construction documents or reports for fire protection systems.

7-152. Replacement of an architect, engineer, inspector of record, approved agency, special inspector or contractor.

(a) When replacing any of the listed ~~individuals~~ firms, Inspector of Record, contractor and/or approved agency the following shall be submitted to the Office:

1. Prior to plan approval

A. Revised application(s) listing the new responsible individual(s) and/or approved agency.

2. Following …

7-153. Changes to the approved work.

(a) Changes in the work.

…

(b) Changes that do not materially alter the work. The following types of changes in the work do not materially alter the work and do not require the submission of amended construction documents to the Office:

~~1. Clarification and interpretation of plans and specifications by the responsible design professional.~~

~~Note: If calculations by the structural engineer in responsible charge, or by the delegated structural engineer, are necessary to determine structural or nonstructural adequacy, an amended construction document submittal must be made to the Office for review.~~

~~2. Construction means and methods, such as construction sequencing, coordination of the work, and methods of assembly/construction. Construction means and methods do not include work that would require Alternate Method of Compliance or an Alternate Means of Protection.~~

~~Note: Temporary construction, such as temporary exiting, temporary air handlers, temporary bulk oxygen tanks, or temporary shoring supporting an occupied building under Office jurisdiction are not considered means and methods and thus would require a separate permit or the submittal of an amended construction document to the Office for review.~~

CAN 7-153(b) Changes to the approved work.

2025 CALIFORNIA ADMINISTRATIVE CODE
Part 1, Title 24, California Code of Regulations

CAN 1-7-153(b) – (Formerly CAN 1-7-153) Non-Material Alterations (NMA)
Effective Date: 06/08/2023
Revised Date: 09/22/2025

- Non-Material Altered (NMA) Change Form – PDF Format
- Change Log – Excel Format

Codes and Regulations - HCAI
https://hcai.ca.gov/document/can-1-7-153b-non-material-alterations-05-15-2025-a/

16

7-155. Final approval of the work.

(a)The Office shall schedule a final state agency review of the work subsequent to the receipt of the responsible architect's or engineer's statement that the contract is performed or substantially performed.

(b) The final approval of the construction shall be issued by the Office when:

1. All work has been completed in accordance with the approved construction documents.
2. The required final verified compliance reports and final test and inspection reports have been filed with the Office. All remaining fees have been paid to the Office....

(c) Final approval shall be confirmed by a letter sent to the …

HCAI Department of Health Care Access and Information

Revisions for Part 2, Volume 1 2025 California Building Code

18

1.10 DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION/OFFICE OF STATEWIDE HOSPITAL PLANNING AND DEVELOPMENT

1.10.6 OSHPD 6. *Specific scope of application of the agency responsible for enforcement, enforcement agency and the specific authority to adopt and enforce such provisions of this code, unless otherwise stated.*

Application—*Chemical dependency recovery hospital ~~buildings~~ not within an acute care hospital building or an acute psychiatric facility.*

Enforcing agency— *Local building department. ~~Office of Statewide Health Planning and Development (OSHPD). The office shall also enforce the Division of the State Architect – Access Compliance regulations and the regulations of the Office of the State Fire Marshal for the above-stated facility type.~~*

….

108 Temporary Structures, Equipment and Ssytems
108.1 General.

The building official is authorized to issue a permit for temporary structures, equipment or systems. Such permits shall be limited as to time of service, but shall not be permitted for more than 180 days. The building official is authorized to grant extensions for demonstrated cause. Structures designed to comply with Section 3103.6 shall not be in service for a period of more than 1 year unless an extension of time is granted. ***[OSHPD 1, 1R, 2, 4 & 5]*** *OSHPD shall only grant one extension when cause is demonstrated.*

CAN 2-108 Temporary/ Interim Structures, Tents and Equipment Uses

CAN 2-108 – Temporary/ Interim Structures, Tents and Equipment Uses

Effective Date: 07/15/2013

Revised Date: 06/03/2024

Tents

Tents are membrane structures made of fabric and may include a canopy. A tent consists of non-permanent, non-structural walls and roof. A tent is not considered a rigid structure. The duration of the use of tents for patient care is approved by CDPH via a program flex. When the time period expires, the tents must be removed from the site. Tents cannot become permanent buildings.

