



HCAI
Department of Health Care
Access and Information

Introduction
to

2022 CALIFORNIA ADMINISTRATIVE CODE
CALIFORNIA CODE OF REGULATIONS | TITLE 24, PART 1
California Building Standards Commission

2022 CALIFORNIA BUILDING CODE
CALIFORNIA CODE OF REGULATIONS | TITLE 24, PART 2, VOLUME 1 OF 2
Based on the 2021 International Building Code®
California Building Standards Commission

2022 California Building Standards Code
as applied to
Buildings Regulated by HCAI/OSHPD

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2022 Triennial Code – HCAI CBSC Webinar Series

Session 1:

- Introduction
- Part 2V2 – Structural
- Part 3 – Electrical
- Part 4 – Mechanical
- Part 5 – Plumbing
- Part 10 – Existing Building

October 5, 2022

Session 2:

- Triennial Fire Code
- Part 2 – Building Code
 - Part 9 – Fire Code

October 27, 2022

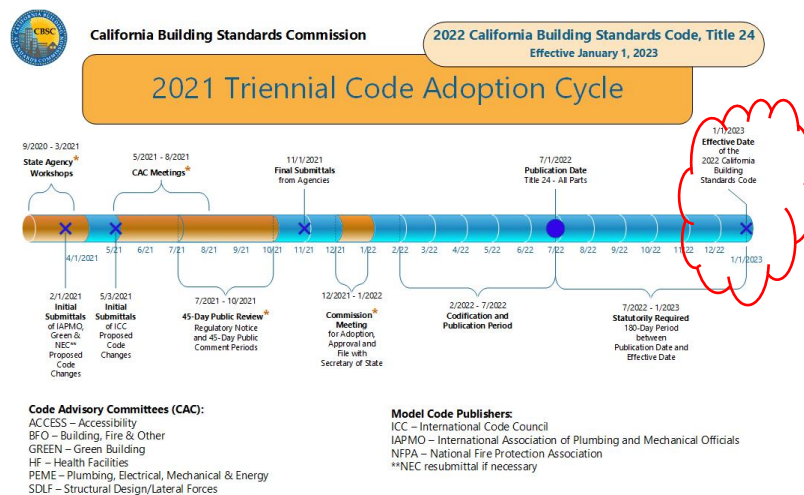
Session 3:

- Part 1 – California Administrative
- Part 2V1 – Architectural
- *Bring Your Questions*

December 1, 2022



2022 CBSC Timeline

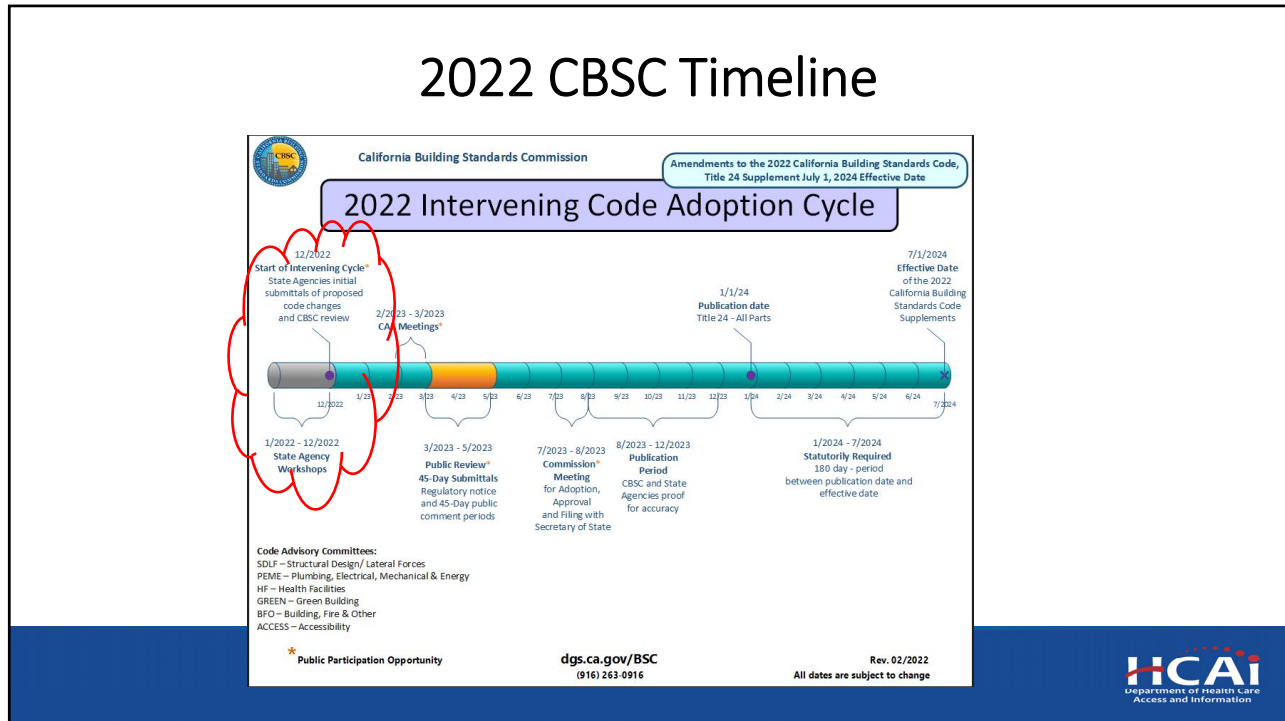


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All dates are subject to change





2022 California Building Standards Code Changes

- Part 1 – Administrative Code
- Part 2 – Volume 1 (Non-structural) Building Code
- Part 2 – Volume 2 (Structural) Building Code – Major Changes
- Part 3 – Electrical Code – Housekeeping Items and Alignment with CBC and 2020 NEC
- Part 4 – Mechanical Code – More Alignment with ASHRAE 170
- Part 5 – Plumbing Code – Housekeeping Items
- Part 10 – Existing Building Code – SPC-4D

LEGEND

Bold black text or regular black text = Existing text – no change

Underlined blue text = new text

Underlined red text = new text with emphasis

~~Strikethrough gray text~~ = text to be deleted

Purple text = references



Revisions for Part 1 2022 California Administrative Code

~~7-111 Definitions~~

~~**COLLABORATIVE REVIEW AND CONSTRUCTION (CRC)** means the process that engages the Office, at its sole discretion, utilizing Rolling Reviews for all disciplines starting at the beginning of the first scheduled submittal and continuing through construction for qualified Amended Construction Documents (ACDs). CRC provides regulatory schedule plan exchange meetings and collaborative workshops. CRC may be used for phased or non-phased projects. The Office provides an agreed upon level of review as specified in the Integrate Review Plan.~~

~~**PHASED PLAN REVIEW** is the process that, at its sole discretion, engages the Office, at its sole discretion, early in the project design and continues through the development and submission of documents during the conceptualization, criteria design, detailed design, implementation documents, office review, construction and closeout phases and final plan approval. Within each phase, milestones are established for specific, agreed upon points in time where segments/elements of the design/building system are completely designed and/or defined in their entirety. The Office provides an agreed upon level of review that allows for written conditional acceptance of these elements and/or systems.~~

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7-111 Definitions

INTEGRATED REVIEW is the process that engages the Office, at its sole discretion, early in the project design and continues through the development and submission of documents during the design phases of conceptualization, criteria design, detailed design, implementation documents, office review, and final plan approval. Within each phase, milestones are established for specific, agreed upon points in time where segments of the design/building system are completely designed and/or defined in their entirety. The Office provides an agreed upon level of review that allows for written conditional acceptance of these elements and/or systems.

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7-111 Definitions

ACTUAL CONSTRUCTION COST means the cost of all portions of a project to construct the work as shown on the approved construction documents and as necessary to comply with the California Building Standards Code, generally based upon the sum of the construction contract(s), when applicable, and other direct construction costs, including but not limited to mobilization, general and special conditions, supervision and management, overhead, markups and profit, demolition, building pad construction (including but not limited to grading, soil remediation, excavation, trenching, retaining, shoring, etc.), temporary construction and barriers, materials, supplies, machinery, construction equipment, labor cost...

