
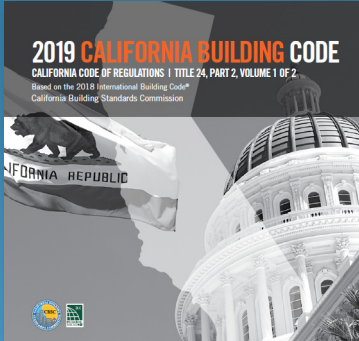



OSHPD 3 Primary Care Clinics - The What, When and How



Part 1: August 24, 2021
Part 2: August 31, 2021

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OSHPD is now HCAI

Department of Health Care Access and Information

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OSHPD 3 Primary Care Clinics - The What, When and How

Part 1 – August 24, 2021

- **Introductions**
- **What**
 - Jurisdictions and relationships relevant to opening a new health center or renovating a clinic
 - What is OSHPD 3
 - When it is required
 - Review HSC 1200 clinic types
 - What is required
 - Clinic Plan Review Options
- **When**
 - Evaluating Facilities
 - Mixed Use
 - Air Return
- **How**
 - CBC 1226
 - Required documentation
 - Expected Timelines

Part 2 – August 31, 2021

- Evaluating Facilities
- Submittal and Plan Review – more specific to PCCs
 - Engaging local jurisdiction
- Plan of Modernization
- CDPH Form '270
 - Best Practices to prevent delays
- Resources Available
 - **CAC**
 - Review OSHPD 3 Checklist
 - Recent changes made through CAC and code revision cycle
- Common Challenges
 - i.e. toilet requirements

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OSHPD 3 - Clinics

Part 1: CBC Architectural & Accessibility

Application of OSHPD requirements

- Clinics licensed by the California Department of Public Health
- Building Standards Development & Enforcement


2019 California Building Code

- Chapter 12, Section 1226
- Chapter 11B, Section 11B-805

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California Primary Care Association



Facilities Development
Division

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California Primary Care Association

Who We Are

Statewide leader designated by the Federal Bureau of Primary Health Care as the state primary care association and receives federal program support to develop and enhance services for clinics. Community Health Centers improve the health of patients and communities by increasing access to crucial primary care services. They do this by reducing significant barriers such as cost, lack of insurance, distance, and language for patients.

Mission

To lead and position community clinics, health centers, and networks through advocacy, education and services as key players in the health care delivery system to improve the health status of their communities.

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Community Clinics Advisory Committee (CAC)

- Called for in [HSC §1226\(b\)](#), to provide input on minimum facility standards for primary care clinics
- Committee was dormant, but in late 2019 CPCA staff worked to convene the CAC with OSHPD
- CPCA nominated a list of CHC leaders and technical experts to represent our health centers on the CAC
- Meets with OSHPD quarterly to identify and discuss various building standard challenges with the goal of streamlining existing requirements with the operations and services of a community health center (CHC), beginning with the 2022 Triennial code cycle

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How can CPCA help you?

Contact:
Elle Grant, MS-HCA
Senior Program Coordinator
Licensing & Provider Enrollment
egrant@cpcacpa.org

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CDPH vs OSHPD

CDPH:

- Evaluates Program & Operations
- Conducts Surveys
- Issues OSHPD 3 License


OSHPD:

- Promulgates Building Regulations
- Reviews Construction Drawings for OSHPD 3 Certification **upon Request**

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OSHPD 3 vs OSHPD 1R

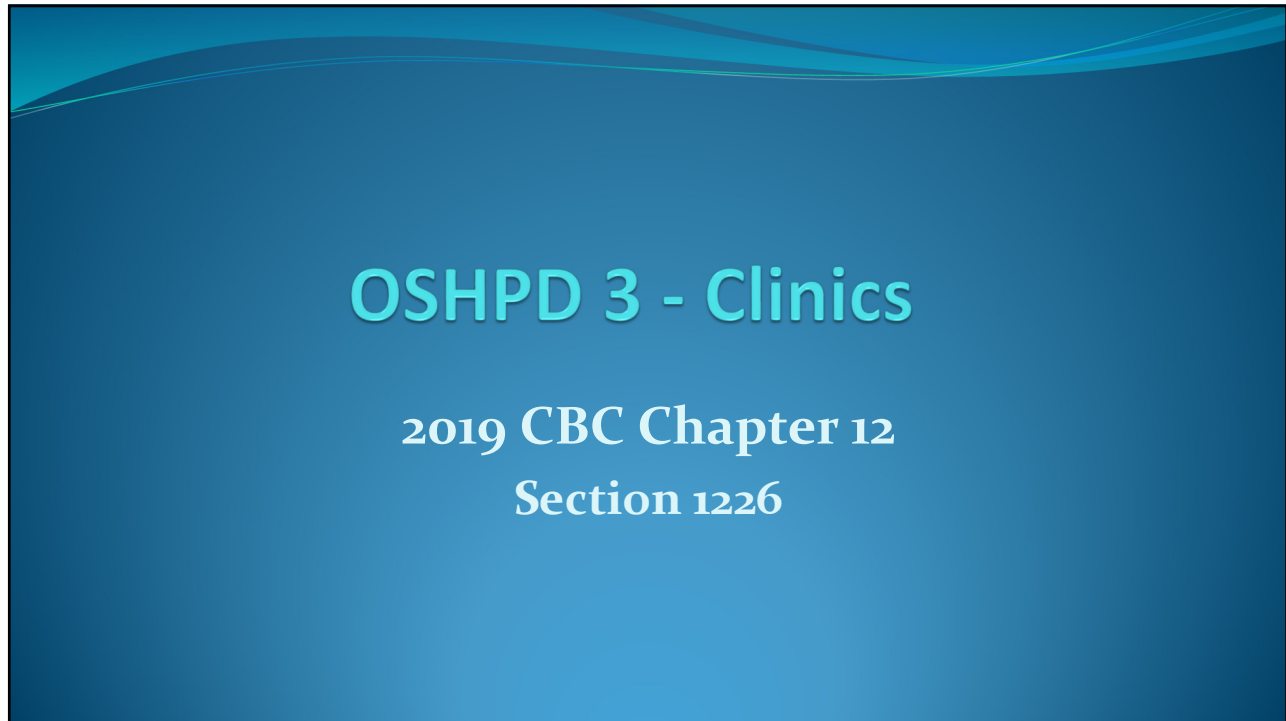
<p>OSHPD 3:</p> <ul style="list-style-type: none">➤ <i>The provisions of this section shall apply to primary care clinics, specialty clinics, and psychology clinics, licensed by the California Department of Public Health.</i>➤ <i>Primary care clinics include free clinics, community clinics, employee clinics and optometric clinics.</i>➤ <i>Specialty clinics include surgical clinics, chronic dialysis clinics, rehabilitation clinics and alternative birth centers (ABC).</i>➤ <i>This section shall also apply to outpatient clinical services of a hospital when provided in a freestanding building.</i>	<p>OSHPD 1R:</p> <ul style="list-style-type: none">➤ <i>Nonconforming hospital buildings that have been removed from acute care service.</i>➤ <i>Can have non-healthcare occupancies</i>➤ <i>Remain in OSHPD jurisdiction</i>
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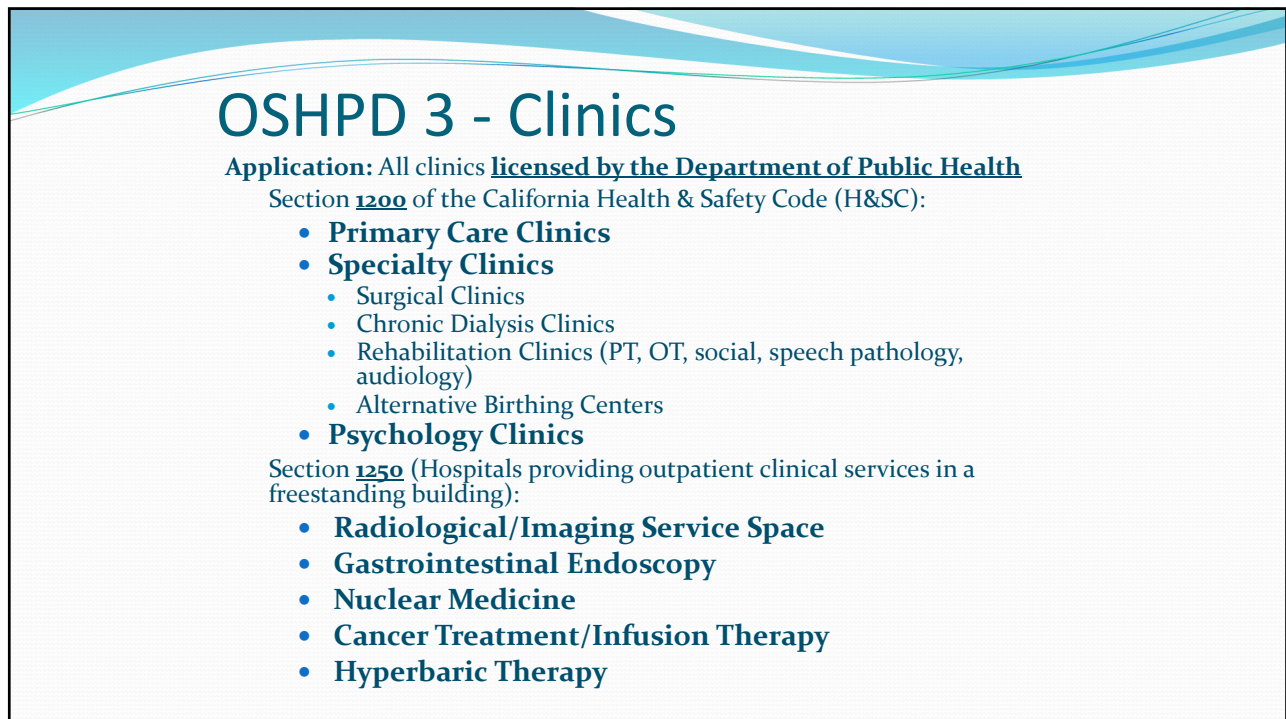
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The What

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OSHPD 3 - Clinics

CBC Section 1.10 – Office of Statewide Health Planning and Development

Section 1.10.3 - OSHPD 3

Application – Licensed clinics and any freestanding building under a hospital license where outpatient clinical services are provided.

Enforcing Agency – Local building department.

Applicable administrative standards – Part 1, Chapter 7, & Part 2, Section 1.10.

Applicable building standards – California Building Standards Code, Title 24, Parts 2, 3, 4, 5, 6, 9, 10 and 11 **including** all amendments with the acronym [OSHPD 3].

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OSHPD 3 - Clinics

OSHPD Code Application Notice (CAN) 1-7-2100 Clinics:

Title 24 Part (1) - California Administrative Code, Chapter (7) - Safety Standards for Health Facilities, Section (2100) - Plan Review, Building Inspection and Certification of Surgical Clinics, Chronic Dialysis Clinics and Outpatient Services Clinics.