Tents shall comply with CBC Section 108 Temporary Structures and Uses and CBC, Section 3103, also CFC Section 3103 and 3104.

The State Fire Marshal provides requirements for tents, awnings, or other fabric enclosures in the California Building Code (CBC), California Fire Code (CFC) and Title 19 California Code of Regulations (CCR) listed below:

Codes and Regulations - HCAI

https://hcai.ca.gov/document/can-2022-building-code-2-108-temporary-structures-and-uses/

SFM change 407 Group I-2

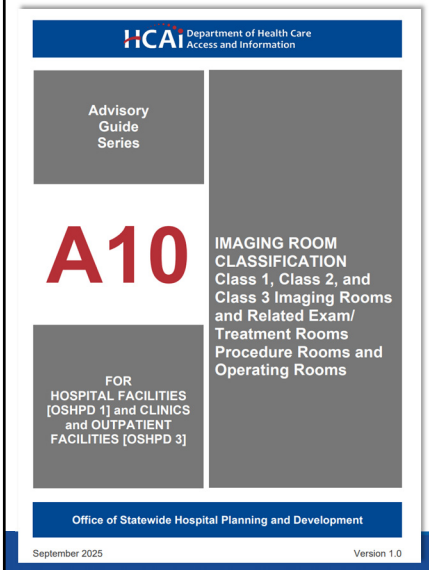
407.4.4.3 Access to corridor. Every care suite shall have a door leading directly to an exit access corridor or horizontal exit. Movement from habitable rooms within a care suite shall not require more than 100 feet (30 480 mm) of travel within the care suite to a door leading to the exit access corridor or horizontal exit. Where a care suite is required to have more than one exit access door by Section 407.4.4.6.2 or 407.4.4.7.2, the additional door shall lead directly to an exit access corridor, exit or an adjacent suite. ~~*Movement from habitable rooms shall be in accordance with Sections 407.4.4.3.1, 407.4.4.3.2 and 407.4.4.5.3.*~~

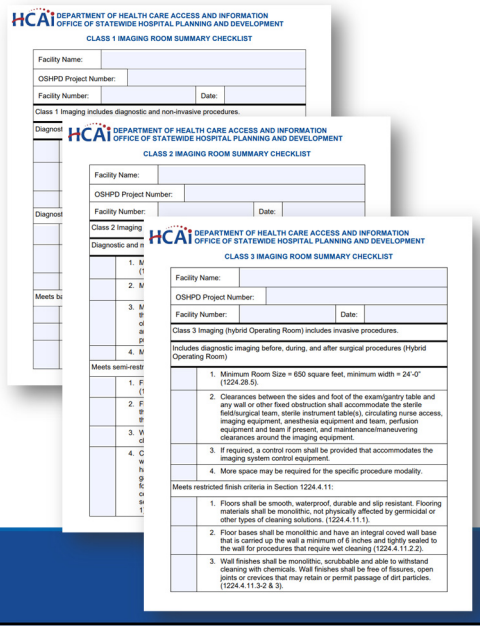
1224.3 Definitions.

***INVASIVE PROCEDURE**. A procedure that is performed in an aseptic or sterile surgical field and penetrates the protective surfaces of a patient's body (e.g. subcutaneous tissue, mucous membranes, cornea). ~~An~~ Invasive procedures ~~may~~ fall into one or more of the following categories:*

1. *Requires entry into or opening of a sterile body cavity (i.e. cranium, chest, abdomen, pelvis, joint spaces).*
2. *Involves insertion of an indwelling foreign body into a normally sterile site that results in a high risk of infection.*
3. *Includes excision and grafting of burns that cover more than 20 percent of total body area.*
4. *Does not begin as an open procedure but has a ~~recognized measurable risk~~ greater than 5 percent probability of requiring conversion to an open procedure.*

Design Advisory Guide A10: Imaging Room Classification





Training and Education - HCAI

A10 Sterile Compounding Pharmacies

1224.4 GENERAL CONSTRUCTION

TABLE 1224.4.6.1
STATION OUTLETS FOR OXYGEN, VACUUM (SUCTION) AND MEDICAL AIR SYSTEMS [1, 6]