START OF CONSTRUCTION [OSHPD 1, 1R, 2, 4 & 5] is the date the actual physical work, demolition, construction, repair, reconstruction, rehabilitation, addition, placement, preparation of the site for the first placement of permanent construction of a building such as trenching for foundations or utilities, or other improvement or offsite component preparation as shown on the approved construction documents begins.

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7-111 Definitions (Continued)

MANAGED PROJECT means a project where schedules and deadlines relating to plan review and construction are negotiated between the Office and the governing board or authority of the health facility or their designated representative. Managed projects include, but are not limited to, projects approved by the Office for ~~phased plan~~ integrated review, as described in Section 7-130, or incremental review, as described in Section 7-131.

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

- (a) Except as otherwise provided ...
1. The application shall contain a definite identifying...
 2. Submission of documents to the Office ...
 - A. Geotechnical Review: One application for plan review and, when applicable, three copies of the site data must be attached.
 - B. Preliminary Review: Submit drawings electronically or provide two ~~Two~~ paper copies of reports or preliminary plans and preliminary annotated ~~outline~~ specifications. If providing paper copies, plans ~~Plans~~/drawings size shall not exceed 36 × 48 inches, and bundled sets of plans/drawings shall not exceed 40 lbs in weight.
 - C. Final Review: Submit drawings electronically or provide two ~~Two~~ paper copies of final construction documents and reports. If providing paper copies, plans ~~Plans~~ /drawings size shall not exceed 36 × 48 inches, and bundled sets of plans/ drawings shall not exceed 40 lbs in weight.

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7-121. Presubmittal meeting.

(c) ~~Phased plan~~ Integrated review ~~and collaborative review and construction~~. A request for ~~Phased Plan-Integrated Review (PPR IR) or Collaborative Review and Construction (CRC)~~ must be submitted to the Office in writing, prior to the presubmittal meeting being scheduled. In addition to the items listed in Section 7-121 (a), for ~~PPR or CRC IR reviewed~~ projects, the architect or engineer in responsible charge shall submit the following information to the Office:

1. Complete...

...

3. Initial draft of the ~~Memorandum of Understanding (MOU)~~ Integrated Review Plan (IRP) proposed, defining roles and accountability of the participants.

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7-123. Preliminary plans and outline specifications.

(a) The governing board or authority or their designated representative may submit preliminary plans and ~~outline~~ specifications to the Office for review prior to submittal of the final construction documents.

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7-128. Work performed without a permit.

(d) **Fees...**

2. A separate, additional, fee for plan review described in Section 7-128(b) and field observation described in Section 7-128(c) shall be based on the estimated cost of construction as specified below:

A. The fee for hospital buildings is 2.0 percent of the estimated construction cost. ~~The estimated construction cost shall include fixed equipment cost or estimated value (including shipping, installation, and taxes) but exclude design fees, inspection fees and off-site construction work.~~

B. The fee for skilled nursing and intermediate care facilities, as defined in Subdivision (c), (d), (e) or (g) of Section 1250, Health and Safety Code, is 1.5 percent of the estimated construction cost. ~~The estimated construction cost shall include fixed equipment but exclude design fees, inspection fees and off-site work.~~

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7-129 Time Limitations

(b) The procedures leading to obtaining written approval of final construction documents shall be carried to conclusion without suspension or unnecessary delay. Unless an extension has been approved by the Office, the application shall become void when ~~either~~ paragraph 1, 2 or 3 occurs:

1. If project actual construction cost is \$500,000 or less and construction documents are not filed for backcheck within 45 calendar days after the date of return of checked construction documents to the architect or engineer in responsible charge. Backcheck submittals that do not contain a written response to all comments in accordance with Section 7-125(c) shall not be considered an official submittal to the Office. The architect or engineer in responsible charge may request one extension of up to 45 calendar days; however, the Office may require the construction documents be revised to meet current regulations. The extension must be requested in writing and justifiable cause demonstrated.

~~2.~~ 2. If project actual construction cost is greater than \$500,000 and ~~Prints from corrected~~ construction documents are not filed for backcheck within 90 calendar days after the date of return of checked construction documents to the architect or engineer in responsible charge. Backcheck submittals that do not contain a written response to all comments in accordance with Section 7-125(c) shall not be considered an official submittal to the Office. The architect or engineer in responsible charge may request one extension of up to 90 calendar days; however, the Office may require the construction documents be revised to meet current regulations. The extension must be requested in writing and justifiable cause demonstrated.

~~3.~~ 3. A set of prints of the stamped construction documents are not submitted to the Office within 45 calendar days after the date shown with the identification stamp by the Office.

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7-129. Time Limitations.

(d) If the work of construction is suspended or abandoned for any reason for a period of one year following its commencement, the Office's approval shall become void. Prior to the approval becoming void, the applicant may apply for one extension of up to one year. The Office may require that the construction documents be revised to meet current regulations before granting an extension. The extensions must be requested in writing and justifiable cause demonstrated. For the purpose of building permit time limitation a project shall be considered abandoned when the work of construction, if any, performed during any twelve-month period does not result in a minimum of ten percent increase in the overall percentage of construction work for the project based on either its scope or cost and no extension for time has been approved by the office.

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7-129 Time Limitations

Exception: The time limitations and deadlines specified in Section 7-129 [\(a\) and \(b\)](#) shall not apply to managed projects as defined in Section 7-111. This includes, but is not limited to, projects approved for ~~phased plan~~ [integrated](#) review, as described in Section 7-130, or incremental review, as described in Section 7-131.

See next slide for clarification

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7-129 Time Limitations

[\(a\) and \(b\)](#) shall not apply to managed projects – these are for plan review – (c) and (d) are for construction and cannot be manage projects at this point.

(a) Final construction documents shall be submitted to the Office within one year of the date of the Office's report on preliminary plans and outline specifications or the application shall become void unless an extension has been requested and approved. The architect or engineer in responsible charge may request one extension of up to 180 calendar days; however, the Office may require that the construction documents meet current regulations. ...

(b) The procedures leading to obtaining written approval of final construction documents shall be carried to conclusion without suspension or unnecessary delay. Unless an extension has been approved by the Office, the application shall become void ...:

(c) **Construction**, in accordance with the approved construction documents, shall commence within one year after obtaining the written approval of construction documents, or this approval shall become void. Prior to the approval becoming void, the applicant may apply for one extension of up to one year. The Office may require that the construction documents be revised to meet current regulations before granting an extension. The extensions must be requested in writing and justifiable cause demonstrated.

(d) If the work of **construction** is suspended or abandoned for any reason for a period of one year following its commencement, the Office's approval shall become void. Prior to the approval becoming void, the applicant may apply for one extension of up to one year. The Office may require that the construction documents be revised to meet current regulations before granting an extension. The extensions must be requested in writing and justifiable cause demonstrated.

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7-130. ~~Phased~~ Integrated submittal, review and approval.

The Office, ~~in~~ at its sole discretion, may enter into a written agreement with the hospital governing board or authority for the phased integrated submittal, review and approval of construction documents.

7-133. Fees.

1. The fee for hospital buildings construction projects with an estimated cost of \$250,000 or more is 1.64 percent of the estimated construction cost. ~~The estimated construction cost shall include fixed equipment cost or estimated value (including shipping, installation, and taxes) but exclude design fees, inspection fees and off-site construction work.~~

A. For projects under \$250,000, the fee is 2.0 percent of the estimated construction cost.

BA. The Office shall charge actual costs for review and approval of seismic evaluations and compliance plans prepared pursuant to Article 8, Chapter 1, Part 7, Division 107, (commencing with Section 130000) of the Health and Safety Code. Total cost paid for these review services shall be nonrefundable.

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7-133. Fees.

(a) Plan review and field observation. ...

1. The fee for hospital buildings construction projects with an estimated construction cost of \$250,000 or more is 1.64 percent of the estimated construction cost. ~~The estimated construction cost shall include fixed equipment cost or estimated value (including shipping, installation, and taxes) but exclude design fees, inspection fees and off-site construction work.~~

A. For projects under \$250,000, the fee is 2.0 percent of the estimated construction cost.

BA. The Office shall charge actual costs for review and approval of seismic evaluations and compliance plans prepared pursuant to Article 8, Chapter 1, Part 7, Division 107, (commencing with Section 130000) of the Health and Safety Code. Total cost paid for these review services shall be nonrefundable.