OSHPD 3 requirements for clinics **only apply to clinics that are licensed** by the Department of Public Health (DPH), either pursuant to H&SC Section 1200 or Section 1250. Code enforcement is under the local building department, except:

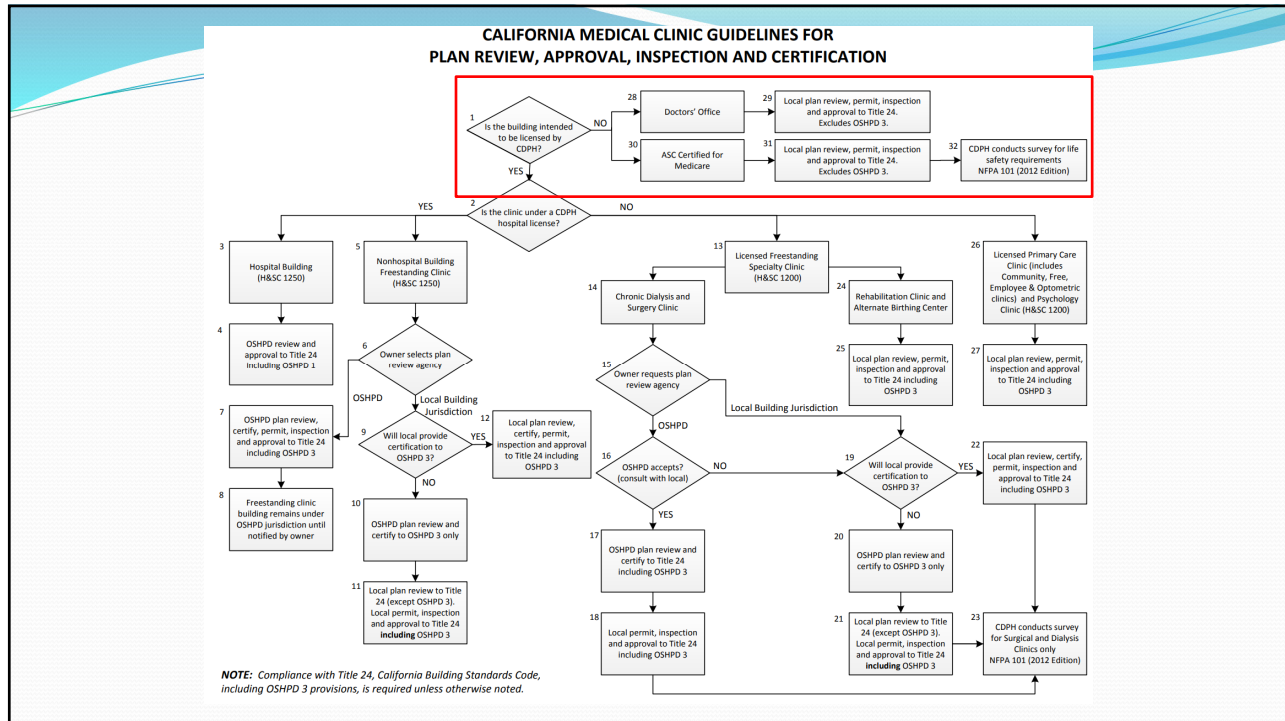
- Owners may request surgical or dialysis clinics or hospital outpatient services be reviewed by OSHPD
- Local building departments may request surgical or dialysis clinics or hospital outpatient services be reviewed by OSHPD
- OSHPD will review these clinics for compliance with OSHPD 3 requirements only. The local building department will still review for the balance of CBSC requirements and is responsible for permitting, field inspections and final inspection/Certificate of Occupancy

Follow the Flow Chart

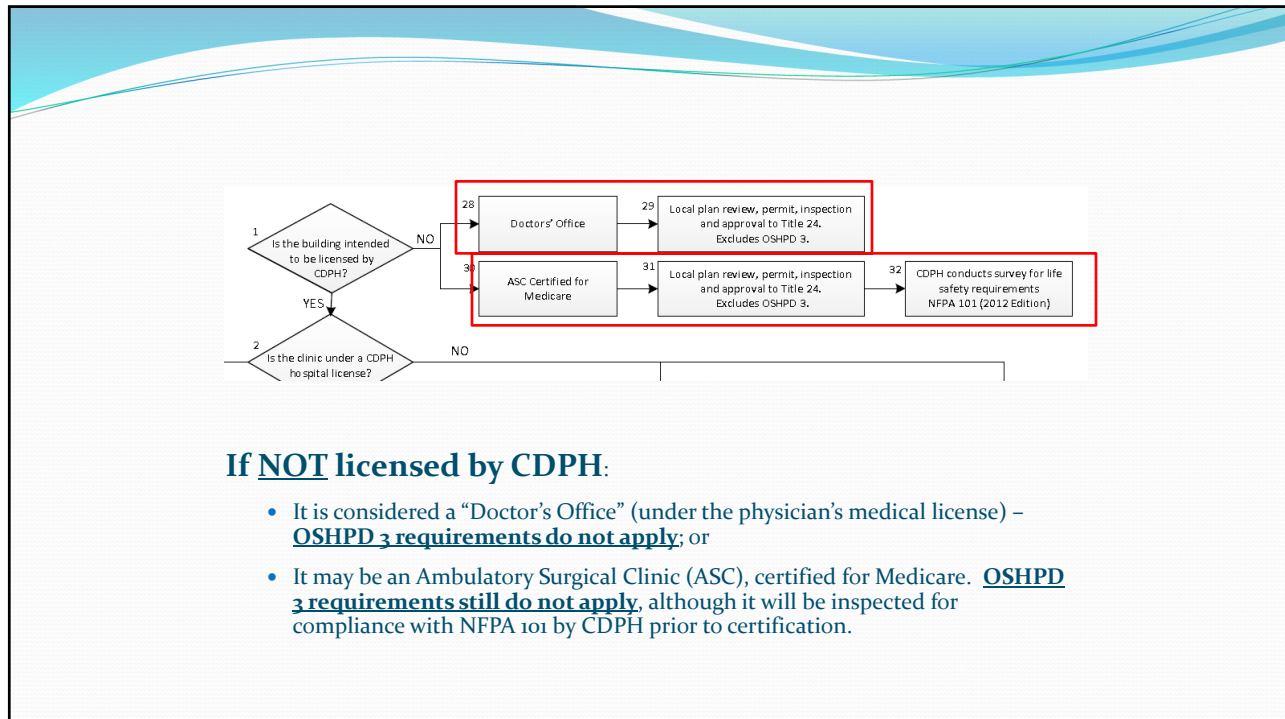
Will the clinic be licensed by the Department of Public Health?

- If Yes, is that license a 1250 Hospital license or a 1200 Clinic license?
- If Not, the “clinic” is not subject to OSHPD 3 requirements.

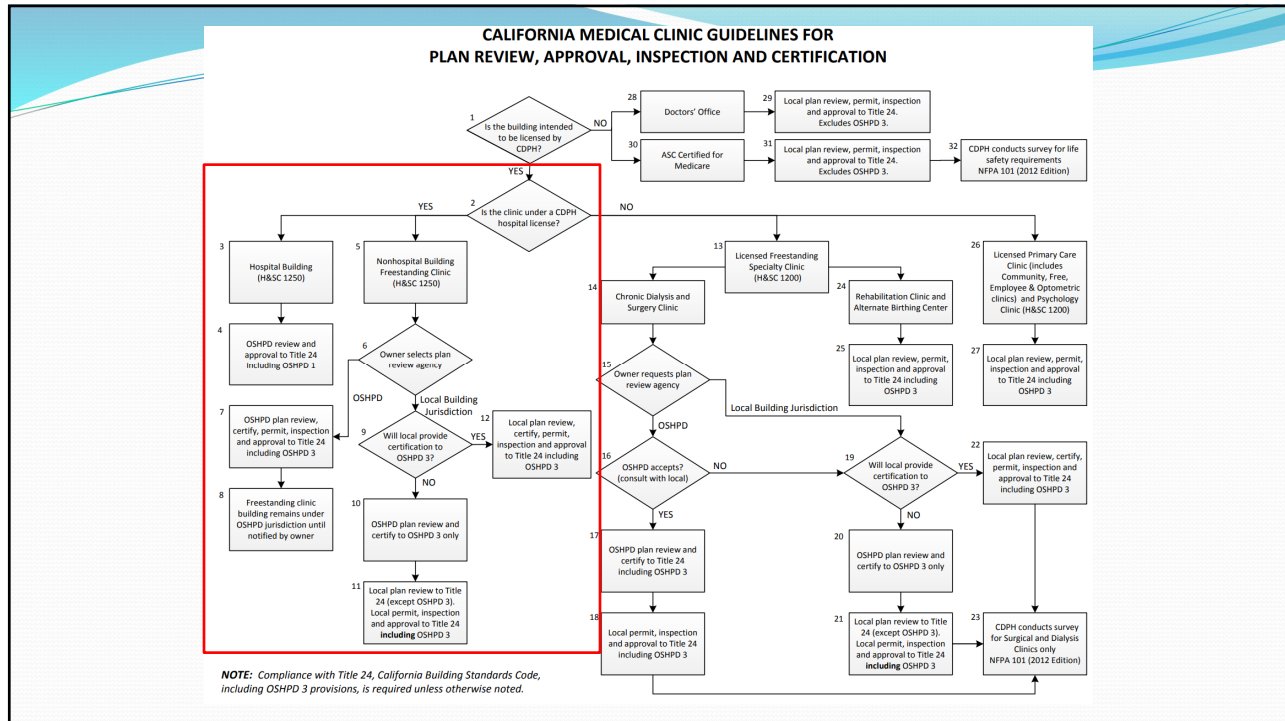
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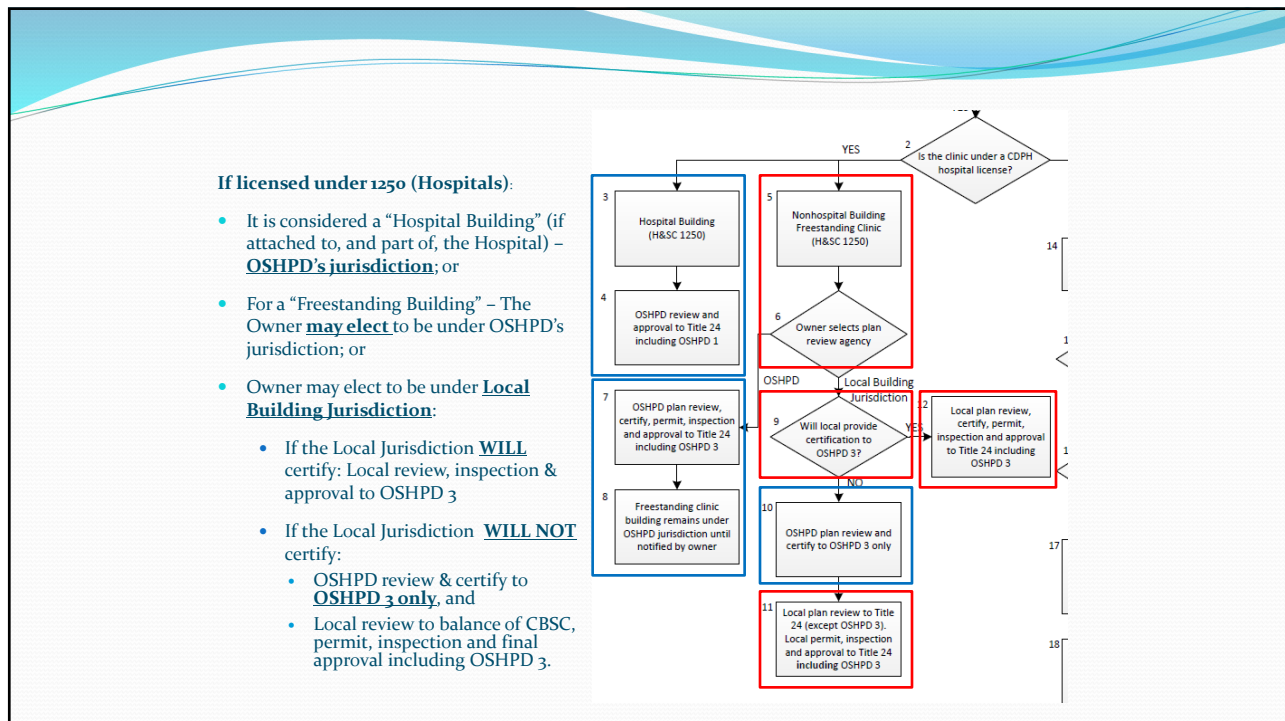
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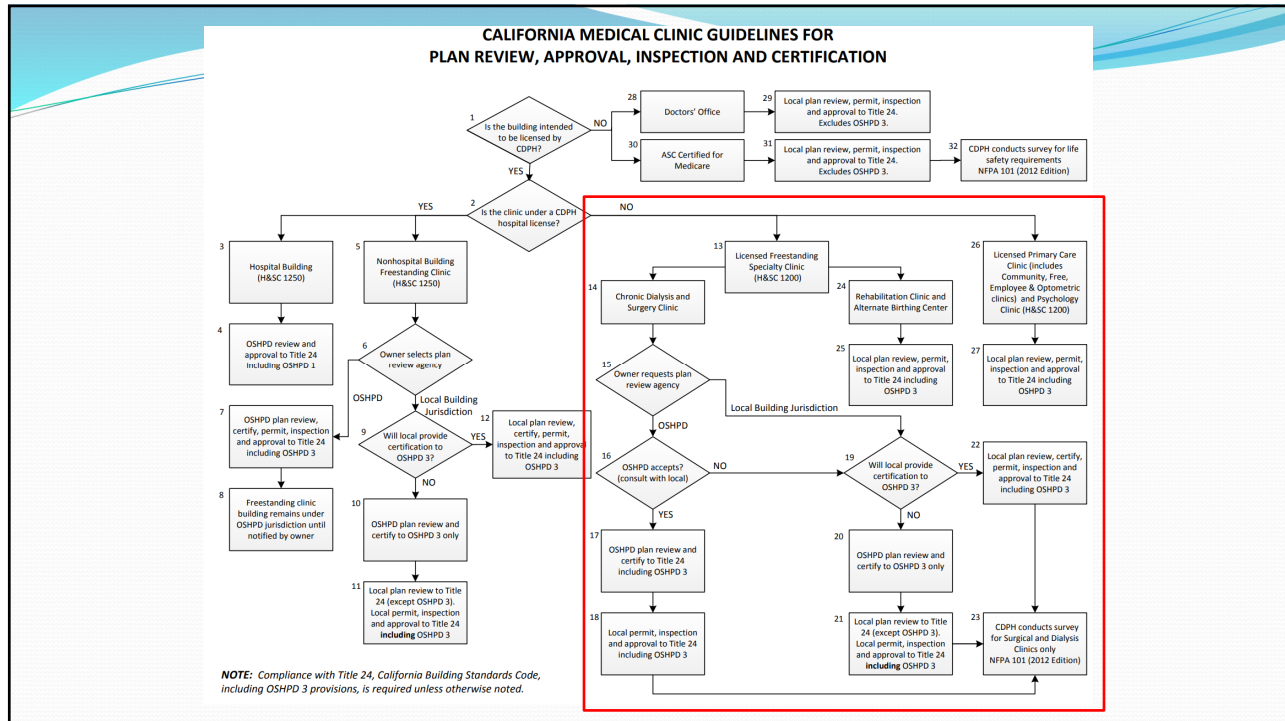
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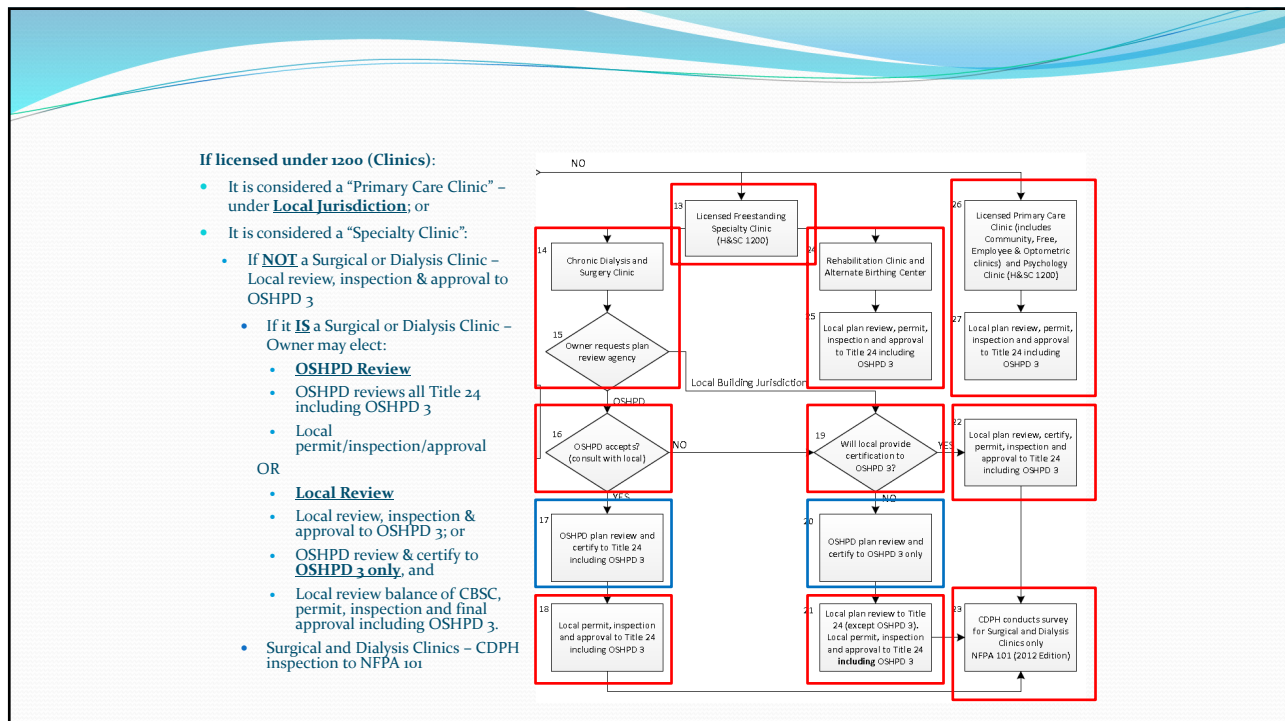
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Outpatient Services of a Hospital