	Locations	Oxygen	Vacuum	Medical Air	WAGD[3]	Instrument Air
…	…	…	…	…	…	…
41	Electroconvulsive therapy procedure room	1/room[7]	1/room[7]	—	—	—
42	Central Sterile – Soiled work area	=	=	=	=	1 [9, 10]
43	Central Sterile – Clean work area	=	=	=	=	— [9, 10]
44	GI - Processing room	=	— [11]	=	=	— [9, 10, 11]

8. Use of portable equipment is permitted in outpatient observation units provided under Section 1224.39.6.
9. Use of portable equipment in lieu of a piped system shall be permitted.
10. In the GI Processing room and the clean work area of the Central Sterile Supply service, an instrument air outlet or portable compressed air shall be provided as required by the equipment used. In the Soiled work area of the Central Sterile Processing service, an instrument air outlet or portable compressed air is required.
11. Vacuum or instrument air shall be provided if needed for the cleaning methods used.

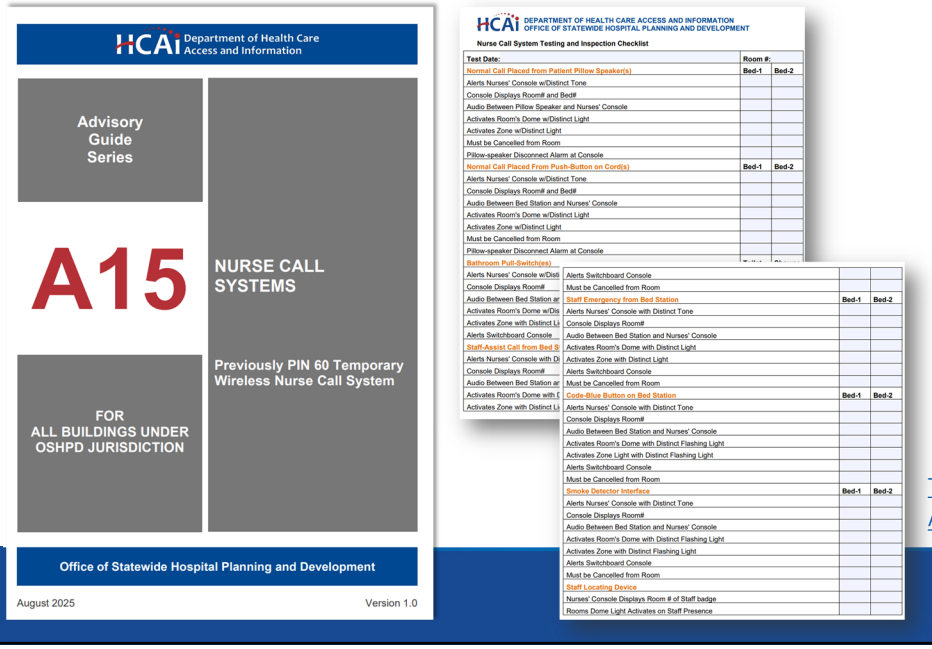
1224.4 GENERAL CONSTRUCTION

TABLE 1224.4.6.5
[OSHPD 1, 2, 3, 4 & 5] LOCATION OF NURSE CALL DEVICES
●=Required

AREAS DESIGNATION	STATION TYPE	1224	1225	1226	1227	1228
Nursing Units						
. . .						
Diagnostic and Treatment Areas						
. . .						
Emergency exam, treatment, and triage rooms	P, E	●			●	

[no changes to the footnotes]

Design Advisory Guide A15: Nurse Call Systems



Training and Education - HCAI
A15 Nurse Call Systems

1224.14 NURSING SERVICE SPACE.

1224.14.1.8 Patient storage. *Each patient room shall ~~have within his or her~~ include ~~room~~ a separate wardrobe, locker, or closet ~~suitable for hanging full-length garments and~~ for storing clothing and personal effects for each patient.*

[Related sections: 1225.5.1.2.5, 1228.14.1.8, 1229.14.1.9]