2. The fee for skilled nursing and intermediate care facilities, as defined in Subdivision (c), (d), (e) or (g) of Section 1250, Health and Safety Code, is 1.5 percent of the estimated construction cost. ~~The estimated construction cost shall include fixed equipment (including shipping, installation, and taxes) but exclude design fees, inspection fees and off-site work.~~

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7-133. Fees. (continued)

(e) **Incremental projects.** The fee for incremental projects pursuant to Section 7-131 is based upon the estimated construction cost of each increment, as calculated in accordance with Section 7-133(a), and shall be due upon the first submission of the construction documents of each construction increment. The final fee shall be based upon the determination of the final actual construction cost of all increments in accordance with Section 7-133(a).

...

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7-133. Fees. (continued)

(h) ~~Phased~~ Integrated review ~~submittal review and collaborative review.~~

1. The fee for ~~phased submittal~~, integrated review and approval pursuant to Section 7-130 shall be 1.95 percent of the estimated construction cost as calculated in accordance with Section 7-133(a) ~~4~~ 4 through 7. ~~not exceed the fee required by Section 7-133(a).~~ A nonrefundable fee of 10 percent of the fee shall be due upon approval of the written agreement and shall be ~~indicated in Section 7-133(a)~~ deducted from the application fee specified in Section 7-133(a) or for fees pursuant to Section 7-133(e) for incremental ~~phased~~ reviews.
2. ~~The fee for collaborative review shall be 1.95 percent of the estimated construction cost as calculated in accordance with Section 7-133(a) 4 through 7. A nonrefundable fee of 10 percent of the fee indicated in Section 7-133(a) shall be due upon approval of the written agreement and shall be deducted from the application fee specified in Section 7-133(a) or for incremental collaborative review Section 7-133(e).~~

...

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7-145. Continuous inspection of the work.

6. The IOR(s) ~~of record~~ shall maintain field records of construction progress for each day or any portion of a day that they are present at the project site location. The field record shall state the time of arrival, time of departure, a summary of work in progress and noted deficiencies in the construction or deviations from the approved construction documents. The field record shall document the time and date of all significant correspondence with the contractor regarding incomplete work, potential deficiencies or deviations which require the contractor's attention and could potentially affect the timely and compliant completion of the project. This field record shall document the date, time and method of correction for any noted deficiencies or deviations. In addition, this record shall contain the following as applicable:

A. Copies of all certificates, tags, marks or other evidence of material properties and/or manufactured components as required by the California Building Standards Code.

E. The names and certificate numbers (when applicable) of all special inspectors who perform work both on and off-site.

7. Field records may be kept electronically. All field records of construction progress shall be retained on the job until the completion of the work and shall, upon request, be made available to the Office, the architect or engineer in responsible charge and the owner. Electronic records may be retained off-site if made available during on-site and remote review of documents. Upon completion of the project, these original field records shall be submitted to the hospital governing board or authority.

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Revisions for Part 2 Volume 1 2022 California Building Code

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Section 1.1 General

1.10.2 OSHPD 2, 2A, and 2B. *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—*[OSHPD 2A] Skilled nursing facility and intermediate care facility buildings of single-story, wood-frame, or light steel frame construction or buildings of single-story, wood-frame, or light steel frame construction where only skilled nursing or intermediate care services are provided if the building is separated from a building housing other patients of the health facility receiving higher levels of care. [OSHPD 2B] Skilled nursing facility and intermediate care facility buildings of all other types. [OSHPD 2] The OSHPD 2 designation applies to both 2A and 2B.*

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1224.3 Definitions

RESTRICTED AREA. *Applies to a designated space contained within the semi-restricted area and accessible only through a semi-restricted area. The restricted area includes operating and other rooms in which operative or other invasive procedures are performed. A designated space with limited access eligibility. Such space has one or more of the following attributes: specific signage, physical barriers, security controls and protocols that delineate requirements for monitoring, maintenance, attire, and use. The term is often applied to specialized procedure suites, such as operating rooms and suites, interventional imaging, cardiac catheterization labs, angiography suites, etc.*

...

SEMI-RESTRICTED AREA. *Applies to peripheral areas that support surgical services. These areas may include storage for equipment and clean and sterile supplies; work area for processing instruments; sterile processing facilities; hand scrub stations; corridors leading from the unrestricted area to the restricted area of the surgical suite; and entrances to staff changing areas; pre- and postoperative patient care areas, and sterile processing facilities. The semi-restricted area of the surgical suite is entered directly from the unrestricted area past a nurse station or from other areas. Public access is controlled.*

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1224.3 Definitions

UNRESTRICTED AREA. *Applies to any area of the surgery department that is not defined as semi-restricted or restricted. These area may include a central control point for designated personnel to monitor the entrance of patients, personnel, and materials into the semi-restricted areas; staff changing areas; a staff lounge; offices; waiting rooms or area; pre- and postoperative patient care areas; and access to procedure rooms. Public access may be limited.*

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1224.3 Definitions

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

- *Requires entry into or opening of a sterile body cavity (i.e. cranium, chest, abdomen, pelvis, joint spaces)*
- *Involves insertion of an indwelling foreign body*
- *Includes excision and grafting of burns that cover more than 20 percent of total body area*
- *Does not begin as an open procedure but has a recognized measurable risk of requiring conversion to an open procedure*

...

LOCATION TERMINOLOGY.

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

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1224.3 Definitions

PROCEDURE ROOM. *means a room designated for the performance of patient care that requires high-level disinfection or sterile instruments and some environmental controls but is not required to be performed with the environmental controls of an operating room.*

...

LOCATION TERMINOLOGY.

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

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1224.4.4.1 Examination, and treatment, and procedure rooms.

...

1224.4.4.1.2 Treatment room. *Unless specified elsewhere, if a treatment room is provided, it shall have a minimum clear floor area of 120 square feet (11.15 m²), the least dimension of which shall be 10 feet (3048 mm). A minimum of 3 feet (914 mm) is required between the sides and foot of the bed/gurney/table and any wall or other fixed obstruction. The room shall contain an examination light, a work counter for medical equipment, a handwashing fixture, cabinets, medication storage and counter space for writing or electronic documentation. If used for exercise stress testing, include space for a crash cart and patient resuscitation and omit the exam light. Multi-bed treatment rooms shall have separate patient cubicles with a minimum clear floor area of 80 square feet (7.4 m²) per cubicle. Each cubicle shall contain an examination light, counter and storage facilities. In multi-bed treatment rooms, a handwashing fixture shall be provided in the room for each three or fewer cubicles.*

...

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1224.4.4.1 Examination, and treatment, and procedure rooms.

...

1224.4.4.1.4 Procedure room. Unless specified elsewhere, if a procedure room is provided, it shall meet the requirements in this section.

1224.4.4.1.4.1 General.

(1) Application. The governing body shall perform a clinical assessment of the procedures to be performed to determine the appropriate room type and location for these procedures and document this in the Functional Program in compliance with the California Administrative Code, Section 7-119. Where a procedure room is used for multiple procedure types, the room shall meet the most stringent requirements for the space.

(2) Location. The procedure room shall meet the requirements of a semi-restricted area. The procedure room shall be permitted to be accessed from a semi-restricted corridor or from an unrestricted corridor.

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1224.4.4.1 Examination, and treatment, and procedure rooms.

1224.4.4.1.4.2 Space requirements.

(1) Area. Procedure rooms shall have a minimum clear floor area of 130 square feet (12.08 m²). Procedure rooms where anesthesia will be administered using an anesthesia machine and supply carts shall have a minimum clear floor area of 160 square feet (14.86 m²). Procedure rooms where procedures will be performed that require additional personnel and/or large equipment shall be sized to accommodate the personnel and equipment planned to be in the room during procedures, including and additional personnel and equipment that will be needed for emergency rescue.

(2) Clearances. Procedure rooms shall have the following minimum clearances around the table, gurney, or procedure chair:

(a) 3 feet 6 inches (1070 mm) on each side.