Health & Safety Code Section 129885 requires that Hospital Clinical Services provided in freestanding outpatient buildings have the same functional requirements and support as those provided for comparable services provided by Licensed Clinics.

For example:

Surgery Outpatient Surgery In a Hospital Building OSHPD-1 is	Surgery Outpatient Surgery of a Hospital in a Freestanding Building OSHPD-3 is	Surgery Outpatient Surgery In Surgical Center Specialty Clinic OSHPD-3
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Tied to CMS reimbursements for Services provided.

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The When

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When to look at OSHPD 3 Requirements

- **Now!**
 - **Get familiar with requirements**
 - OSHPD 3
 - CDPH Licensing



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When to look at OSHPD 3 Requirements

- **Now!**
 - **Get familiar with requirements**
 - OSHPD 3
 - CDPH Licensing
 - **Buyer beware**
 - **Survey proposed space before signing a lease or making purchase**
 - What upgrades are required?
 - What is currently compliant
 - Architectural Space
 - Toilets
 - Exam Rooms
 - Support Spaces
 - Plant Utilities
 - HVAC
 - Waiting Room

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When to look at OSHPD 3 Requirements

- Ask the questions
- Answer the questions
 - If asked if you need OSHPD 3 and don't know - pause



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Plan of Modernization

What is it?

HEALTH AND SAFETY CODE

Section 1217

1217. (a) An applicant for a license to operate a primary care clinic, as specified in subdivision (a) of Section 1204 that meets all requirements for licensure under this chapter, except that it proposes to operate its clinic out of an existing facility that does not satisfy all of the applicable building requirements for the physical plant, other than fire and life safety requirements, shall be issued a license by the state department if both of the following requirements are met:

- (1) The applicant establishes, by evidence satisfactory to the state department, that, where possible and feasible, the applicable building requirements have been met.
- (2) The applicant submits a plan of modernization acceptable to the state department that sets forth the proposed changes to be made, during a period not to exceed three years from the date of initial licensure, to bring the applicant's facility into substantial conformance with applicable building requirements.

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Plan of Modernization

What is it?

HEALTH AND SAFETY CODE

Section 1217

(b) **Failure to complete the plan of modernization** as approved and within the time allowed shall constitute a basis for **revocation or nonrenewal of the applicant's license** unless the applicant earlier applies for and obtains a waiver from the department. The director shall waive building requirements for primary care clinics where he or she determines all of the following conditions are met:

- (1) That the requirements cannot be met by an applicant, or that they can be met only at an unreasonable and prohibitive cost.
- (2) That the requirements are not essential to protect the health and safety of the clinic staff or the public it serves.
- (3) That the granting of the waiver applied for is in the public interest.

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Plan of Modernization

Example for a
Primary Care Clinic
OSHPD 3 Compliance Report &
Modernization Plan

Prepared for:
A Primary Care Clinic
Date:



RegsUnit@oshpd.ca.gov

Primary Care Clinic
Address:
OSHPD 3 Assessment

GENERAL OVERVIEW

In 2015, a Construction company built a single-story 10,000 square foot new commercial building at this address. The new building has space to house three tenants two of the spaces are designed to be health clinics and the center clinic is leased by a Primary Care Clinic which hired Architects to evaluate the OSHPD 3 compliance of the current facility and we have found the facility is deficient. The recent construction Primary Care Clinics (OSHPD 3). The following is a series of steps we plan on taking to remedy the areas of non-compliance:

- In August of 2020, a Primary Care Clinic hired Architects to assess OSHPD 3 requirements not currently designed and/or constructed within the new commercial of the H&SC (Section 1226 of the CBC).
- The Primary Care Clinic understands that a Modernization Plan (H&SC Section 1217) must be established as a commitment to CDPH & OSHPD to California Code of Regulations.
- For the Primary Care Clinic, to receive CDPH licensure, the understanding with both OSHPD & CDPH mandates the clinic Patient Waiting Room meet the OSHPD 3 - HVAC requirements per 2019 CMR, section 407.0 as a Phase 1 mitigation priority. Phase 2 and subsequent phases will be to commit to bringing the Primary Care Clinic into full compliance with OSHPD-3 within 3 years of receiving CDPH licensure.
- The Architects develop and receives approval from OSHPD on the Modernization Plan document.
- For Phase 1, the Architects Mechanical Engineer design and submits a proposed upgrade to the Patient Waiting Room HVAC. Once the new HVAC unit is installed a copy of the final air balance report, stamped and signed by MECC is required. The Certificate of Occupancy is issued, and Phase 1 will be complete.

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Plan of Modernization

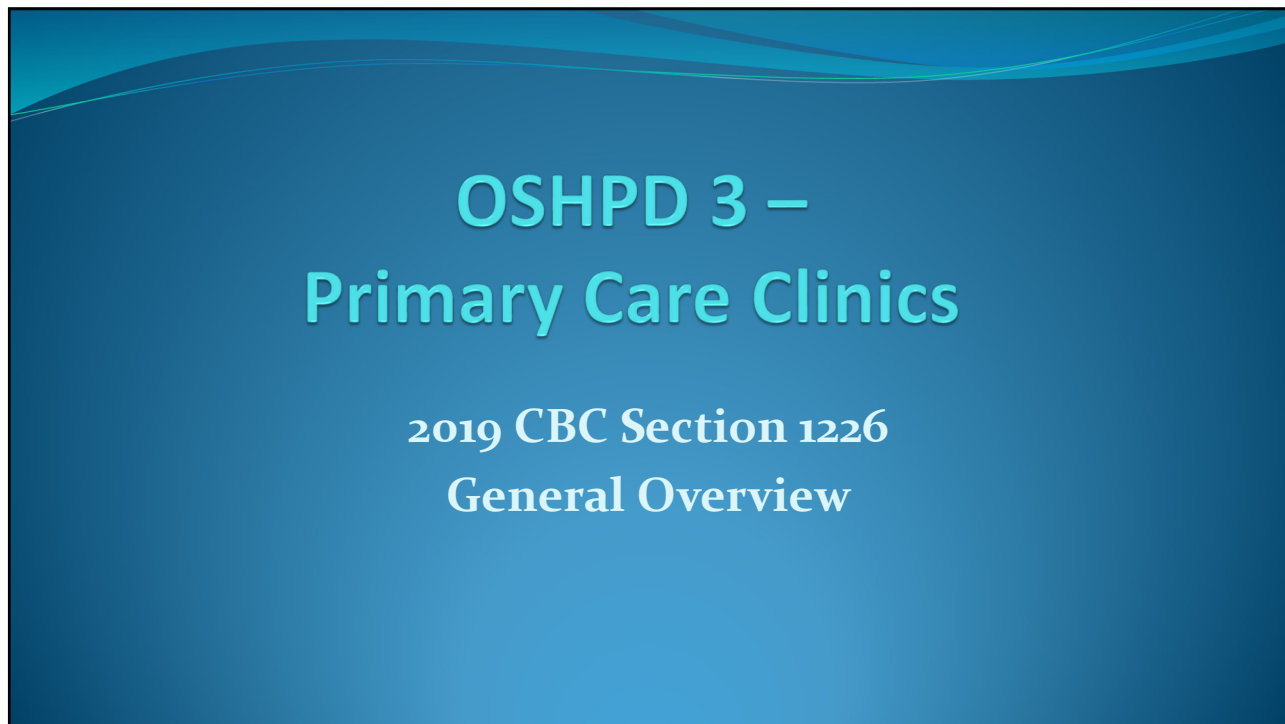
2019 CBC Architectural	REQUIREMENT	Does Clinic Suite Comply? Y/N	COMMENT	COST OPINION
1226.4.9	Garbage, solid waste, medical waste and trash storage			
1226.4.13	Support areas for examination and treatment rooms			
1226.4.13.5	Sterile and pharmaceutical supply storage: <i>shall be provided</i>	N	Clean utility room and medication preparation area to be added	\$24,000
1226.4.13.6.1	Storage: -Shall provide space for the storage of disposable sterile supplies.	Y		
1226.4.16	Public and administrative areas.			
1226.4.17.3	Staff lounge: <i>when provided</i> -adequate space to accommodate staff	Y		
1226.6	Primary Care Clinics			
1226.6.1 (1226.4.1)	Examination area			
1226.6.1.1 (1226.4.1.3 & 1224.4.4.1)	Examination room: -minimum clear floor space of 80 sf and least room dimension of 8' -room must contain hand washing fixture	Y		
1226.6.1.2 (1226.4.1.2 & 1224.4.4.1)	Treatment rooms: -minimum area of 120 sf, the least dimension of which shall be 10', excluding spaces such as vestibules and work counters.	N	Remove treatment rooms from the program and replace with additional exam room and storage.	\$10,800
1226.6.2 (1226.4.13)	Support areas for examination rooms			
1226.6.2.1 (1226.4.13.1)	Administrative center(s) or nurse station(s):	Y		