1224.16 ANESTHESIA/RECOVERY SERVICE SPACE.

1224.16.2 Preoperative patient holding area(s)…

1224.16.2.1 Space requirements. *Each station shall have a minimum clear floor area of 80 square feet (7.43 m^2) and a minimum clearance of 3 feet (914 mm) shall be provided between the sides and foot of patient lounge chairs/gurneys and adjacent walls, partitions or fixed elements. A minimum width of 6 feet (1829 mm) of access/circulation outside the curtain shall be provided.*

1224.19 PHARMACEUTICAL SERVICE SPACE

1224.19.2.3.7 Hazardous Drug (HD) storage. *Where hazardous drugs are stored outside of a HD Buffer room or HD Segregated Compounding Area, a HD storage room under negative pressure and externally ventilated per the California Mechanical Code shall be provided. Hazardous drugs must be stored in a manner that prevents spillage, breakage or falling from shelves. Hazardous drugs shall not be stored on the floor. Refrigerated hazardous drugs must be stored in a dedicated refrigerator located in the Hazardous Buffer room, Hazardous Segregated Compounding Area or Hazardous Storage room.*

…

1224.19.3.2.2.5. Pass-throughs. *If a pass-through is used, both doors shall not be capable of being open at the same time, and the doors should be interlocking.*

1224.19 PHARMACEUTICAL SERVICE SPACE

1224.19.3 Sterile Compounding areas.

…

1224.19.3.2.3 Anteroom. …

1224.19.3.2.3.3 Handwashing station. *A handwashing station, with hands-free controls and nonrefillable closed soap dispensing system, proving support for scrubbing up to the elbows, shall be located in or adjacent to the anteroom.*

…

1224.19.3.2.4 Segregated Compounding Area (SCA). …

…

1224.19.3.2.4.2 Handwashing station. *A handwashing station, with hands-free controls and nonrefillable closed soap dispensing system, proving support for scrubbing up to the elbows, shall be located in or adjacent to the SCA with a minimum clearance of 3.281 feet (1 meter) between the rim of the sink and the PEC.*

1224.19 PHARMACEUTICAL SERVICE SPACE

1224.19.3.3 Hazardous Drug (HD) sterile preparation room. *If hazardous drugs are used in compounding activities, a separate room shall be provided for preparation of hazardous admixtures in accordance with Title 16, Sections 1735 and 1751 and USP Chapters 797 and 800.*

…

1224.19.3.3.2 Hazardous ~~B~~buffer room. …

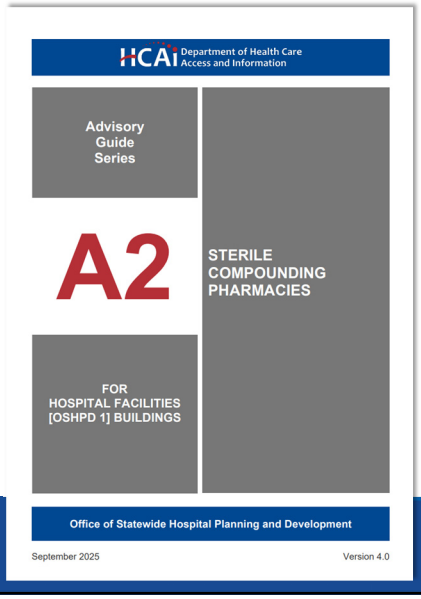
…

1224.19.3.3.2.8 Pass-throughs. *If a pass-through is used between the buffer and anteroom, both doors should not be capable of being open at the same time, and the doors should be interlocking. ~~A pass-through is not permitted between the hazardous drug buffer room and any unclassified area.~~ A refrigerator pass-through shall not be used.*