(b) 3 feet (914.4 mm) at the head and foot. Where an anesthesia machine and associated supply cart is used, the clearance at the head shall be a minimum of 6 feet (1830 mm).

(3) Fixed encroachments into the minimum clear floor area. Fixed encroachments shall be permitted to be included when determining the minimum clear floor area for a procedure room as long as:

(a) The encroachments do not extend more than 12 inches (305 mm) into the minimum clear floor area.

(b) Where a sterile field is provided, the encroachment shall not extend into the sterile field.

(c) The encroachment width along each wall does not exceed 10 percent of the length of that wall.

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1224.4.4.1 Examination, ~~and~~ treatment, and procedure rooms.

1224.4.4.1.4.3 Documentation area.

(1) Accommodations for written and/or electronic documentation shall be provided in the procedure room.

(2) Where a built-in feature is provided for documentation, it shall allow for direct observation of the patient.

1224.4.4.1.4.4 Patient privacy. Provisions shall be made for patient visual and speech privacy.

1224.4.4.1.4.5 Handwashing station. A handwashing station shall be provided in the procedure room. Where a hand scrub station is directly accessible to the procedure room, omission of the handwashing station is permitted.

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1224.4.4.4 Medication station.

...

1224.4.4.4.1 Medication preparation room. If provided, this room shall be lockable ~~and be directly accessible from the nursing station~~. When a medicine preparation room is to be used to store one or more self-contained medicine dispensing units, the room

shall be designed with adequate space to prepare medicines with the self-contained medicine dispensing

unit(s) present. Medicine preparation rooms shall include:

1. Work counter.
2. Handwashing station.
3. Refrigerator.
4. Locked storage for controlled drugs.

1224.4.4.4.2 Self-contained medication dispensing...

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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 |
|----|--|----------------------------|----------------------------|----------------------------|-------------------|
| 1 | Patient rooms (medical/surgical unit) | 1/bed | 1/bed | — | — |
| 2 | Examination or treatment (medical/surgical unit and postpartum care) | 1/room | 1/room | — | — |
| 3 | Airborne infection isolation or protective environment rooms (medical/surgical unit) | 1/bed | 1/bed | — | — |
| 4 | Seclusion room (medical/surgical unit and postpartum care) | 1/bed | 1/bed | — | — |
| 5 | Intensive care (general) | 3/bed | 3/bed | 1/bed | — |
| 6 | Airborne infection isolation (intensive care) | 3/bed | 3/bed | 1/bed | — |
| 7 | Coronary-care service space | 3/bed | 2/bed | 1/bed | — |
| 8 | Pediatric intensive care | 3/bed | 3/bed | 1/bed | — |
| 9 | Newborn intensive care | 3/bassinet | 3/bassinet | 3/bassinet | — |
| 10 | Newborn nursery (full term) | 1/4 bassinets ² | 1/4 bassinets ² | 1/4 bassinets ² | — |

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1224.4 GENERAL CONSTRUCTION

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

| AREA DESIGNATION | STATION TYPE | 1224 | 1225 | 1226 | 1227 | 1228 |
|-------------------------------------|--------------|------|------|------|------|------|
| Nursing Units | | | | | | |
| Patient toilet room | B | * | * | | * | |
| Patient bathing | B | * | * | | * | |
| Special bathing | E | * | | | | |
| Patient bed (nursing service) | P,E,C | * | | | * | |
| Post-op patient care/PACU | P,E,C | * | | * | * | |
| Imaging exam/procedure room | E,C | * | | * | * | |
| Procedure Room, including Endoscopy | E,C | * | | * | * | |
| Patient toilet room | B | * | | *L | * | |
| Electroconvulsive therapy | E,C | * | | | * | * |

Station Types

P = Patient Station, B = Bath Station, E = Staff Emergency, C = Code Call, M = Master, D = Duty

1. Not required for Primary Care, Chronic Dialysis, Rehabilitation or Psychology Clinics.

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1224.4 GENERAL CONSTRUCTION

1224.4.11 Interior finishes. *For imaging, examination/treatment, procedure, and operating rooms also see Table 1224.4.11.4a.*

1224.4.11.4 Ceilings. *Ceilings in areas occupied by patients...*

1224.4.11.4.1 Ceiling finishes. *Ceiling finishes shall comply with Table 1224.4.11, [Table 1224.4.11.4.1a](#), and the following requirements:*

TABLE 1224.4.11.4a

EXAMINATION/TREATMENT, IMAGING, PROCEDURE, AND OPERATING ROOM CLASSIFICATION ^{1,2}

| <u>ROOM</u> | <u>USE</u> | <u>ROOM TYPE</u> | <u>LOCATION</u> | <u>SURFACES</u> |
|-------------------------------|--|--------------------------|---|---|
| <i>Exam or treatment room</i> | <i>Patient care that may require high-level disinfected or sterile instruments but does not require the environmental controls of a procedure room</i> | <i>Unrestricted area</i> | <i>Accessed from an unrestricted area</i> | <i>Flooring: cleanable and wear-resistant for the location; stable, firm, and slip-resistant Wall finishes: washable Ceiling: cleanable with routine housekeeping equipment; lay-in ceiling permitted</i> |
| <i>Class 1 imaging room</i> | <i>Diagnostic radiology, fluoroscopy, mammography, computed tomography (CT), ultrasound, magnetic resonance imaging (MRI), and other imaging modalities. Services that use natural orifice entry and do not pierce or penetrate natural protective membranes</i> | | | |

| | | | | |
|-----------------------------|---|-----------------------------|--|--|
| <u>Procedure room</u> | <u>Patient care that requires high-level disinfection of the room, sterile instruments, and some environmental controls but does not require the environmental controls of an operating room. Endoscopic procedures</u> | <u>Semi-restricted area</u> | <u>Accessed from an unrestricted or a semi-restricted area</u> | <u>Flooring: cleanable and wear-resistant for the location; stable, firm and slip-resistant Floor and wall base assemblies: monolithic floor with integral coved wall base carried up the wall a minimum of 6 inches.</u> <u>Wall finishes: washable; free of fissures, open joints or crevices</u> |
| <u>Class 2 imaging room</u> | <u>Diagnostic and therapeutic procedures such as coronary, neurological, or peripheral angiography Electrophysiology procedures</u> | | | <u>Ceiling: smooth and without crevices, scrubbable, non-absorptive, non-perforated; capable of withstanding cleaning chemicals; lay-in ceiling permitted if gasketed or each ceiling tile weighs at least one pound per square foot and no perforated, tegular, serrated, or highly textured tiles.</u> |

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| | | | | |
|-----------------------------|---|------------------------|---|--|
| <u>Operating room</u> | <u>Invasive procedures³ Any procedure during which the patient will require physiological monitoring and is anticipated to require active life support</u> | <u>Restricted area</u> | <u>Accessed from a semi-restricted area</u> | <u>Flooring: cleanable and wear-resistant for the location, stable, firm, and slip-resistant Floor and wall assemblies: monolithic floor with integral coved wall base carried up the wall a minimum of 6 inches</u> <u>Wall finishes: washable; free of fissures, open joints, or crevices</u> |
| <u>Class 3 imaging room</u> | <u>Invasive procedures³ Any Class 2 procedure during which the patient will require physiological monitoring and is anticipated to require active life support</u> | | | <u>Ceiling: monolithic, scrubbable, capable of withstanding cleaning and/or disinfecting chemical, gasketed access openings</u> |

1. This table includes a brief description of the services performed in these room types and a summary of some applicable requirements that appear elsewhere in the California Building Code.
2. Other requirements that apply to these room types include, but are not limited to, ventilation, lighting, and sound transmission requirements. See California Mechanical Code Table 4-A and ASHRAE 170 for ventilation requirements. See California Electrical Code, Article 517 for lighting and power requirements. See California Building Code Table 1224.4.19 for noise transmission requirements.
3. "Invasive procedure" is defined in Section 1224.3 definitions.