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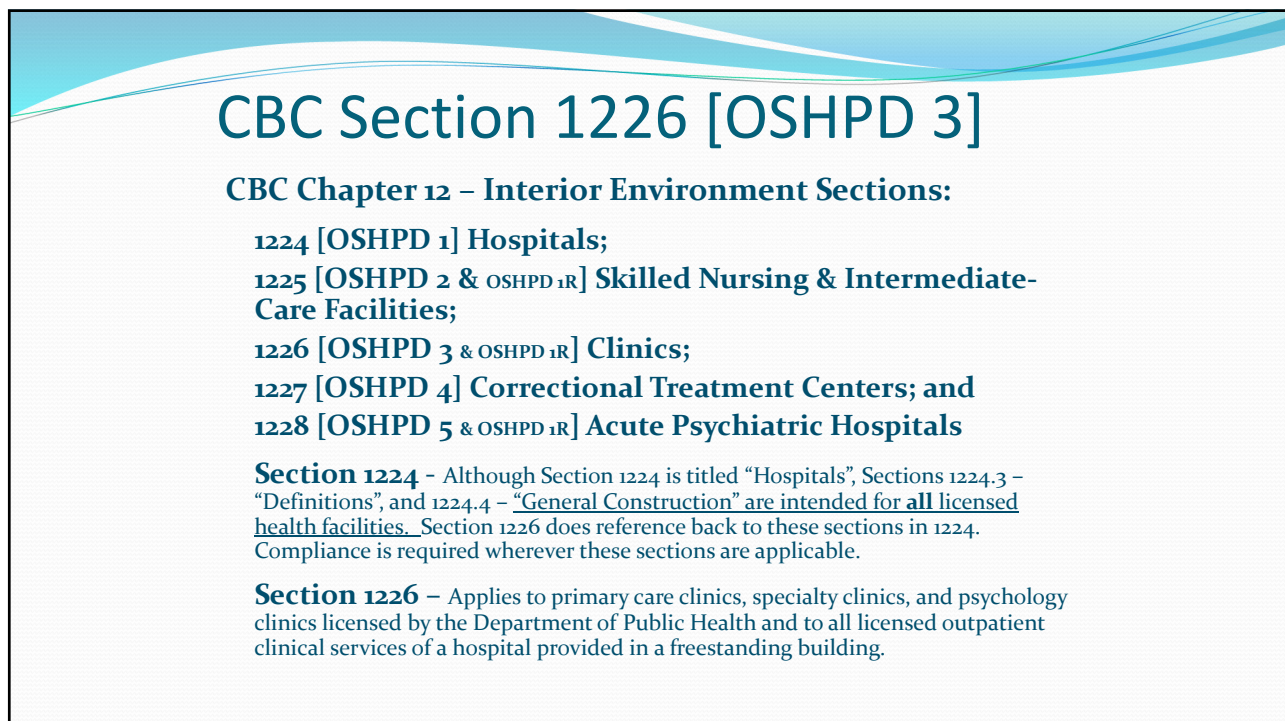
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The How

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CBC Section 1226 - Overview

Section 1226.3 & 1226.4 – General construction (wherever applicable for all types of clinics):

Section 1226.5 Outpatient Services of a Hospital

General Support areas

Radiological/Imaging Service Space

Gastrointestinal Endoscopy

Nuclear Medicine

Cancer Treatment/Infusion Therapy

Hyperbaric Therapy

Section 1226.6 Primary Care Clinics

Section 1226.8 Surgical Clinics

Section 1226.9 Chronic Dialysis Clinics

Section 1226.10 Rehabilitation Clinics

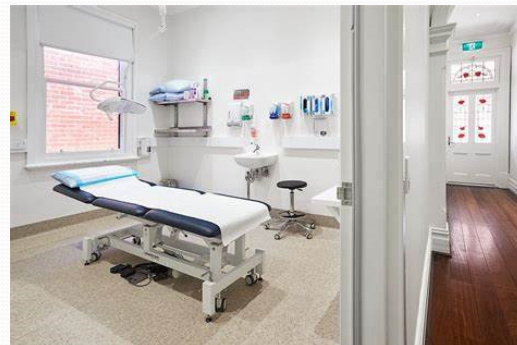
Section 1226.11 Alternative Birthing Clinics

Section 1226.12 Psychology Clinics

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CBC Section 1226 - General

Exam and Treatment Rooms



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CBC Section 1226 - General

Section 1226.3 – Definitions: refer to Section 1224.3

Section 1226.4 – General construction (wherever applicable):

Section 1226.4.1 Examination rooms– reference to 1224.4.4.1.1: *minimum clear floor area of 80 square feet, the least dimension of which shall be 8 feet. The room shall contain a handwashing fixture and accommodations for written or electronic documentations shall be provided.*

Floor Area, Clear – *The actual occupied area exclusive of fixed or wall-mounted cabinets, built-in shelves, toilet rooms, closets, lockers, wardrobes, alcoves, anterooms or vestibules.*

Note: an area with a dimension less than 7 feet is considered an alcove off the main area and is not considered part of the required clear floor area. (CBC 1207.1)

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CBC Section 1226 - General

1226.4.1 Examination and treatment areas

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, the least dimension of which shall be 10 feet. A minimum of 3 feet 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, work counter for medical equipment, a handwashing station, cabinets, medication storage and counter for writing or electronic documentation.*

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CBC Section 1226 - General

**TABLE 1224.4.11
ACCEPTABLE CEILING AND CARPET LOCATIONS**

AREAS/ROOMS ^{1,4}	GENERAL ACUTE CARE HOSPITAL CEILING/CARPET		ACUTE PSYCHIATRIC HOSPITAL CEILING/CARPET		SKILLED NURSING AND INTERMEDIATE-CARE FACILITIES CEILING/CARPET		CLINIC CEILING/CARPET	
Patient bedrooms	3	*	3	*	3	*	—	—
Patient corridors/hallways	3	*	3	*	3	*	3	*
Airborne infection isolation rooms	2	N	2	N	2	N	2	N
Protective environment rooms	1	N	1	N	1	N	-	-
Nurses' or administration station	3	Y	3	Y	3	Y	3	Y
Utility rooms	2	N	2	N	2	N	2	N
Surgical units ²	2	N	—	—	—	—	2	N
Operation rooms	1	N	—	—	—	—	1	N
Surgical corridors/hallways	2	N	—	—	—	—	2	N
Recovery	3	N	—	—	—	—	3	N
Radiological unit ²	3	*	3	*	—	—	3	—
X-ray rooms ³	3	N	3	N	—	—	3	N
Treatment rooms ²	2	N	3	N	2	N	2	N
Examination rooms	3	*	3	*	3	*	3	*
Administration	4	Y	4	Y	4	Y	4	Y
Central sterile supply	2	N	2	N	2	N	2	N

Ceilings:

1 - Continuous monolithic surface equal in smoothness to enamel plaster.

2 - Smooth and easily cleanable without perforations or fissures.

3 - Pin perforated, fine fissured, or highly textured.

4 - Any finish meeting code requirements.

Carpets:

Yes = Y

No = N

* Upon approval by the licensing agency with adequate maintenance procedure. However, should the carpet not be maintained adequately, the licensing agency has the right to have it removed and replaced with another acceptable material.

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CBC Section 1226 - General

Miscellaneous requirements

1226.4.2.1 Station outlets – reference to 1224.4.6.1 (Table 1224.4.6.1)

1226.4.2.2 Gas & vacuum requirements – refer to 1224.4.6.2 (design & installation per NFPA 99)



**TABLE 1224.4.6.1
STATION OUTLETS FOR OXYGEN, VACUUM (SUCTION), AND MEDICAL AIR⁶**


LOCATIONS	OXYGEN	VACUUM	MEDICAL AIR
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	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/bassinets	3/bassinets	3/bassinets
10 Newborn nursery (full term)	1/4 bassinets ²	1/4 bassinets ²	1/4 bassinets ²
11 Pediatric and adolescent	1/bed	1/bed	1/bed
12 Pediatric nursery	1/bassinets	1/bassinets	1/bassinets
13 Psychiatric patient room	—	—	—
14 Seclusion/treatment room	—	—	—
15 General operating room	2/room	3/room	—

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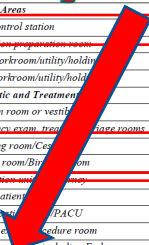
CBC Section 1226 - General

Miscellaneous requirements

1226.4.2.5 Nurse call systems –



Not required for
Primary Care Clinics



AREA DESIGNATION	STATION TYPE	1224	1225	1226	1227	1228
Nursing Units						
Patient toilet room	B	*	*	*	*	*
Patient bathing	B	*	*	*	*	*
Spinal casting	EC	*	*	*	*	*
Patient bed (nursing)	P.E.C	*	*	*	*	*
Patient bed (intensive care)	P.E.C	*	*	*	*	*
Patient bed (LDR/LDRP)	P.E.C	*	*	*	*	*
Patient bed (Dementia Unit)	P	*	*	*	*	*
Operating room	E.C	*	*	*	*	*
Nursery	E.C	*	*	*	*	*
Support Areas						
Nurse/control station	M	*	*	*	*	*
Medication preparation room	D	*	*	*	*	*
Soiled workroom/utility/holding	D	*	*	*	*	*
Clean workroom/utility/holding	D	*	*	*	*	*
Diagnostic and Treatment						
Seclusion room or venting	E	*	*	*	*	*
Emergency room/treatment/prep rooms	P.E	*	*	*	*	*
Operating room/Ceiling	E.C	*	*	*	*	*
Delivery room/Birth room	E.C	*	*	*	*	*
Observation room	P.E.C	*	*	*	*	*
Pre-op patient	P.E.C	*	*	*	*	*
Post-op patient/PACU	P.E.C	*	*	*	*	*
Imaging and procedure room	E.C	*	*	*	*	*
Procedure room, including Endoscopy	E.C	*	*	*	*	*
Patient toilet room	B	*	*	*	*	*
Electroconvulsive therapy	E.C	*	*	*	*	*

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CBC Section 1226 - General

Corridors

1226.4.3.1 Outpatient services – refer to 1224.4.7.3 (5-foot width general, 44” width if exam rooms only)

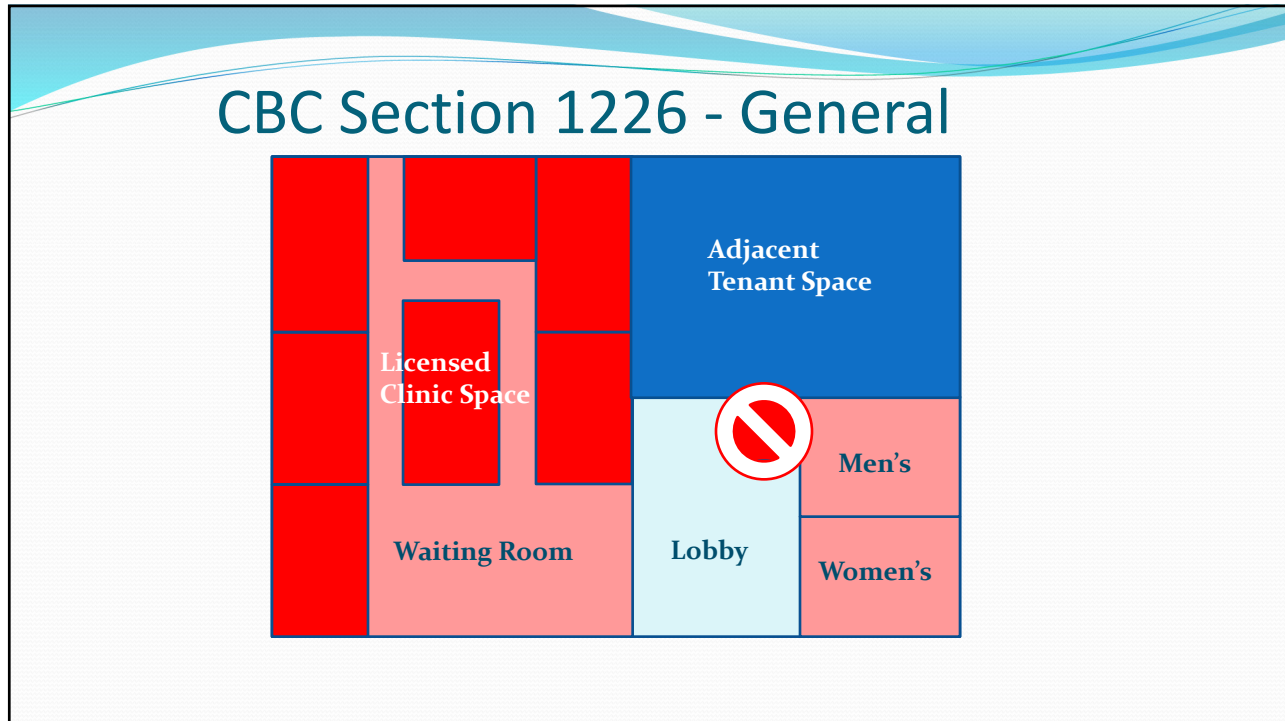
1226.4.3.2 Corridor width: For clinics with bed/gurney patients refer to Section 1224.4.7.1 – The minimum width of corridors and hallways shall be 8 feet.