1224.19.3.3.4 Hazardous Segregated Compounding Area (SCA). …

…

Design Advisory Guide A2: Sterile Compounding Pharmacies



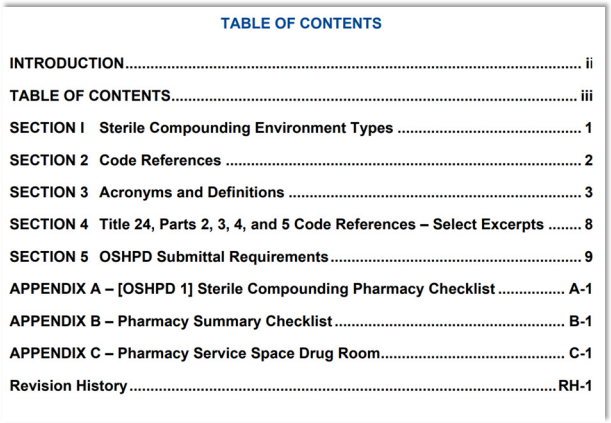


TABLE OF CONTENTS

Training and Education - HCAI

A2 Sterile Compounding Pharmacies

HCAI Department of Health Care Access and Information 33

1224.20 DIETETIC SERVICE SPACE

1224.20.2.11 Pot washing facilities. *Pot washing shall include ~~multi~~ three-compartment sinks.*

HCAI Department of Health Care Access and Information

1224.29 INTENSIVE CARE UNITS

1224.29.1.15 Support. *The following shall be provided and shall be located immediately accessible to the unit:*

1. *Visitors' waiting room.*
2. *Office space.*
3. *Staff lounge(s) and toilet room(s).*
4. *Multipurpose room(s). Provide for staff, patients and patients' families for patient conferences, reports, education, training sessions and consultation.*
5. *Housekeeping room. Provide within or immediately ~~adjacent~~ accessible to the intensive care unit. It shall not be shared with other nursing units or departments.*
6. *Gurney and wheelchair storage. Provide a minimum 15 square feet (1.39 mm) per each nursing unit.*

[Related section: 1224.29.2.9]

1224.29.2 Newborn intensive care units (NICU). *…*

1224.29.2.9 Lactation. *Space shall be provided for lactation support and consultation in or immediately ~~adjacent~~ accessible to the NICU.*

[Related section: 1224.29.1.15]

Definitions reminder

LOCATION TERMINOLOGY *(terms for relationship to an area or room)*

ADJACENT. *Located next to but not necessarily connected to the identified area or room.*

DIRECTLY ACCESSIBLE. *Connected to the identified area or room through a doorway or other opening without going through an intervening room or public space.*

IMMEDIATELY ACCESSIBLE. *Available either in the identified area or room, or directly accessible from a room or area located within the same department or service space.*

IN. *Located within the identified area or room.*

READILY ACCESSIBLE. *Located within the same department or service space as the identified area or room, located in and shared with an adjacent unit, or within 200 feet (60.96 m) of the department or service space in an accessible corridor.*

36

1224.30 PEDIATRIC AND ADOLESCENT UNIT.

A pediatric nursing unit shall be provided if the hospital has eight or more licensed pediatric beds. Pediatric patient area and adolescent patient area shall be separate from each other and shall be separate from adult nursing units. Common areas including exam and treatment room, service areas, and playrooms may be shared and used by pediatric and adolescent patients at different times. The unit shall meet the following standards:

[Related section: 1228.30]

1224.31 PSYCHIATRIC NURSING UNIT.

1224.31.1 Psychiatric unit space. *A psychiatric unit shall be housed in a separate ~~and distinct~~ nursing unit and shall provide the following:*

1224.31.1.1 General*. A psychiatric nursing unit shall meet the requirements of Section 1224.14 for a unit that provides acute medical care. ~~or 1228.14 for a~~ A non-medical psychiatric nursing unit, shall meet the requirements of Sections 1228.4, 1228.13 and 1228.14 ~~in addition to the requirements of section 1228.4~~, based on the functional program. Specific application shall respond to the patient injury and suicide prevention component of the Patient Safety Risk Assessment prepared under California Administrative Code (Part 1 of Title 24) Section 7-119. If a unit provides acute medical care, the unit shall be located in a building that is compliant with California Administrative Code Chapter 6 for OSHPD-1. …*

1224.31 PSYCHIATRIC NURSING UNIT.

1224.31.1.9 Activity spaces. ~~*Indoor and outdoor space for therapeutic activities.*~~ *Psychiatric rehabilitation activity space shall be provided in compliance with Section 1228.13.1 except as modified below:*