42



1224.5.4 SPC/NPC compliance

1224.5.4 SPC/NPC compliance. *The location of spaces required by this section shall meet the requirements of California [Existing Building Code](#), Section ~~3416A~~ [307A](#) [Compliance Alternatives for Services/Systems and Utilities](#).*

43

1224.14 NURSING SERVICE SPACE

1224.14.2 Support areas. *The provision for the support areas listed below shall be in each nursing unit, unless noted otherwise. The size and location of each support area will depend upon the numbers and types of beds served. [If it has direct access to the unit, some](#) ~~Some~~ support areas may be arranged and located to serve more than one nursing unit as indicated below, but, unless noted otherwise, at least one such support area shall be provided on each nursing floor.*

44

1224.14 NURSING SERVICE SPACE

1224.14.2.2 Nurse or supervisor office. A nurse or supervisor office shall be provided ~~in each nursing unit~~ and may be shared between adjacent nursing units on the same floor.

...

1224.14.2.6 Clean utility/workroom. Clean utility/workroom shall be provided ~~in each nursing unit~~ and shall comply with ~~to~~ Section 1224.4.4.

...

1224.14.2.7 Soiled workroom or soiled holding room. A soiled workroom or soiled holding room shall be provided ~~in each nursing unit~~ and shall comply with Section 1224.4.4.7.

...

1224.14.2.10 Nourishment area. A nourishment area or room shall be provided ~~in~~ for each nursing unit and shall comply with Section 1224.4.4.5.

45

1224.14 NURSING SERVICE SPACE

1224.14.2.12 Equipment storage room. Appropriate room(s) shall be provided for storage of equipment necessary for patient care. ~~Each unit shall provide~~ with not less than 10 square feet (0.93 m²) per patient bed.

...

1224.14.2.14 Centralized bathing facilities. When individual bathing facilities are not provided in patient rooms, there shall be at least one shower and/or bathtub for each 12 beds without such facilities. Each bathtub or shower shall be in an individual room or enclosure that provides privacy for bathing, drying, and dressing. Each centralized bathing facility shall have direct access to a patient toilet and handwashing fixture.

1224.14.2.15 14.1 Special bathing facilities. If provided, special ~~Special~~ bathing facilities, ~~including space for attendant, shall be provided~~ for patients on gurneys, carts, and wheelchairs shall include space for an attendant. ~~at the ratio of one per 100 beds or a fraction thereof. The special bathing facility may be located in a nursing unit on a separate floor.~~

46

1224.15 SURGICAL SERVICE SPACE.

...

1224.15.1 General. *The surgical service space shall be divided into two designated areas: 1) semi-restricted areas (e.g., storage areas for clean and sterile supplies, sterile processing rooms, scrub stations, and corridors leading to restricted areas of the surgical suite, etc.); and 2) restricted areas (e.g., operating rooms, hybrid operating rooms, sterile procedure rooms, cardiac catheterization labs, [sterile cores](#), etc.) that can be reached only through a semi-restricted area.*

47

1224.15 SURGICAL SERVICE SPACE

1224.15.2 Surgery

1224.15.2.1 General operating room(s). *Each room shall have a minimum...*

...

1224.15.2.2 Procedure room(s). *Where a procedure room is provided it shall comply with Section 1224.14.2.6 unless specified elsewhere.*

Moved requirements to 1224.14.2.5 and add pointer here.

48

1224.16 ANESTHESIA/RECOVERY SERVICE SPACE

1224.16.3 Recovery and Post-Anesthesia Care Unit (PACU)...

1224.16.3.1 Space requirements. A minimum of 4 feet (1218) clearance shall be provided between the sides and the foot of patient gurneys, or beds, and adjacent walls or other fixed elements. A minimum clear floor area of 80 square feet (7.43 m²) shall be provided for each station in an open-bay plan. A minimum of 5 feet (1524 mm) shall be provided between sides of gurneys or beds, and a minimum of 3 feet (914 mm) clearance shall be provided between the foot of the gurney or bed, to a closed cubicle curtain. A minimum width of 6 feet (1829 mm) of access/circulation outside the curtain shall be provided. See patient Bay under Patient Care Locations in Section 1224.3.

49

1224.18 RADIOLOGICAL/DIAGNOSTIC IMAGING SERVICE SPACE.

1224.18 RADIOLOGICAL/DIAGNOSTIC IMAGING SERVICE SPACE. Space and equipment shall be provided to accommodate all required elements, and any additional imaging modalities included in the service space, as required in this section. To differentiate the design and construction requirements needed to achieve the environmental controls and other requirements that support the amount of intervention to be provided, imaging rooms shall be classified as described in Table 1224.4.11.4a (Examination/Treatment, Imaging, Procedure, and Operating Room Classification). Where an imaging room will be used for Class 1 and Class 2 procedures, the more stringent requirements for the higher class room shall apply. Where imaging procedures meeting Class 3 criteria are performed, rooms that meet the requirements for the applicable imaging suite and for an operating room per Section 1224.15.2.1 or hybrid operating room per Section 1228.28.5 shall be provided. If Class 2 or Class 3 interventional or image-guided procedures are performed in the imaging services area, additional provisions shall be as described in Section 1224.28 Supplemental Surgery and other Special Procedure Services. If nuclear medicine is provided in the imaging services area, spaces shall also comply with the requirements described in Section 1224.34 Nuclear Medicine.

1224.18.1 Minimum requirements. Hospital shall provide a minimum of...

50

1224.18 RADIOLOGICAL/DIAGNOSTIC IMAGING SERVICE SPACE.

1224.18.1 Minimum requirements. Hospital shall provide a minimum of...

- (1) One fluoroscopy room, or CT room on approval of Licensing Agency, which can also provide x-ray examination services.
- (2) Space for processing or viewing images. ...

6. Handwashing stations located within the unit.

a) Handwashing station(s) shall be provided within the unit to serve imaging spaces not served by a dedicated handwashing station within the imaging room, or scrub facility located directly outside the imaging/procedure room.

b) A handwashing station shall be provided in Class 1 imaging rooms, unless specified otherwise for a specific imaging modality.

c) A handwashing station or hand scrub facility shall be provided for Class 2 imaging rooms. If a handwashing station is provided, it shall be directly accessible to the imaging room. If a hand scrub facility is provided, it shall be directly outside the entrance to the imaging room.

d) Hand scrub facilities shall be provided directly outside the entrance to a Class 3 imaging room.

7. Dressing room facilities.

51

1224.18 RADIOLOGICAL/DIAGNOSTIC IMAGING SERVICE SPACE.

1224.18.1.1 Radiation protection. A certified physicist or other qualified expert shall specify the type, location, and amount of radiation protection...

1. The control alcove or room shall be, at minimum, sized and configured in compliance with the manufacturer's recommendations for installation, service, and maintenance.

2. A control alcove or room shall be permitted to serve more than one imaging room, provided the manufacturer's recommendations for installation, service, and maintenance are accommodated for all rooms served.

3. The control alcove or room shall include a shielded view window, as specified in the physicist's report, designed to provide a full view of the examination/procedure table and the patient at all times, including a full view of the patient during imaging activities (e.g. when the table is tilted or the chest x-ray is in use).

4. The control room shall be physically separated from a Class 2 or Class 3 imaging room with walls and a door.

5. Where an imaging room requires positive (or negative) pressure, a door shall be provided between the control room and the imaging room.

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1224.18 RADIOLOGICAL/DIAGNOSTIC IMAGING SERVICE SPACE.

1224.18.1.2 Multiple-modality devices. *Where two or more individual imaging or therapy modalities are integrated into one imaging device (e.g. PET/CT, SPECT/CT, or PET/MRI), the minimum requirements for that room shall include the criteria for each individual contributing modality. Refer to Section 1224.34 for modalities not included under Section 1224.18.*

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1224.18 RADIOLOGICAL/DIAGNOSTIC IMAGING SERVICE SPACE.

1224.18.4 Magnetic resonance imaging (MRI). *If provided, the MRI room shall accommodate the equipment with a minimum of 3 feet (914 mm) on all sides of the equipment, together with the following:*

1. A control room shall be provided with full view of the patient in the MRI scanner. The control console shall be positioned so the operator has a full view of the approach and entrance to the MRI scanner room.
2. An anteroom or area visible from the control room shall be located outside the MRI scanner room so that patients, health care personnel, and other employees must pass through it before entering the scanning area and control room. The room or area shall be outside the restricted areas of the MRI's magnetic field.