1226.4.3.5 Contiguous functions. Basic services of a single licensed clinic may be located in separate suites. Each clinic suite shall be contiguous and include internal circulation to access each of the required functions identified for that basic service.

Exceptions:

1. Various functions including, but not limited to reception, waiting, staff support areas such as toilets, storage and lounge may be located outside of the clinic suite with approval from CDPH.
2. If toilets and drinking fountains serving the public area are provided as part of the overall building features, they need not be provided within the clinic suite.
3. Shared services. Space for general storage, laundry, housekeeping and waste management may be shared with other tenants.

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CBC Section 1226 - General

Doors and Windows

1226.4.4.1 (Patient) Toilet room doors – refer to 1224.4.8.1: *Doors to toilet rooms shall have an opening of not less than 32" clear in width and shall be equipped with hardware which will permit the door to swing outward or in a manner to negate the need to push against a patient who may have collapsed within the toilet room.*

1226.4.4.2 Pocket doors. *Pocket sliding doors are not permitted.*

Exception: *Administration and business areas.*

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CBC Section 1226 - General

Garbage, solid waste, medical waste and trash storage

1226.4.9.1 Location – A location shall be provided for waste collection and storage with sufficient space based upon the volume of projected waste and length of anticipated storage. The location of compactors, balers, sharps containers, and recycling container staging at docks or other waste removal areas shall comply with Section 1224.4.2. [remote from patient care areas]

1226.4.9.2 Enclosure – A lockable room or screened enclosure of at least 25 square feet shall be provided for the washing and cleaning of garbage containers and for the storage of garbage, trash and other solid wastes:

- Concrete floor and curb with a drain to sewer
- Steam or hot water and cold water supplies in accordance with the CPC
- 25 square feet and minimum 4 foot dimension. Size may be modified by the local enforcing agency.

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CBC Section 1226 - General

Garbage, solid waste, medical waste and trash storage

1226.4.9.3 Waste holding room – *As an alternate*, a holding room for medical waste and garbage may be provided:

- Minimum dimension of 25 square feet, with the least dimension of which is 4 feet.
- 100 % exhaust ventilation
- All finishes shall comply with 1224.4.11 [wet cleaning]
- Waste holding shall immediately accessible to an exterior door.

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CBC Section 1226 - General

Support areas for examination and treatment rooms



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CBC Section 1226 - General

1224.3 Definitions

LOCATION TERMINOLOGY

IN: Located within 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.

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

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 area.

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.

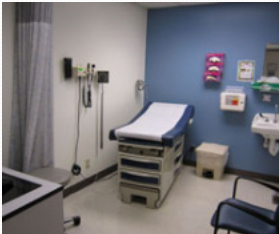


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OSHPD 3 - Clinics

2019 CBC Section 1226.6 Primary Care Clinics (H&S Code Section 1200)

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CBC Section 1226.6 – Primary Care Primary Care Clinics



*1226.4.3 Corridors.
1226.4.4 Doors and door openings.
1226.4.5 Windows.
1226.4.6 Ceiling heights.
1226.4.7 Interior finishes.
1226.4.8 Elevators.*

1226.6 PRIMARY CARE CLINICS. *Primary care clinics and outpatient clinical services of a hospital providing services equivalent to a primary care clinic shall comply with Sections 1226.4.3 through 1226.4.8 and the provisions of this section.*

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CBC Section 1226.6 – Primary Care

Primary Care Clinics - The following are required:

1226.6.1.1 Examination rooms – refer to 1224.4.4.1: Examination or treatment room – 80 square feet with the least dimension of 8 feet, shall contain a handwashing fixture.

1226.6.1.2 Treatment room(s) – Treatment room(s) for minor procedures (e.g. minor surgical procedures, casting), if provided, shall have a minimum area of 120 square feet, the least dimension of which shall be 10 feet, excluding such spaces such as vestibules and work counters, and shall meet the requirements in Section 1224.4.4.1 [handwashing fixture, etc.]

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CBC Section 1226 - General

Support areas for examination and treatment rooms

1226.4.13.1 Administrative center(s) (Nurse Stations): counters and storage, direct access to handwashing fixtures, may include reception, charting and communication.

1226.4.13.2 Medication station - either of the following:

- **Medicine preparation room or area:** entry under visual control of staff and shall include:
 - Work counter
 - Sink
 - Lockable refrigerator
 - Immediate access to handwashing station
 - Locked storage for biologicals and drugs [controlled immuno-proteins and medication]
- **Self-contained medicine-dispensing unit:** location shall be permitted in the clean utility room or the nurses' station; adequate security for medications and adequate lighting to easily identify drugs; immediate access to handwashing station.

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CBC Section 1226 - General

Support areas for examination and treatment rooms

1226.4.13.3 Clean Utility Room - shall contain:

- Work counter
- Handwashing fixture
- Storage facilities for clean and sterile supplies

If the room is used only for storage and holding **as part of a system** for distribution of clean and sterile materials, the work counter and handwashing fixture may be omitted. Soiled and clean utility rooms shall be separated and have no direct connection.

1226.4.13.4 Soiled Workroom - shall contain:

- Clinic sink (Exception: Primary-care Clinics w/ a utility sink or patient toilet equipped with bedpan flushing)
- Handwashing fixture
- Work counter
- Storage cabinets
- Designated area for waste receptacles
- Designated area for soiled linen receptacles

For temporary holding of materials, provision shall be made for separate collection, storage and disposal of soiled materials.

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CBC Section 1226 - General

1226.4.14 Support areas for patients

- Patient toilet rooms (separate from public use)
 - Accessible without passing through publicly accessible space
 - (1224.4.4.8.1) 32" min clear, swing outward to access collapsed patient
- Specimen and/or blood collection facilities – refer to Section 1224.4.4.2

1226.6.4 & 1226.4.15 General support services and facilities

- Areas for off-site laundry services

1226.4.16 Public and administrative areas

- Reception
- Outpatient waiting rooms – refer to Section 1224.4.5

1224.4.5 Outpatient waiting rooms

- Public corridor access
- Following shall be readily accessible:
 - Public toilets
 - Drinking fountains
 - Public Telephone Access

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CBC Section 1226 - General

1226.6.5 & 1226.4.16 Public and administrative areas (continued)

- Medical records storage
 - Work area for sorting and recording records
 - Storage for records (paper or electronic)
- Equipment and supply storage

1226.6.6 & 1226.4.17 Support areas for staff

- Staff toilets in addition to and separate from public and patient facilities
 - Toilet(s)
 - Handwashing fixture(s)
- Storage for employees' personal effects - readily accessible
 - Locking drawers, or
 - Cabinets
- Staff lounge - optional

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CBC Section 1226.6 – Primary Care

Primary Care Clinics - The following are required (continued):

1226.6.4 General support services and facilities:

- Garbage, solid waste, medical waste and trash storage - refer to 1226.4.9
- Housekeeping room - refer to 1226.4.15



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CBC Section 1226.6 – Primary Care

Primary Care Clinics – If dental services are provided, the following is required:

1226.6.1.3 Dental examination and treatment areas

- 80 s.f. w/ 3' full length 1-side & at the head @ the other side.
- Pediatric patients (*when provided*)
- Handwashing Fixtures
- Imaging (*if provided*)

1226.6.1.4 Oral surgery – refer to 1226.8

1226.6.2.5 Consultation room

1226.6.2.6 Sterilization facilities

1226.6.2.7 Laboratory

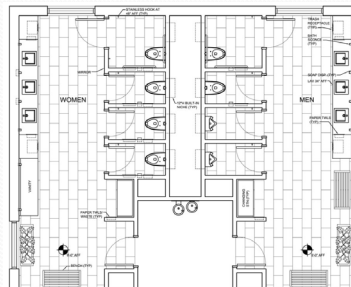


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General Requirements

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Required Toilets @ Clinics



California Plumbing Code

422.2.1 [OSHPD 1, 2, 3 & 4] Separate toilet facilities shall be provided for the use of patients, staff personnel and visitors.

Exception for Primary Care Clinics only: *Where a facility contains no more than three examination and/or treatment rooms, the patient toilet shall be permitted to serve waiting rooms.*

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Public Toilets

California Building Code

1224.4.5 Outpatient waiting room(s). *Waiting rooms for outpatients shall provide a seating area and space for wheelchairs and have public corridor access. Public toilets, drinking fountains and telephones shall be readily accessible.*

Note: *One waiting area may serve more than one department or service.*

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.*

If toilets and drinking fountains serving the public area are provided as part of the overall building features, they need not be provided within the clinic suite.

1226.6 PRIMARY CARE CLINICS

1226.6.5.1.3 Public toilet(s). *Refer to Section 1224.4.5.*

California Plumbing Code

TABLE 4-2: *Administration Lobby*

Public Toilet – Male: 1; Public Toilet - Female: 1

Public Lobby – Unisex Exceptions – up to Local Jurisdiction

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Patient Toilets

California Building Code

1226.4.14.1 Patient toilet room(s). Toilet room(s) with a lavatory shall be provided separate from public use toilet(s) and shall be located to permit access from patient care areas without passing through publicly accessible areas.

Exception: For primary care clinics where a facility contains no more than three examination and/or treatment rooms, the patient toilet shall be permitted to serve waiting rooms.

1226.6 PRIMARY CARE CLINICS

1226.6.3.1 Patient toilet room(s). Refer to Section 1226.4.14.1.

1226.5.5 RADIOLOGICAL/IMAGING SERVICE SPACE

1224.18.5.3 Patient toilet(s). A patient toilet shall be directly accessible to the ultrasound procedure room. The patient toilet may be permitted to serve more than one ultrasound procedure area.

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Staff Toilets

California Building Code

1226.4.17.1 Staff toilet(s). Provide staff toilet(s) in addition to and separate from, public and patient facilities. The areas shall contain toilet(s) and handwashing fixtures pursuant to the California Plumbing Code.

1226.6 PRIMARY CARE CLINICS

1226.6.6.1 Staff toilet(s). Refer to Section 1226.4.17.1.

1226.8 SURGICAL CLINICS

1224.15.3.11 Staff clothing change areas. Appropriate areas shall be provided for male and female personnel (orderlies, technicians, nurses and doctors) working within the surgical service space. The areas shall contain lockers, showers, toilets, lavatories equipped for handwashing, and space for donning surgical attire. These areas shall be arranged to ensure a traffic pattern so that personnel entering from outside the surgical service space can change and move directly into the service space.

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Staff Toilets

California Plumbing Code

TABLE 4-2:

Staff Toilet – Male: 1:1-15; Staff Toilet - Female: 1:1-15

TABLE 4-3: *Nonindustrial Office Buildings*

Water closet– Male: 1:1-15; Water closet - Female: 1:1-15

Footnote 7: When there are less than five employees, separate toilet rooms for each sex are not required provided toilet rooms can be locked from the inside and contain at least one water closet.

CPC Table 4-3 is taken from the California Labor Law and applies to staff (employee) toilets throughout the State of California. It is also the basis for employee toilets shown in Table 4-2. Footnote 7 can be recognized for very small clinics (i.e. 4 or less employees).