1224.31.1.9.1 Indoor activity rooms. *Two separate activity rooms shall be provided; one may be the recreation room required under Section 1224.31.1.11, and one shall be for quiet activities to serve as patient lounge. The patient lounge shall be a minimum 120 square feet (11.15 m^2)*

1224.31.1.9.2 Outdoor activity area. *The outdoor activity area shall be dedicated for use by the psychiatric nursing unit.*

[Related section: 1228.2]

1224.33 EMERGENCY SERVICE.

1224.33.2 Standby Emergency Medical Service. …

…

1224.33.2.7.1 Behavioral health observation area. *If provided, a patient station with a minimum clear floor area of 40 square feet (12.19 m^2) shall be provided under the visual control of an emergency service staff work area. The patient station shall have provision for visual privacy from casual observation by other patients and visitors. The dimensions and arrangement of rooms with multiple recliners, beds, or ~~/~~gurneys shall be such that there is a minimum of 3 feet (914 mm) clearance ~~at~~ on one side. ~~and any wall or any other fixed obstruction.~~ A minimum clearance of 3 feet (914 mm) shall be provided between patient stations, and a clearance of 4 feet (1219 mm) shall be available at the foot of each patient station to permit the passage of equipment and beds. A handwashing station shall be located in each room, and at least one handwashing station shall be provided for every eight patient stations, and for each major fraction thereof, in open-bay areas. These shall be uniformly distributed to provide equal access from each patient station.*

…

1224.33.4 Comprehensive emergency medical services. *…*

1224.33 EMERGENCY SERVICE.

1224.33.4.2 Fast-track area. *A fast-track area may be used for treating patients presenting simple and less serious conditions. If a fast-track area is provided, it shall meet the following requirements:*

1. Space requirements – each fast-track ~~station~~ room shall have a minimum 100 square feet (9.29 m^2) of clear floor area. ~~for each private room and~~ In open-bay fast-track areas, each station shall have a minimum 80 square feet (7.4 m^2) ~~minimum~~ of clear floor area. ~~for each station in open-bay triage areas.~~

2. Each patient care station shall include a work/documentation counter, and an examination ~~table~~ light.

3. Each fast-track room shall include a ~~A~~ handwashing station. ~~shall be located in each room, and at least~~ In open-bay fast-track areas, one handwashing station shall be provided for every four beds. ~~patient stations, and for each major fraction thereof, in open-bay areas.~~

4. Provisions for patient privacy.

5. ~~4.~~ Storage areas for supplies and medication.

6. ~~5.~~ A separate procedure room may be provided. It shall have a minimum clear floor area of 120 square feet (11.15 m^2).

…

1224.35 REHABILITATION THERAPY DEPARTMENT.

1224.35.1 Rehabilitation center space.

If provided, a rehabilitation center space shall be designed to meet the requirements of Section 1224.14, except as follows:

[1-5 no change]

6. ~~If o~~Outpatient rehabilitation services ~~are~~ shall be provided ~~,~~ ~~a~~An examination and treatment room shall be ~~,~~ adjacent or directly accessible to an office for the physician in charge of the outpatient service.

7. ~~If~~ For outpatient rehabilitation services, ~~are provided~~ ~~,~~ a patient waiting area with access to telephone, drinking fountain and men's and women's toilet room facilities shall be in or adjacent to the rehabilitation outpatient service area. Outpatients shall not traverse an inpatient nursing unit.

[8-11 no change]

12. As a minimum, physical therapy, occupational therapy and speech therapy shall be provided. The space for these individual services shall be designed to meet the requirement of Sections 1224.35.2, 1224.35.3, and 1224.35.4, respectively.

1224.42 CHEMICAL DEPENDENCY RECOVERY HOSPITAL.

Pursuant to Health and Safety Code Section 1250.3, general acute care hospitals may provide chemical dependency recovery services in a distinct part. If provided, the chemical dependency recovery hospital, unit or services shall comply with Section 1229.

[Related Sections: 1.10.6, 1224.3, 1228, 1229]

1225 SNF [OSHPD 2]

1225.1.2.6 Patient storage.

Each patient room shall include ~~be provided with~~ a separate wardrobe, ~~or~~ locker, or closet spaces for storing clothing, toilet articles ~~or~~ and other personal belongings for each patient.