3. Safety Zones One through Four shall be identified.

a) Zone One consists of all areas freely accessible to the general public. This zone includes the entrance to the MR facility.

b) Zone Two acts as a buffer between Zone One and the more restrictive Zone Three. Patients are under the general supervision of MR personnel. Zone Two may include the reception area, dressing room and interview room.

c) Zone Three should be restricted by a physical barrier. Only approved MR personnel and patients that have undergone a medical questionnaire and interview are allowed inside Zone Three. The MR control room and/or computer room are located within Zone Three.

d) Zone Four is strictly the area within the walls of the MR scanner room. Access into the MR scanner room should only be available by passing through Zone Three.

4. An imaging equipment ~~computer~~ room shall be provided if needed for the operation of the MRI.

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1224.18.5 Ultrasound.

...

1224.18.5.2 Handwashing station. A handwashing station shall be provided within the ~~procedure~~ exam room.

1224.18.5.3 Patient toilet(s). A patient toilet shall be directly accessible to the ultrasound ~~procedure~~ exam room. The patient toilet may be permitted to serve more than one ultrasound ~~procedure~~ exam room. If exams performed are limited to cardiology, vascular, breast ultrasound or used for image guided procedures, then the toilet is not required to have direct access.

1224.18.5.4 Processing room. If provided, a processing room shall contain distinct areas for cleaning and decontaminating instruments. The cleaning area shall provide for flow of instruments from the contaminated area to the clean area and then to storage.

1224.18.5.4.1 The decontamination area shall be equipped with the following:

1. One freestanding handwashing station.
2. Work counter space(s).
3. Separate Storage Room or cabinet for HLD probes

55

1224.19.7 Support areas for staff.

1224.19.7.1 Lounge, locker and toilet facilities. ~~Provide for immediate accessibility to pharmacy staff toilet rooms and lockers.~~ Provide pharmacy staff lounge, toilet rooms and lockers that are readily accessible.

1224.20 DIETETIC SERVICE SPACE.

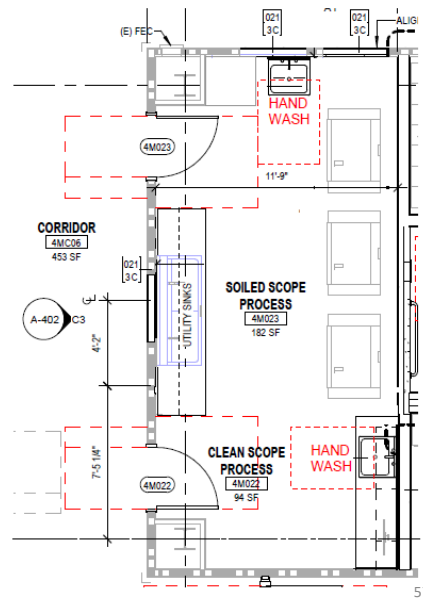
1224.20.3 Outside Service. On approval of the Licensing Agency, when food is provided by an outside food service, all applicable licensing and certification requirements shall be met. The facility shall maintain adequate space, equipment and food supplies to accommodate required functional elements listed in Section 1224.20.2, as required to provide patient food service in the event that outside food service is interrupted. A temporary mobile kitchen approved by the licensing agency can be used to meet the requirements of 1224.20.2 during construction.

56

CENTRAL STERILE SUPPLY.

1224.22.1 Minimum requirements. A central supply and sterilizing area shall be provided. Rooms **and distinct** spaces shall accommodate the following services and equipment:

- 1. Soiled work area.** A receiving and gross cleaning...



1224.25 EMPLOYEE DRESSING ROOMS AND LOCKERS.

1224.25 EMPLOYEE DRESSING ROOMS AND LOCKERS.

1224.25.1 Minimum facilities. Hospitals shall provide the following:

1. Separate dressing rooms for male and female personnel with lockers, ~~lavatory~~ and a toilet room.
2. Additional dressing rooms for the surgical service and as required within any of the supplemental services.

1224.28 SUPPLEMENTAL SURGERY AND SPECIAL PROCEDURE SERVICES

1224.28.2 Cardiac catheterization.

1224.28.2.1 Procedure room. A procedure room with a minimum clear floor area of 400 square feet (37.16 m²) for the procedure room in addition to spaces for control, monitoring and recording equipment, and ~~x-ray~~ [imaging equipment](#) power and controls, and a minimum of one scrub sink for each catheterization laboratory. This space does not include the control room.

...

1224.28.2.3 Equipment space. An equipment space or enclosure large enough to contain ~~x-ray~~ [imaging equipment](#) transformers, power modules, and associated electronics and electrical gear shall be provided.

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Imaging Equipment Rooms

1224.28.4 Interventional imaging.

...

1224.28.4.8 ~~Electrical~~ [Imaging equipment room.](#) ~~Electronic [Imaging equipment room](#) or enclosures~~ large enough to contain x-ray transformers, power modules, and associated electronics and electrical gear shall be provided. Sharing of [imaging electronics](#) equipment rooms by multiple procedure rooms is permitted.

...

1224.28.4.12 Staff changing areas. ~~Male and female staff~~ Staff changing areas shall be provided and arranged to ensure a traffic pattern so that personnel can enter from [an unrestricted area outside the suite](#), change their clothing, and move directly into ~~the semi-restricted corridor within the~~ the interventional imaging suite.

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1224.28 SUPPLEMENTAL SURGERY AND SPECIAL PROCEDURE SERVICES

1224.28.5 Hybrid operating room(s).

...

1224.28.5.2 Control room. *If required, a control room shall be provided that accommodates the imaging system control equipment and the following requirements:*

1. *The control room shall have a minimum clear floor area of 120 square feet (11.15 m²), which may include fixed work surfaces.*
2. *The room shall be physically separated from the hybrid operating rooms with walls and a door.*
3. *The room shall have viewing windows that provide for a full view of the patient and the surgical team. [Cameras shall be permitted to provide for full view of patient while positioned in imaging equipment.](#)*

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1224.29 INTENSIVE CARE UNITS

1224.29.1.12 Medication station. *A medication station shall be provided in accordance with Section 1224.4.4.4. [Refrigerated storage is required.](#)*

1224.29.1.13 Airborne infection isolation room. *At least one airborne infection isolation room shall be provided per unit. The room shall comply with the requirements of Section 1224.14.3; however, the adjoining toilet room is not required. Modular toilet units located within a privacy curtain may be used within the airborne infection isolation room. The modular toilet fixture shall comply with Section 1224.29.1.4.*

Exception: When approved by the licensing agency an airborne infection isolation room is not required for small or rural hospitals [or burn-center protected environment units.](#)

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1224.29.2 NEWBORN INTENSIVE CARE UNITS (NICU)

1224.29.2.6 Area. Each patient care space shall contain a minimum of 120 square feet (11.15 m²) of clear floor area per bassinet excluding handwashing fixtures and aisles with a minimum headwall width of 11 feet (3353 mm). There shall be an aisle for circulation adjacent to each patient care space with a minimum width of 4 feet (1219 mm).

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1224.30 PEDIATRIC AND ADOLESCENT NURSING UNIT

1224.30.1 Patient rooms. Patient rooms shall have direct visual observation between either a centralized or distributed nurse station or workstation or by other means if approved by licensing agency. Each patient room shall meet the following standards:

1224.30.1.1 Beds. The space requirements for pediatric patient beds shall be the same as required by Section 1224.14.1.2.

1224.30.1.2 Windows. Each patient room shall have a window in accordance with Section 1224.4.9.

...

1224.30.2 Examination room ~~or~~ and treatment rooms. This An exam room and treatment room shall be provided in or adjacent to the pediatric unit for pediatric and adolescent patients. A separate area for infant examination and treatment may be provided within the pediatric nursery workroom.

1224.30.3 Service areas. The service areas in the pediatric and adolescent nursing units shall conform to Section 1224.14.2 and shall also provide the following:

1224.30.3.1 Playroom area. A playroom area shall be provided and have direct visual observation between either a centralized or distributed nurse station or workstation or by other means if approved by licensing agency.