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All-Gender Toilets

Policy Intent Notice (PIN) 65



AB 1732:

All single-user toilet facilities in any business establishment, place of public accommodation, or state or local government agency shall be identified as all-gender toilet facilities by signage that complies with Title 24, California Building Standards Code and designated for use by no more than one occupant at a time or for family or assisted use.

The signage requirement does not affect the toilet count. Staff toilets must be provided at 1:1-15 male **and** 1:1-15 female staff per California Labor Law and the California Plumbing Code Table 4-2. Clinics above the threshold provided under Table 4-3 Footnote 7 for less than 5 employees, must still provide two staff toilet rooms. Each will be signed with the circle & triangle geometric shapes indicating unisex toilet facilities. A single unisex toilet room may not be used to satisfy both required facilities.

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Accessibility Regulations

2019 CBC Chapter 11B For Health Care Facilities



Facilities Development
Division

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Accessibility Regulations

Paradigm Shift

California Accessibility Standards in the 2013 CBC

“**All** areas of newly designed and newly constructed buildings and facilities, and altered portions of existing buildings, shall comply with these requirements.”

General Approach: Everything must be accessible unless specifically noted otherwise. Hard to argue with the term “**ALL**”.

“When a site, building, facility, room or space contains more than one use, **each portion** shall comply with the applicable requirements for that use.”

Occupancy Groups are no longer used in Chapter 11B. Specific accessibility requirements shall be applied to each and every use in each and every room.

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Accessibility Regulations

Division 2: Scoping Requirements

11B-213 Toilet facilities and bathing facilities.

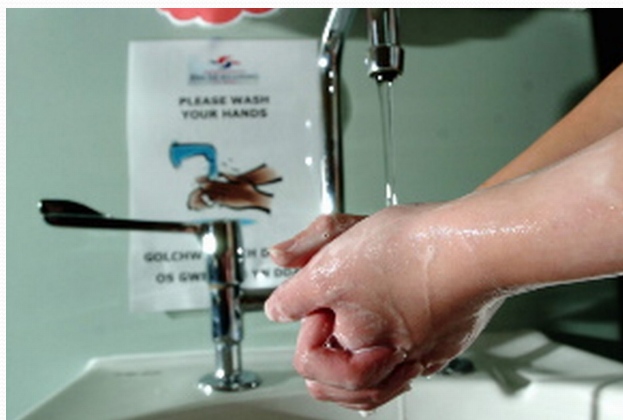
11B-213.1.1 **Toilet facilities for designated user groups** – Where toilet facilities are provided for the exclusive use of separate user groups, the toilet facilities serving each user group shall comply with Section 11B-213.

11B-213.2.2 **Unisex (patient) toilet rooms** in medical and long-term care facilities – Common-use unisex toilet rooms for exclusive patient use not located within patient bedrooms shall contain a lavatory and one water closet.

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Accessibility Regulations

Handwashing Fixtures



66

Accessibility Regulations

11B-805.6 Handwashing fixtures, lavatories and sinks. All hand washing fixtures, lavatories and sinks shall comply with Section 11B-606.

CAN 2-11B - “Handwashing fixtures” are special application “**lavatories**,” ... Handwashing fixtures, as lavatories, are subject to Section 11B-306.2.2, Exception which states “The toe clearance shall extend 19 inches maximum under lavatories required to be accessible by Section 11B-213.3.4. They also have a minimum knee clearance of 29 inches at the depth and reduction described in Sections 11B-306.3.3 and 11B-306.3.4.” Lavatory exception for 29” clear **applies** to handwashing fixtures.

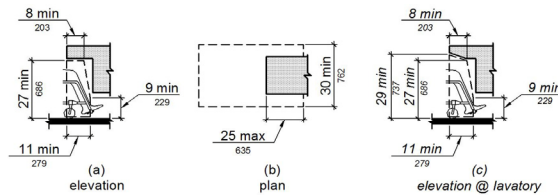
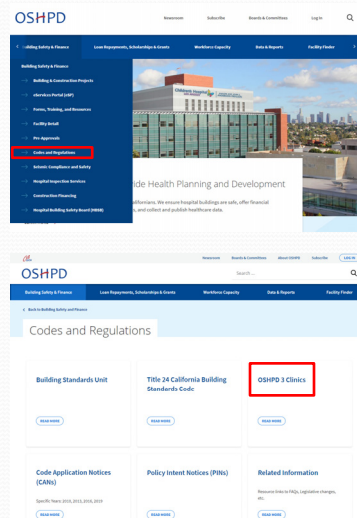


FIGURE 11B-306.3
KNEE CLEARANCE

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OSHPD Web Site Resources



Building Standards Unit

The Facilities Development Division (FDD) Building Standards Unit is responsible for the development of administrative regulations and building standards for the construction of hospitals, skilled nursing facilities, licensed clinics and correctional treatment centers in California. These regulations are developed, as necessary, to implement the provisions of the [2019 California Building Standards Code](#).

Building Standards Unit staff work in conjunction with OSHPD's architects, engineers and construction observation staff the Hospital Building Safety Board, and interested members of the public to develop code language for new building standards and amendments to existing standards in the California Code of Regulations, Title 24, California Building Standards Code. All regulatory proposals are submitted to the [California Building Standards Commission](#) for approval and adoption.

Title 24 California Building Standards Code

- [The Triennial Edition of Title 24, California Code of Regulations \(CCR\)](#)
- [Errata & Supplements \(Errata & Supplements are provided by expanding each Triennial Year\)](#)
- [California Building Standards Commission](#)

2021 Triennial Code Adoption Cycle

OSHPD has submitted proposed actions (code changes), which are intended for inclusion in the 2022 California Building Standards Code, Title 24, which is scheduled for publication in July 2022 with an effective date of January 2023. All proposed actions are subject to an initial 45-Day Public Comment Period, and if required, an additional 15- or 45-Day Public Comment Period.

Link(s) to the California Building Standards Commission for the Notice of Public Comment Periods and OSHPD Rulemaking Submittal are as follows:

- [Plumbing, Electrical, Mechanical, and Energy \(PEME\) Code Advisory Committees](#)
- [Notice of 15-Day Public Comment Period: July 29, 2021 – August 13, 2021](#)
- [OSHPD 01/20 – California Electrical Code, Part 3, 15-Day Rulemaking Submittal](#)

OSHPD 3 Clinics

The Office of Statewide Health Planning and Development is responsible for writing regulations pertaining to licensed clinics. These regulations are identified in the California Building Standards Code as “OSHPD 3”. OSHPD 3 requirements for clinics shall only be applied to clinics that are licensed pursuant to Health and Safety Code (H&S) Section 1200 (which includes primary care clinics and specialty clinics) or outpatient services of a hospital licensed pursuant to H&S Section 1250.

The following documents are intended to assist designers, building officials, and clinic operators in applying OSHPD 3 requirements and determining which jurisdiction has authority over the plan review, certification, and construction inspection of clinic facilities.

- [CAN 1-7-2100 Clinics](#) (Approval, Inspection and Certification) (Flowchart with explanatory notes)
- [Health Facility Checklist - Section 1228.8 Primary Care Clinics](#)
- [Health Facility Checklist - Section 1228.8 Surgical Clinics](#)
- [Health Facility Checklist - Section 1228.9 Chronic Disease Clinics](#)

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OSHPD Web Site Resources

**HEALTH FACILITY CHECKLIST
SECTION 1226 [OSHPD 3] CLINICS**

1226.6 PRIMARY CARE CLINICS

Primary Care Clinics are Health Facilities licensed under Section 1226 of the California Health & Safety Code that provide services limited to those listed in California Building Code Section 1226.6. Outpatient clinical services of a hospital providing services, licensed under Section 1250 of the California Health & Safety Code, which are equivalent to a primary care clinic, shall also comply with California Building Code Section 1226.6 and be considered a primary care clinic. Primary care clinics are subject to the provisions of Section 1226 [OSHPD 3] CLINICS, of the California Building Code and all amendments to the California Building Standards Code (CBCSC) under the banner [OSHPD 3] OSHPD requirements apply to all facilities described above and are not dependent upon Occupancy Group designations.

While Examination Rooms are required in Primary Care Clinics, the provision of Treatment Rooms is optional and dependent upon the intended delivery of care. Examination Rooms are intended for diagnostic examinations, where Treatment Rooms are intended for clinical/interventional procedures and include appropriate size and finish requirements to accommodate treatment/procedures that do not require a restricted (sterile) environment but may use sterile instruments or equipment.

All new buildings and additions, alterations or repairs to existing buildings, and conversion of space to a clinic use within existing buildings, subject to Licensing and Certification, California Department of Public Health, shall comply with applicable provisions of the California Building Code (CBC), California Electrical Code (CEC), California Mechanical Code (CMC), California Plumbing Code (CPC), California Energy Code, California Green Building Standards Code and California Fire Code (Parts 2, 3, 4, 5, 6, 9, and 11 of Title 24). The enforcing agency for primary care clinics is the local building department. Note: Existing clinic facilities that have architectural conditions, such as room size or corridor width, that fail to meet the requirements of OSHPD-3 but were compliant at the time of their construction may be considered acceptable.

EFFECTIVE USE OF THE CHECKLIST

The following checklist is intended to be used in the plan review of applications for health care facilities located in California. The checklist summarizes and references the applicable requirements from the Office of Statewide Health Planning and Development (OSHPD) as adopted and amended to the California Building Standards Code. Applicants should verify compliance of the plans submitted for building permit with all referenced requirements from OSHPD when completing this checklist. The checklist should be completed by the project architect or engineer based on the design actually reflected in the plans at the time of completion of the checklist.

This checklist only references OSHPD requirements associated with primary care clinics. Please note that other jurisdictions, regulations and codes have additional requirements which are not included in this checklist, such as: other applicable provisions of the CBCSC and amendments enforced by the local authority having jurisdiction; regulations enforced by the local health department; CEQA, local ordinances and conditions of approval enforced by the local planning department; requirements of the local fire department; requirements and design standards of the local public works department; and any other agency that may have jurisdictional authority over an aspect of the project. The applicant and design professional are encouraged to exercise appropriate due diligence that would be associated with embarking on any construction project.

Compliance Checklist: [OSHPD 3] Primary Care Clinics Page 3 of 11

ARCHITECTURAL REQUIREMENTS	PLUMBING/MECHANICAL/ELECTRICAL REQUIREMENTS
1226.6 Primary Care Clinics — Clinic licensed by CDPH under CH&S Section 1226.6 or Section 1250	
1226.6.1 Examination and treatment areas	
1226.6.1.1 Examination rooms	Plumbing: — Handwashing fixture located in exam room, convenient for use by staff entering & leaving room — Washbasin fixtures are permitted — ABS & PVC drainage piping are not permitted (01/1-10P)
1224.4.4.1.1: Spatial requirements — 60" min clear floor area, exclusive of: — Fixed or wall-mounted cabinets, built-in shelves, and — Alcoves with a dimension of less than 3" clearance or vestibules — 8" minimum clear dimension, clear of cabinets, etc.	Mechanical: — Ventilation: Neutral pressure balance at corridor — Min 2 air changes/hy CSA — Min 6 at changeover total Table 4-6
11B-404.2.4: "60" maneuvering clearance inside the room, perpendicular to the door — "18" min clearance beyond latch side of the door	— Other OSHPD 3 requirements — Space above a ceiling may not be utilized as an exhaust-air- or return-air plenum CMC 407.4.4
11B-805.4.1: "36" wide clear space along at least one side of the exam table	
11B-805.4.3: "Clear turning space may be either: — 60" diameter circle, or — "T" shape within a 60" square w/ arms and base with 36" min width	
1226.6.1.1: Required features — Accommodation for written or electronic documentation — Handwashing Station w/ following clearance: 11B-305.3: "30" x 48" clear space centered on fixture — Counterheight: 11B-306.2: "18" min depth — "26" high knee space under counterheight 11B-306.3: "8" min depth @ 29" high — "11" min depth @ 9" high — Clearance reduction between 29" & 9" at 16"	
1224.4.1: Interior Finishes — Plc perforated, fine fissured, or lightly textured ceiling; washable walls; carpet permissible upon agency approval	Electrical: — General illumination: 50 fc @ 30' min — Metallic raceway or cable with metal sheath qualified as a ground conductor — Insulated copper grounding conductor — GFCI at receptacles "0" from sink
1224.4.1: Ceiling height — "8" minimum — see note in narrative — Ceiling height shall accommodate ceiling-mounted equipment & fixtures — see accessibility requirements	Common requirements for all exam rooms: 1224.14.1.6: I2PC Table 4-2: 216.0.1 (1 & 2) Table 4-8 CMC Table 4-4 Table 4-8 CMC 407.4.4 CMC 602.3.1 CPC 604.1 CPC 609.9 CPC 613.2 CPC 906.2 CEC 517.22(A)(1)/IESNA CEC 517.13(A) CEC 517.13(B) CEC 517.8(B)(5)

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OSHPD Web Site Resources

CODE APPLICATION NOTICE (CAN)
H&S Code § 126851

SUBJECT: Clinics

CAN: 1-7-2100

Effective: 6/19/2008
Revised: 1/23/2017

CODE SECTION:
Article 21, Chapter 7
California Administrative Code (CAC)

Article 21 - Plan Review, Building Inspection and Certification of Surgical Clinics, Chronic Dialysis Clinics and Outpatient Services Clinics

PURPOSE:
The determination of which clinics and outpatient facilities are subject to the OSHPD 3 requirements found in Title 24, California Building Standards Code is complex. This results in a lack of consistency in application of the model code and OSHPD 3 requirements to clinic facilities, and uncertainty regarding the roles of the local building jurisdiction and OSHPD in the plan review, certification, and construction inspection processes.