Exception: *Pediatric and psychiatric patient rooms.*

[Related sections; 1224.14.1.8, 1228.14.1.8, 1229.14.1.9]

1225 SNF [OSHPD 2]

1225.6.6 SPECIAL TREATMENT PROGRAM SERVICE.

Refer to California Administrative Code (Part 1 of Title 24), Section 7-119, Functional Program, for requirements. Projects associated with Special Treatment Program Services in skilled nursing and intermediate-care facilities shall include a Patient Safety Risk Assessment. The skilled nursing facility shall have a minimum of 30 beds and shall meet the requirements of Chapter 3, Division 5, Title 22, California Code of Regulations.

1226 CLINICS [OSHPD 3]

1226.4 General construction.

1226.4.13.2.1 ~~Medicine~~ Medication preparation room or area. *When provided, the entry of the ~~medicine~~ medication preparation room or area shall be under the visual control of the staff. This may be a part of the ~~administrative center or~~ nurse station and shall include all of the following:*

1. *Work counter*
2. *Sink*
3. *Lockable refrigerator*
4. *Immediate access to handwashing station*
5. *Locked storage for biologicals and drugs*

When a ~~medicine~~ medication preparation room or area is to be used to store self-contained ~~medicine~~ medication dispensing units, the room shall be designed with adequate space to prepare ~~medicines~~ medications with the self-contained ~~medicine~~ medication-dispensing units present.

…

1226.4.14.2 Specimen and/or blood collection facilities. *When provided, refer to Section 1224.4.4.~~2~~3. Use of patient toilet room(s) shall be permitted for specimen collection.*

1226 CLINICS [OSHPD 3]

1226.8 SURGICAL CLINICS.

1226.8 SURGICAL CLINICS. *Outpatient surgical clinics, and outpatient clinical services of a hospital providing services equivalent to a surgical clinic, shall comply with Sections 1226.4.2 through 1226.4.8 and the provisions of this section.*

1226.8.1 Outpatient surgical service space.

1226.8.1.1 Operating room(s). *Refer to Section 1224.39.2, Item 1.*

1226.8.1.2 Perioperative services. *Provide preoperative patient holding and post-anesthesia recovery area. Refer to Section 1224.16.*

1226.8.1.3 Procedure room(s). *Procedure rooms are optional. When provided, they shall comply with Section 1224.4.4.1.4.*

SECTION 1228 [OSHPD 5] ACUTE PSYCHIATRIC HOSPITALS

1228.1 Scope. *The provisions of this section shall apply to acute psychiatric hospitals.*

1228.2 Application. *An acute psychiatric hospital ~~or unit~~ shall meet the requirements of Section 1228 ~~1224.14 for unit that provides acute medical care or 1228.14~~ for a non-medical unit~~, in addition to the requirements of Section 1228.4~~ based on the functional program. Specific application shall respond to the patient injury and suicide prevention component of the Patient Safety Risk Assessment prepared under California Administrative Code (Part 1 of Title 24) Section 7-119. If a psychiatric facility or unit provides acute medical care~~,~~ it shall comply with Section 1224.31. ~~the unit shall be located in a building that is compliant with California Administrative Code Chapter 6 for OSHPD 1.~~ New buildings and additions, alterations or repairs to existing buildings subject to licensure shall comply with applicable provisions of the California Electrical Code, California Mechanical Code, California Plumbing Code, California Energy Code, California Fire Code (Parts 3, 4, 5, 6 and 9 of Title 24) and this section.*

Note: *Refer to the applicable exceptions under Section 1224.2.*

SECTION 1228 [OSHPD 5] ACUTE PSYCHIATRIC HOSPITALS

1228.14.1.8 Patient storage. *Each patient room shall ~~have in their room~~ include a separate wardrobe, locker, or closet for storing clothing and personal effects for each patient. Shelves for folded garments shall be used instead of arrangements for hanging garments.*

[Related sections; 1224.14.1.8, 1225.5.1.2.5, 1229.14.1.9]