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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 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 unit provides acute medical care, the unit shall ~~comply with Section 1224.14 and~~ be located in a building that is compliant with California Administrative Code Chapter 6 for OSHPD-1.

...

1224.31.1.10 Occupational therapy. Facilities for occupational therapy shall comply with Section 1224.35.3, [items 1, 2 and 3](#). ~~Eliminates ADL item 4.~~

...

1224.31.1.17 Administrative center(s) or nurse station(s). [The distance between the nurse station's entrance and the center of the doorway of the most remote patient bedroom shall not exceed 90 linear feet \(27,432 mm\). Refer to Section 1224.4.4.2.](#)

65

1224.32 OBSTETRICAL FACILITIES (PERINATAL UNIT SPACE)

1224.32.3.2 Delivery room(s). At least one delivery room shall be provided in the obstetrical unit. Delivery rooms shall have a minimum clear floor area of 300 square feet (27.87 m²). An emergency communication system shall be connected with the obstetrical facilities control station.

1224.32.3.2.1 Postpartum bed ratio. Delivery rooms, which are used for no other purpose, shall be provided at the ratio of one per 12 postpartum beds and for each major fraction thereof.

Exceptions:

1. If LDR or LDRP beds are provided, each LDR or LDRP may be counted as a delivery room in the postpartum bed ratio. [This does not exempt the delivery room required per 1224.32.3.2.](#)
2. When approved by the licensing agency, the operating room of small or rural hospitals with a licensed bed capacity of 50 or less may serve as the delivery room.

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1224.33 EMERGENCY SERVICE

1224.33.2.2 Treatment room. Standby emergency service shall include at least one treatment room with the following elements:

...

5. Multiple-station treatment rooms shall provide a minimum of 80 square feet (7.43 m²) per patient gurney, with a minimum 8 foot width (2,438 mm) and 3 feet (914 mm) at the foot of the bed/gurney, with a minimum of 3 feet to any wall or fixed obstruction, and a minimum of 5 feet (1524 mm) between patient gurneys. Patient gurneys shall be separated from adjoining ~~cubicles~~ patient care stations by curtains. A minimum width of 6 feet (1829 mm) of access/circulation outside the curtain shall be provided. Handwashing fixtures shall be provided for each four treatment stations and for each major fraction thereof in multiple-station areas. These shall be uniformly distributed to provide equal access from each patient station.

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1224.33 EMERGENCY SERVICE

1224.33.2.7 Observation area. A patient ~~cubicle~~ station with a minimum clear floor area of 100 square feet (9.29 m²) shall be provided under the visual control of an emergency service staff work area. The patient station shall have space at bedside for visitors and shall have provision for visual privacy from casual observation by other patients and visitors. The dimensions and arrangement of rooms with multiple beds/gurneys shall be such that there is a minimum of 3 feet (914 mm) between the sides and any wall or any other fixed obstruction. A minimum clearance of 3 feet (914 mm) shall be provided between beds and a clearance of 4 feet (1219 mm) shall be available at the foot of each bed 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 four 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.

Exception: For small and rural hospitals, the observation area need not be dedicated solely for that purpose.

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1224.33 EMERGENCY SERVICE

1224.33.3.14 Medication preparation room. A minimum of one medication preparation room shall be provided in accordance with Section 1224.4.4.4.1. Self-contained medication dispensing units may be provided in addition.

1224.33.4.3 Pre-screening stations. A pre-screening area may be used prior to admission to the Emergency Department. If pre-screening is provided, each station must have a minimum of 80 square feet (7.4 m²) of clear floor area, a handwashing station, documentation counter, and a storage cabinet. In open bay pre-screening areas, one handwashing station shall be provided for every four patient stations. Pre-screening stations, whether private rooms or open bays, are considered a part of the waiting area and must meet the same ventilation requirements.

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1224.33 EMERGENCY SERVICE

1224.33.5.1 Observation units. Observation rooms for the monitoring of patients up to 24 hours may be provided as a distinct unit within, the emergency department. If provided the unit shall have the following:

1. Handwashing stations shall be provided in each patient room and for each four treatment stations, and for each major fraction thereof. These shall be uniformly distributed to provide equal access from each patient station. Handwashing stations shall be directly accessible to nurse stations and patient care areas.

2. Each patient station shall provide space at each bedside for visitors and provision for visual privacy from casual observation by other patients and visitors. Each patient Single station rooms shall have a minimum of 120 square feet (11.15 m²) of clear floor area. including space at each bedside for visitors and provision for visual privacy from casual observation by other patients and visitors. Multiple-station rooms shall provide a minimum of 80 square feet (7.43 m²) per patient station with a minimum 8 foot width (2,438 mm). A minimum distance of 3 feet (914 mm) between the sides and any wall or any other fixed obstruction shall be provided. A minimum distance of 3 feet (914 mm) shall be provided between beds and 4 feet (1219 mm) at the foot of each bed to permit the passage of equipment and beds. Patient gurneys shall be separated from adjoining patient stations by curtains.

Matches Outpatient Observation Unit language.

3. One toilet room shall be provided for each six treatment stations and for each major fraction thereof.

4. An administrative center/nurse station, in compliance with Section 1224.4.4.2, positioned to allow staff to observe each patient care station or room.

5. A nourishment area in compliance with Section 1224.4.4.5.

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1224.34 NUCLEAR MEDICINE.

1224.34.1.2.2 Positron Emission Tomography (PET). Shall include the following:

Scanner room shall provide a...

...

7. ~~Computer~~ Imaging equipment room shall be provided in support of the equipment provided.

8. Contaminated (hot) ...

...

1224.34.1.2.3 Single-Photon Emission Computed Tomography (SPECT) Facilities. When provided shall include the following:

...

1. ~~Scanner room.~~ Scanner room shall provide a minimum clearance of 4 feet (1218 mm) at each side and the foot of the table. Additional space shall be provided when SPECT is combined with CT, and include compliance with Section 1224.18.3 and shielding requirements in Section 1224.34.1.1.

2. ~~Control room.~~ A control room shall be provided with a full direct view of the patient in the SPECT scanner.

3. ~~Computer~~ Imaging equipment room shall be provided in support of the equipment provided.

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1224.34 NUCLEAR MEDICINE

1224.34.6 Radiosurgery suite. If radiosurgery (gamma knife/cyber knife) is provided, the following shall be provided:

...

1224.34.6.3 Pre-procedure/recovery accommodations. If provided, pre-procedure/recovery patient care stations shall meet the following requirements:

...

3. Clearances. Each bay or cubicle shall have a minimum clearance of 3 feet (914 mm) between walls or partitions and the sides and foot of gurneys or patient beds. Each bay shall have a minimum clearance of 4 feet (1218 mm) between sides of gurneys or patient beds. A minimum width of 6 feet (1829 mm) of access/circulation outside the curtain shall be provided.

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1224.4.4.4 Medication station.

...

1224.4.4.4.1 Medication preparation room. If provided, this room shall be lockable and be directly accessible from the nursing station. When a medicine preparation room is to be used to store one or more self-contained medicine dispensing units, the room shall be designed with adequate space to prepare medicines with the self-contained medicine dispensing

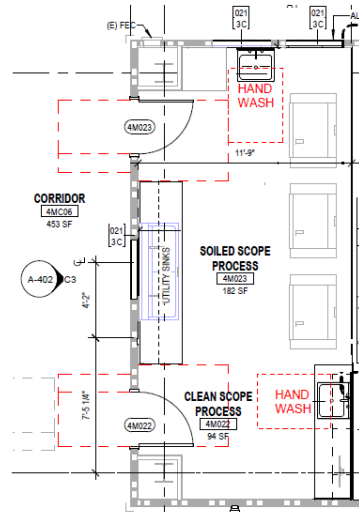
unit(s) present. Medicine preparation rooms shall include:

1. Work counter.
2. Handwashing station.
3. Refrigerator.
4. Locked storage for controlled drugs.

1224.4.4.4.2 Self-contained medication dispensing...

1224.39.3.2 Processing room.

1224.39.3.2.1 Dedicated processing room(s) shall provide distinct areas for cleaning and decontaminating instruments shall be provided. The cleaning area shall allow for flow of instruments from the contaminated area to the clean assembly area and then to storage.