Confusion exists, in part, because the use of the generic terms "clinic" and "outpatient facilities". The OSHPD 3 requirements found in the code apply only to those clinics and outpatient facilities that are licensed pursuant to Health and Safety Code (H&S) Section 1200 or 1250. There are realities in statute and regulations regarding the use and licensing of these clinic facilities, making consistent application of the regulations complex.

Another source of confusion is that the applicability of certain requirements is determined by factors that are normally out of the scope of work of the building department and designer. For example, sources of financial reimbursement and the specific type of license a clinic owner desires to obtain determine what regulations apply and who has jurisdiction for the project.

INTERPRETATION:
In order to determine the applicability of OSHPD 3 requirements, it is necessary to know if the clinic/ facility is licensed, and if so, how it is licensed. OSHPD 3 requirements for clinics only apply to clinics that are licensed pursuant to H&S Code Section 1200 (which includes primary care clinics and specialty clinics) or H&S Code Section 1250 (which includes outpatient clinical services of a licensed hospital). Where the term "clinic" or "outpatient facility" is used relative to OSHPD 3 requirements in the California codes, it shall mean a clinic or outpatient facility licensed pursuant to H&S Code Section 1200 or 1250.

Indicates Revision Page 1 of 12 CAN 1-7-2100

CODE APPLICATION NOTICE (CAN)
H&S Code § 126851

SUBJECT: Accessibility in Health Facilities

CAN: 2-11B

Effective: 7/20/2021

CODE SECTIONS:
2019 California Building Code
CHAPTER 11B - ACCESSIBILITY TO PUBLIC BUILDINGS, PUBLIC ACCOMMODATIONS, COMMERCIAL BUILDINGS AND PUBLIC HOUSING

PURPOSE:
The purpose of this Code Application Notice (CAN) is to clarify code sections in the 2019 California Building Code (CBC) in order to provide consistent application of accessibility regulations as they relate to new construction and alteration of health facilities under the jurisdiction of the Office of Statewide Health Planning and Development (OSHPD). This CAN only addresses accessibility requirements associated with CBC Chapter 11B. Functional requirements in Chapter 12 and/or existing requirements in Chapter 10 may also apply. Project elements must be compliant with all relevant California Building Standards Code requirements.

BACKGROUND:
The Division of the State Architect - Access Compliance (DSA-AC) adopts Title 24 CBC code requirements relating to accessibility for persons with disabilities. The purpose of these code requirements is to ensure that barrier-free design is incorporated at all buildings, facilities, site work, additions, alterations, and structural repairs. OSHPD enforces the DSA-AC accessibility code requirements for hospitals, skilled nursing facilities, and intermediate care facilities.

Accessibility within a building is addressed in two ways in California: the Americans with Disabilities Act (ADA) and the 24 California Building Standards Code (CBCSC). The ADA is a civil rights law that prohibits discrimination against individuals with disabilities in all areas of public life, including access to all public and private places that are open to the general public. Title 24 is a building code that provides standards for building construction including requirements for providing accessibility. Even though existing noncompliant conditions may not be required to be corrected as part of a project through the building standards code, this does not relieve facilities of providing high accessible compliance required by ADA within their facilities.

INTERPRETATIONS:
Note: Code section language being clarified is shown within the boxes. In some instances, an entire code section is clarified. In other instances, specific language within the code section is clarified. For these instances, the specific language within the code section is shown in **bold, underlined, italicized** followed by the interpretation.



Page 1 of 31 CAN 2-11B

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Part 1: Presentation and Overview


Page 35

Questions?



Thank You


**Part 2 – August 31
Enroll through CPCA**



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California
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Questions?



Thank You


**Part 2 – August 31
Enroll through CPCA**



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EG2

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EG1

CBC Section 1226 - General Interior Finishes



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SUBJECT

Clinics

CAN: 1-7-2100

Effective: 6/19/2008

Revised: 1/23/2017



CODE SECTION

**Article 21, Chapter 7
 California Administrative Code (CAC)**

Article 21 - Plan Review, Building Inspection and Certification of Surgical Clinics, Chronic Dialysis Clinics and Outpatient Services Clinics

PURPOSE

The determination of which clinics and outpatient facilities are subject to the OSHPD 3 requirements found in Title 24, California Building Standards Code is complex. This results in a lack of consistency in application of the model code and OSHPD 3 requirements to clinic facilities, and uncertainty regarding the roles of the local building jurisdiction and OSHPD in the plan review, certification, and construction inspection processes.

Confusion exists, in part, because the use of the generic terms “clinics” and “outpatient facilities”. The OSHPD 3 requirements found in the code apply only to those clinics and outpatient facilities that are licensed pursuant to Health and Safety Code (H&SC) Section 1200 or 1250. There are variables in statute and regulations regarding the use and licensing of these clinic facilities, making consistent application of the regulations complex.

Another source of confusion is that the applicability of certain requirements is determined by factors that are normally out of the scope of work of the building department and designer. For example, sources of financial reimbursement and the specific type of license a clinic owner desires to obtain determine what regulations apply and who has jurisdiction for the project.

INTERPRETATION

In order to determine the applicability of OSHPD 3 requirements, it is necessary to know if the clinic facility is licensed, and if so, how it is licensed. OSHPD 3 requirements for clinics only apply to clinics that are licensed pursuant to H&SC Section 1200 (which includes primary care clinics and specialty clinics) or H&SC Section 1250 (which includes outpatient clinical services of a licensed hospital). Where the term “clinic” or “outpatient facility” is used relative to OSHPD 3 requirements in the California codes, it shall mean a clinic or outpatient facility licensed pursuant to H&SC Section 1200 or 1250.

The application of OSHPD 3 requirements is independent of the determination of occupancy classification. A Group B Occupancy doctor's office is subject to OSHPD 3 requirements if the office is licensed as a clinic pursuant to H&SC Section 1200. Conversely, a surgical clinic classified as a Group I-2.1 occupancy is not subject to OSHPD 3 requirements if it is not licensed pursuant to H&SC Section 1200 or 1250.

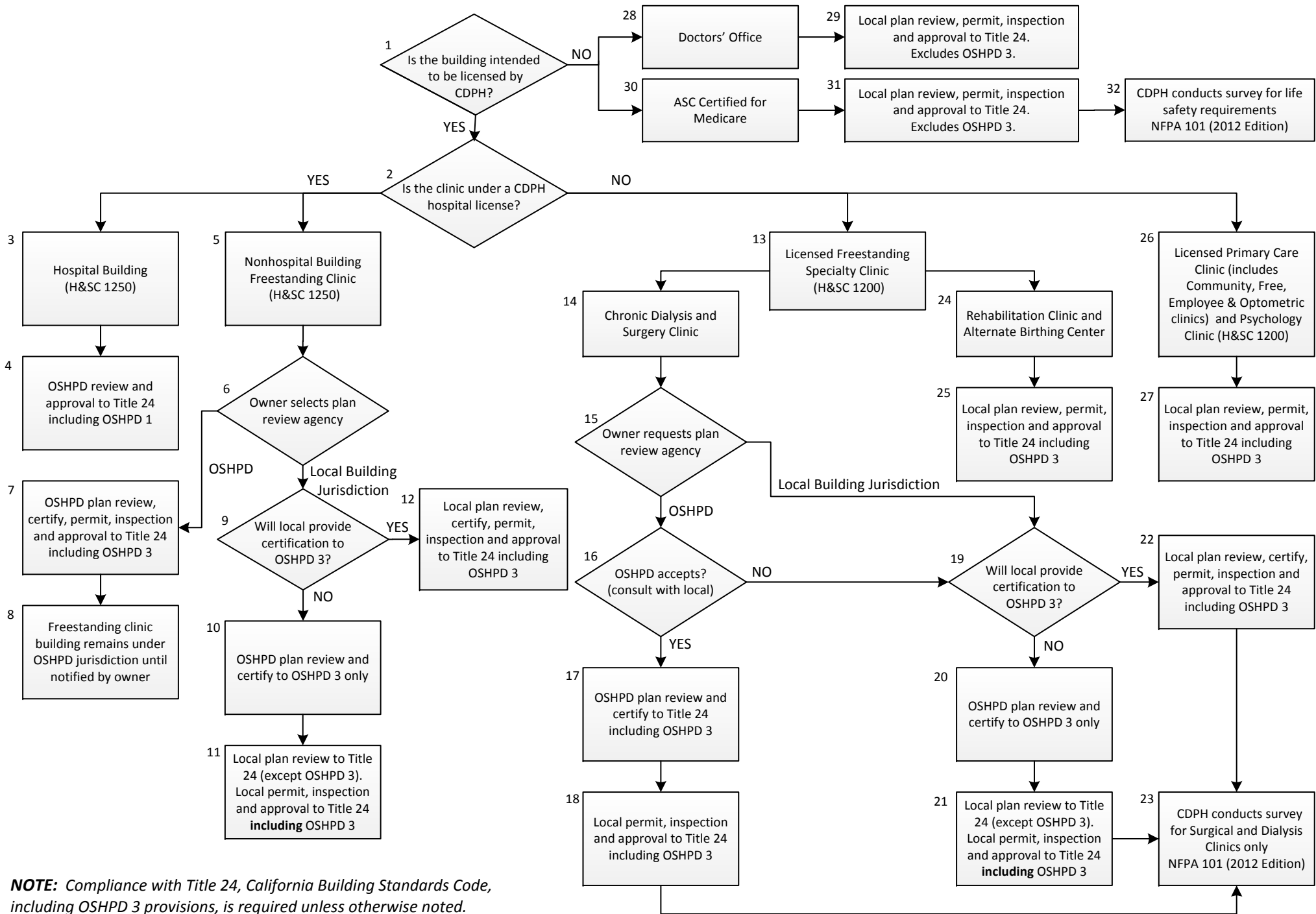
It should be noted that other requirements, not enforced by OSHPD or the local building jurisdiction may apply, for example, the NFPA 101 Life Safety Code.

The attached documents are intended to assist local building jurisdictions and designers in applying OSHPD 3 regulations, and determining which jurisdiction has authority over the plan review, certification and construction inspection of clinic facilities.

- **California Medical Clinic Guidelines, Plan Review, Approval, Inspection and Certification Flowchart.** Provides a process to follow in determining the appropriate authority having jurisdiction and applicable regulations for various clinic facilities.
- **Flowchart Explanatory Notes.** Provides additional information to use in applying the flowchart.
- **Appendix.** Contains a glossary of terms, identifies common acronyms, and provides a summary of roles of agencies involved in the plan review, certification, and inspection of clinic facilities.

Original signed	1/23/17
Paul Coleman	Date

CALIFORNIA MEDICAL CLINIC GUIDELINES FOR PLAN REVIEW, APPROVAL, INSPECTION AND CERTIFICATION



NOTE: Compliance with Title 24, California Building Standards Code, including OSHPD 3 provisions, is required unless otherwise noted.

**California Medical Clinic Guidelines
Plan Review, Approval, Inspection and Certification**

Flowchart Explanatory Notes (*Keyed to numbers at upper left corner of each box on flowchart.*)
Citations are from the Health and Safety Code (H&SC) and the California Administrative Code (CAC) Chapter 7.