…

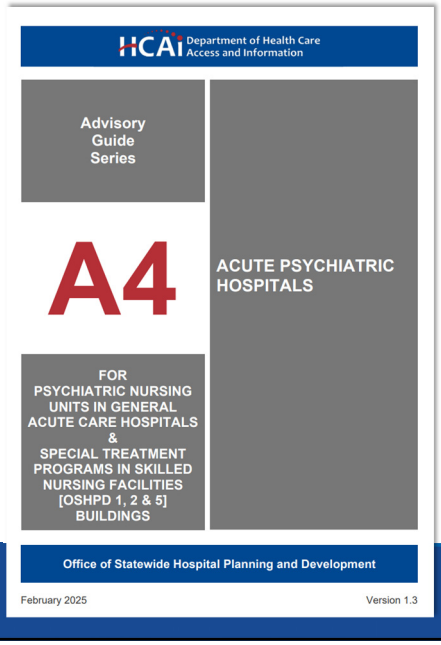
1228.30 PEDIATRIC AND ADOLESCENT PSYCHIATRIC SERVICE SPACE. *Pediatric and adolescent psychiatric service space patient areas shall be separate from each other and shall be separate ~~and distinct~~ from adult psychiatric service space patient areas. Common areas including activity areas, dining area, outdoor areas, and space for educational program may be shared and used by pediatric and adolescent patients at different times. The requirements of Section 1228.14, Psychiatric Nursing Service Space shall apply to pediatric and adolescent units as amended below:*

SECTION 1228 [OSHPD 5] ACUTE PSYCHIATRIC HOSPITALS

1228.43 RADIOLOGICAL SERVICE SPACE. *Where provided, Radiology/Imaging Service Space shall comply with the requirements of Section 1224.18, Radiological/Imaging Service Space and the general construction provisions of Section 1228.4.* [No change, just shown for context]

1228.44 CHEMICAL DEPENDENCY RECOVERY HOSPITAL. *Pursuant to Health and Safety Code Section 1250.3, acute psychiatric hospitals may provide chemical dependency recovery services in a distinct part. If provided, the chemical dependency recovery hospital, unit or services shall comply with Section 1229.*

Design Advisory Guide A4: Acute Psychiatric Hospitals



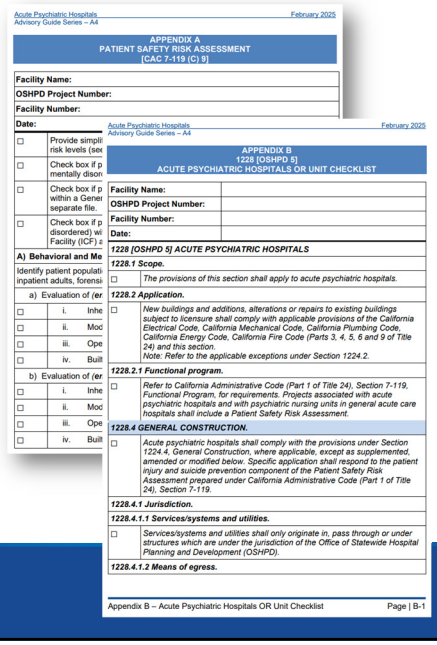


Figure 2: Sample of Keynoted Plan with Risk Level Legend

[Training and Education - HCAI]

[A4 Acute Psychiatric Hospitals]

SECTION 1229 [OSHPD 6] CHEMICAL DEPENDENCY RECOVERY HOSPITALS

1229 [OSHPD 6] CHEMICAL DEPENDENCY RECOVERY HOSPITALS

…

1229.14 Chemical dependency recovery residential areas. …

…

1229.14.1.9 Patient storage. *Each patient room shall ~~have in their room~~ include a separate wardrobe, locker, or closet for storing clothing and personal effects.*

[Related Sections; 1224.14.1.8, 1225.5.1.2.5, 1228.14.1.8]

…

1229.31 Other chemical dependency service space. *~~Where provided,~~ Any other service space(s) ~~for services which are provided for the treatment of chemical dependency,~~ not addressed in Section 1229, ~~that have prior approval of the California Department of Health Services~~ shall comply with ~~the other~~ applicable provisions in ~~s~~Sections 1224 or 1228. These services shall have prior approval from the California Department of Public Health.*

Thank you!

Send questions to - Regsunit@hcai.ca.gov