1224.39 OUTPATIENT SERVICE SPACE

1224.39.3.4 Post-anesthesia recovery area. A post-anesthesia recovery area shall meet the requirements of Section 1224.16-3.

...

1224.39.3.6 Service areas. Each gastrointestinal endoscopy unit shall provide the support areas required under Section 1226.5.11.6 if not shared within the department.



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1224.39 OUTPATIENT SERVICE SPACE

1224.39.6 OUTPATIENT OBSERVATION UNITS.

...

1224.39.6.4 Patient care stations. Each patient station shall provide minimum clear floor area that includes space at each bedside for visitors. Provisions for visual privacy from casual observation by other patients and visitors shall be provided. Patient care stations shall meet the following:

1224.39.6.4.1 Space requirements:

1. Single-station rooms: 110 square feet (10.2 m²). A minimum distance of 3 feet (914 mm) shall be provided between the sides and foot of bed and any wall or other fixed obstructions.
2. Multi-station rooms or areas: 80 square feet (7.4 m²) per patient station. A minimum distance of 3 feet (914 mm) shall be provided between beds and 4 feet (1219 mm) between the foot of beds, ~~and~~ walls or other fixed obstructions for access/circulation.

This aligns with patient rooms.

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1225 Skilled Nursing Facilities

1225.4.1.6 Toilet room and bath facilities.

...

1225.4.1.6.3 Bathroom facilities. Bathtubs or showers shall be provided at a ratio of 1:20 patients, and for each major fraction thereof, with a minimum of one bathtub per floor. A separate private toilet shall be provided that is directly accessible to each multi-bathing fixture central bathing area without requiring entry into the general corridor.

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1226 CLINICS

1226.4 General Construction. Clinics and outpatient clinical services under a hospital license shall comply with the ~~following provisions wherever applicable~~ under Section 1224.4, General Construction, where applicable, except as supplemented, amended or modified below.

1226.4.1 Examination and treatment areas.

...

1226.4.2 Miscellaneous requirements.

1226.4.2.1 Station outlets. When provided, refer to Section 1224.4.6.1.

1226.4.2.2 Gas and vacuum systems. When provided refer to Section 1224.4.6.2.

1226.4.2.3 Hyperbaric facilities. When provided, refer to Section 1224.4.6.3.

1226.4.2.4 Laboratories. Refer to Section 1224.4.6.4.

1226.4.2.5 Nurse call systems. Refer to Section 1224.4.6.5.

1226.4.2.6 Noise reduction. The noise reduction criteria shown in Table 1224.4.19 shall apply to partitions, floors, and ceiling construction in patient treatment areas.

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1226 CLINICS

1226.5.11 Gastrointestinal endoscopy.

...

1226.5.11.6.8 Housekeeping room. Refer to Section ~~1224.39.2, Item 7~~ [1224.39.2.3.2](#).

...

1226.6.1.4 Oral surgery. When provided, treatment areas for procedures for which general anesthesia is used, on more than five patients at a time shall comply with the requirements in Section 1226.8.

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1228 ACUTE PSYCHIATRIC HOSPITALS

1228.4.4.2 ~~Administrative center(s) or nurse station(s).~~ Refer to Section 1224.4.4.2. Reserved.

...

1228.4.8 Doors and door openings. Refer to Section 1224.4.8 with the following modifications and amendments:

1. Where indicated by the Patient Safety Risk Assessment, toilet room doors shall be equipped with keyed locks that allow staff to control access to the toilet room.
2. Use of door closers is to be avoided unless required by other sections of this code.
3. Door hinges shall be designed to minimize accessible anchor points (e.g., cut hinge type, piano hinge, concealed hinge, etc.).
4. Except for specifically designed ligature-resistant hardware, door lever handles shall point downward when in the latched and in the unlatched position.
5. All hardware shall have tamper-resistant fasteners.
6. Soft doors may be used for patient room toilets where indicated in the Patient Safety Risk Assessment.

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1228 ACUTE PSYCHIATRIC HOSPITALS

1228.13.2 Physical therapy service space. ~~Where provided, the~~ The physical therapy service space shall comply with Section 1224.35.2.

1228.13.3 Occupational therapy service space. ~~Where provided, the~~ The occupational therapy shall comply with Section 1224.35.3, items 1, 2 and 3. ~~Eliminates ADL item 4.~~

1228.13.4 Speech pathology and/or audiology service space. ~~Where provided, the~~ The speech pathology service space shall comply with Section 1224.35.4.

...

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1228.14 PSYCHIATRIC SERVICE SPACE

1228.14.1.2 Space requirements. Patient bedrooms shall have a minimum clear floor area of ~~400~~ 110 square feet (~~9-29~~ 10.2 m²) for single-bed rooms and 80 square feet (7.43 m²) per bed for multiple-bed rooms.

...

1228.14.2.12 Equipment and supply storage. Appropriate room(s) shall be provided for storage of equipment necessary for patient care. Each unit shall provide not less than 15 square feet (1.39 m²). ~~Equipment and supply storage is required, refer to Section 1224.14.2.12. Location of the storage areas shall not present a risk to the patient population as indicated in the functional program.~~

~~**1228.14.2.13 Gurneys or wheelchairs.** Storage for gurneys or wheelchairs is required, refer to Section 1224.14.2.13. Storage areas may be located within the nursing unit or outside but readily accessible to the unit.~~

...

1228.20 DIETETIC SERVICE SPACE. Refer to Section 1224.20, Dietetic Service Space for requirements, as modified below:

1228.20.1 Dining area. Provide dining space(s) for ambulatory patients, staff, and visitors. ~~Separate~~ Provide patient dining room(s) of 20 square feet (1.86 m²) per patient bed separate from staff dining ~~shall be provided.~~ These spaces shall be separate from the food preparation and distribution areas

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1228.23 STORAGE. *Refer to Section 1224.23, Storage, for requirements and the additional requirements below:*

1228.23.1 General storage. *Hospitals shall provide general storage space of at least 10 square feet (0.93 m²) per bed in addition to specialized storage spaces. All storage spaces shall be located within the hospital building and readily accessible to the connecting corridor required under Section 1224.4.7.5.*

1228.23.2 Specialized storage. *Specialized storage spaces shall include the following:*

1224.23.2.1 Linen. *Provide separate and enclosed facilities for clean and soiled linen in each nursing unit. The clean linen storage space shall have a minimum area of 10 square feet (0.93 m²) and may be within the clean utility room. The soiled linen collection space shall have an area of no less than 10 square feet (0.93 m²), except where linen chutes are provided, and may be within the soiled utility room.*

1224.23.2.2 Supply. *One supply storage space having a minimum area of 1 square feet (1.39 m²) shall be provided in each nursing unit. Supply storage may be within the clean utility room used only as part of a system for distributing clean and sterile supplies.*

1228.23.2.3 Wheelchairs. *A room or space shall be provided in each nursing unit for wheelchairs. Wheelchair storage areas may be located within the nursing unit or outside but readily accessible to the unit. The wheelchair space shall have a minimum area of 15 square feet (1.39 m²).*

1224.23.2.4 Sterile and unsterile supplies shall be stored separately.

1224.23.2.5 Food storage shall be as described in Section 1224.20.

1228.23.13 Patient storage facilities. *A staff-controlled secured storage area shall be provided for patient's effects that are determined to be potentially harmful (e.g., razors, nail files, cigarette lighters).*

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1228.30.5 Education. *If a unit treats children of school age over a period of one month or more, it shall provide physical facilities for an educational program, such as classrooms and an office for the teacher.*

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CHAPTER 15 ROOF ASSEMBLIES AND ROOFTOP STRUCTURES

(Formerly 1510.7.2)

1511.9 Photovoltaic (PV) panel systems. [OSHPD 1, 1R, 2, 4 & 5] Rooftop-mounted photovoltaic panels and modules shall be listed and labeled in accordance with UL 1703 or with both UL 61730-1 and UL 61730-2 and shall be installed in accordance with the manufacturer's instructions.

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