1. If the clinic is not licensed by California Department of Public Health (CDPH), Licensing and Certification, compliance and certification to the requirements of OSHPD 3 are not required.
2. How a clinic is licensed will affect which sections of Title 24, California Building Standards Code apply, how they are applied, and what agency (local building jurisdiction or OSHPD) will enforce them.
3. "Hospital building" is defined in H&SC Section 1250. OSHPD preempts the local building jurisdiction for enforcement of the Title 24, California Building Standards Code.
4. Hospital buildings are subject to OSHPD jurisdiction and must comply with OSHPD 1 requirements in the California Building Code (CBC).
5. Freestanding clinic buildings under the hospital license are typically subject to the local building jurisdiction, although they are licensed under H&SC Section 1250.
6. The owner or governing authority may submit plans directly to the local building jurisdiction or may select OSHPD to perform the plan review and certification for freestanding hospital outpatient clinics. (Also refer to CBC section on "Removal of Hospital Buildings from General Acute Care Services.")
7. If the governing authority selects OSHPD to perform the plan review and certification responsibilities for a freestanding hospital licensed outpatient clinic, then the entire project, including plan review and approval to Title 24 including OSHPD 3 requirements, building permit and construction inspection is under OSHPD jurisdiction.
8. Freestanding clinic buildings that have been reviewed by OSHPD will remain under the jurisdiction of the Office until the owner or governing authority notifies OSHPD otherwise in writing.
9. Written certification of compliance to OSHPD 3 is required for outpatient clinical services of a hospital including surgical clinics and dialysis clinics. If plans are submitted to the local building jurisdiction, the local building jurisdiction must notify the owner or governing authority if their review will include written certification for OSHPD 3 conformance.
10. If the local building jurisdiction will not provide written certification to OSHPD 3 requirements, then plans shall be submitted to OSHPD for plan review and certification to OSHPD 3 requirements only. The local building jurisdiction shall review the plans for compliance to Title 24 excluding OSHPD 3.
11. Concurrent with OSHPD's review to OSHPD 3 requirements, the local building jurisdiction reviews the plans for compliance to Title 24, except OSHPD 3. The design professional of record is required to coordinate the OSHPD certification documents with those permitted by

the local jurisdiction. The local building jurisdiction shall also issue the building permit and perform construction inspection to Title 24 including OSHPD 3 requirements.

12. If the local building jurisdiction will provide written certification to OSHPD 3 requirements, then the entire project, including plan review and approval, building permit, and construction inspection for the project is under the local building jurisdiction.
13. Licensed freestanding specialty clinics are defined in H&SC Section 1200. Specialty clinics include surgical, chronic dialysis, and rehabilitation clinics and alternate birthing centers. All specialty clinics are required to conform to the requirements of OSHPD 3.
14. Written certification to OSHPD 3 is required for licensed surgical and dialysis specialty clinics and only these specialty clinics may be reviewed and certified by OSHPD.
15. The owner or governing authority must submit plans directly to the local building jurisdiction or may request OSHPD to perform the plan review and certification for surgery and dialysis specialty clinics.
16. OSHPD must consult with the local building jurisdiction, and either accept or not accept the clinic project for plan review. One purpose for this consultation is to determine whether or not the local building jurisdiction will issue a building permit and inspect construction for a project for which OSHPD did the plan review. If the local building jurisdiction is unwilling or unable to do this, OSHPD cannot accept the review.
17. If, after consultation with the local building jurisdiction, OSHPD accepts the project for plan review, then OSHPD must perform a complete plan review of Title 24 requirements, including OSHPD 3. The local building jurisdiction is not involved in plan review.
18. The local building jurisdiction must issue the building permit and perform construction inspection to Title 24 including OSHPD 3.
19. If plans are submitted to the local building jurisdiction, the local building jurisdiction must notify the owner or governing authority if their review will include certification for OSHPD 3 conformance.
20. If the local building jurisdiction will not provide written certification to OSHPD 3 requirements, then plans shall be submitted to OSHPD for plan review and certification to OSHPD 3 requirements only. The local building jurisdiction shall review the plans for compliance to Title 24 excluding OSHPD 3.
21. Concurrent with OSHPD's review to OSHPD 3 requirements, the local building jurisdiction reviews the plans for compliance to Title 24, except OSHPD 3. The design professional of record is required to coordinate the OSHPD certification documents with those permitted by the local jurisdiction. The local building jurisdiction shall also issue the building permit and perform construction inspection to Title 24 including OSHPD 3.
22. If the local building jurisdiction will provide written certification to OSHPD 3 requirements, then the entire project, including plan review and approval, building permit and construction inspection for the project is under the local building jurisdiction.

23. The CDPH will survey surgical and dialysis clinics for compliance to NFPA 101.
24. Rehabilitation Clinics and Alternate Birthing Centers are not subject to OSHPD review or certification.
25. Rehabilitation Clinics and Alternate Birthing Centers are under the jurisdiction of the local building jurisdiction only. Conformance to OSHPD 3 is required.
26. Primary Care Clinics and Psychology Clinics, as defined in H&SC Section 1200, are required to conform to the requirements of OSHPD 3. Certification to OSHPD 3 may be required for Primary Care Clinics which may include Community Clinics, Free Clinics, Employee Clinics and Optometric Clinics.
27. Primary Care Clinics are under the jurisdiction of the local building jurisdiction only. Conformance to OSHPD 3 is required. Written certification to OSHPD 3 may be provided by a licensed architect or the local building jurisdiction. (H&SC Section 1226.3)
28. Doctor's offices that are not licensed as clinics are not subject to OSHPD 3 regulations or certification.
29. These buildings are reviewed by the local building jurisdiction, and are not subject to OSHPD 3 regulations or OSHPD plan review.
30. If an Ambulatory Surgical Center (ASC) licensed for Medicare reimbursement only is not licensed as a specialty clinic, conformance and certification to OSHPD 3 are not required.
31. These facilities are reviewed by the local building jurisdiction and are not subject to OSHPD 3 regulations or OSHPD plan review.
32. The CDPH will survey ASC for compliance to NFPA 101.

APPENDIX

GLOSSARY

Certification for Medicare and/or Medicaid – *(Not related to OSHPD 3 certification requirements)* A process to determine the eligibility of health care providers for reimbursement under the Medicare and/or Medicaid (Medi-Cal) programs. Certification for Medicare is provided by CMS, based on recommendation by CDPH. Certification for Medi-Cal is provided by CDPH.

Certification of Nonhospital Freestanding Building Outpatient Clinical Services (H&SC Sections 1250 and 129730) - A written document from the local building jurisdiction or OSHPD stating that design drawings, specifications and/or construction for licensed clinics are in compliance with applicable OSHPD 3 requirements. This certification is only for OSHPD 3 requirements, and is in addition to the normal plan review process provided by the local building official. Certification to OSHPD 3 requirements is a completely separate process from certification for Medicare and/or Medicaid.

Certification of Licensed Freestanding Specialty Clinics (H&SC Section 1200) - A written document from the local building jurisdiction or OSHPD stating that design drawings, specifications and/or construction for surgical or dialysis licensed clinics are in compliance with applicable OSHPD 3 requirements. This certification is only for OSHPD 3 requirements, and is in addition to the normal plan review process provided by the local building jurisdiction. Certification to OSHPD 3 requirements is a completely separate process from certification for Medicare and/or Medicaid.

Certification to Primary Care Clinic (H&SC Section 1226.3) – A primary clinic may establish compliance with the minimum construction standards of adequacy and safety for the physical plant by submitting written certification from a licensed architect or a written statement from a local building jurisdiction that design drawings, specifications and/or construction for a specified licensed clinic are in compliance with applicable OSHPD 3 requirements.

Clinic – An outpatient health facility which provides direct medical, surgical, dental, optometric, or podiatric advice, services, or treatment to patients who remain less than 24 hours. (H&SC Section 1200.1) (Also see definition of “Outpatient Clinical Services of a Licensed Hospital.”)

Dental Clinic – Provides comprehensive dental services, and is licensed as a Primary Care Clinic by CDPH. A dental office provides comprehensive dental services to patients, but is not a licensed clinic.

Employee Clinic – Operated by an employer or jointly by two or more employers for their employees only, or by a group of employees, or jointly by employees and employers, without profit to the operators thereof or to any other person, for the prevention and treatment of accidental injuries to, and the care of the health of, the employees comprising

the group. Employee clinics are specifically exempted from licensure requirements of H&SC, Division 2, Chapter 1, Clinics. (H&SC Section 1206(n))

Optometric Clinic – Provides comprehensive eye services to patients. It may be licensed as a Primary Care Clinic or Surgical Clinic. An Optometric Office provides optometric services, but is not a licensed clinic.

Primary Care Clinic – Clinics specified in H&SC Section 1204 (a):

Community Clinic – A clinic operated by a tax-exempt nonprofit corporation that is supported and maintained in whole or in part by donations, bequests, gifts, grants, government funds or contributions, that may be in the form of money, goods, or services. In a community clinic, any charges to the patient shall be based on the patient's ability to pay, utilizing a sliding fee scale. No corporation other than a nonprofit corporation, exempt from federal income taxation under paragraph (3) of subsection (c) of Section 501 of the Internal Revenue Code of 1954 as amended, or a statutory successor thereof, shall operate a community clinic; provided, that the licensee of any community clinic so licensed on the effective date of this section shall not be required to obtain tax-exempt status under either federal or state law in order to be eligible for, or as a condition of, renewal of its license. No natural person or persons shall operate a community clinic. (H&SC Section 1204(a)(1))

Free Clinic – A clinic operated by a tax-exempt, nonprofit corporation supported in whole or in part by voluntary donations, bequests, gifts, grants, government funds or contributions, that may be in the form of money, goods, or services. In a free clinic there shall be no charges directly to the patient for services rendered or for drugs, medicines, appliances, or apparatuses furnished. No corporation other than a nonprofit corporation exempt from federal income taxation under paragraph (3) of subsection (c) of Section 501 of the Internal Revenue Code of 1954 as amended, or a statutory successor thereof, shall operate a free clinic; provided, that the licensee of any free clinic so licensed on the effective date of this section shall not be required to obtain tax-exempt status under either federal or state law in order to be eligible for, or as a condition of, renewal of its license. No natural person or persons shall operate a free clinic. (H&SC Section 1204(a)(2))

Psychology Clinic – A clinic which provides psychological advice, services, or treatment to patients, under the direction of a clinical psychologist as defined in Section 1316.5, and is operated by a tax-exempt nonprofit corporation which is supported and maintained in whole or in part by donations, bequests, gifts, grants, government funds, or contributions which may be in the form of money, goods, or services. In a psychology clinic, any charges to the patient shall be based on the patient's ability to pay, utilizing a sliding fee scale. No corporation other than a nonprofit corporation, exempt from federal taxation under paragraph (3), subsection (c) of Section (501 of the Internal Revenue Code of 1954, as amended, or a statutory successor thereof, shall operate a psychology clinic. (H&SC Section 1204.1) Psychology clinics are eligible for licensure pursuant to H&SC, Division 2, Chapter 1, Clinics, but are not required to be licensed. (H&SC Section 1206.1)

Specialty Clinic – Types of clinics specified in H&SC subdivision (b) of Section 1204, including surgical clinics, chronic dialysis clinics, rehabilitation clinics and alternate birth centers. Specialty clinics must be licensed by CDPH, **except** for surgical clinics that are under a physician’s medical license or corporation.

Surgical Clinic – Provides ambulatory surgical care for patients who remain less than 24 hours. A surgical clinic does not include any place or establishment owned or leased and operated as a clinic or office by one or more physicians or dentists in individual or group practice, regardless of the name used publicly to identify the place or establishment, provided, however, that physicians or dentists may, at their option, apply for licensure. (H&SC Section 1204(b)(1))

Chronic Dialysis Clinic (End-Stage Renal Dialysis (ESRD)) – A clinic that provides less than 24-hour care for the treatment of patients with end-stage renal disease, including renal dialysis services. (H&SC Section 1204(b)(2))

Rehabilitation Clinic – A clinic that, in addition to providing medical services directly, also provides physical rehabilitation services for patients who remain less than 24 hours. Rehabilitation clinics shall provide at least two of the following rehabilitation services: physical therapy, occupational therapy, social, speech pathology, and audiology services. A rehabilitation clinic does not include the offices of a private physician in individual or group practice. (H&SC Section 1204(b)(3))

Alternative Birth Center (ABC) – A clinic that provides comprehensive perinatal services and delivery care to pregnant women who remain less than 24 hours at the facility. (H&SC Section 1204(b)(4))

Health & Safety Code Section 1200 – Statute that pertains to licensed clinics not under a hospital license.

Health & Safety Code Section 1250 – Statute that pertains to “health facilities,” which include general acute care hospitals, and outpatient clinics under a hospital license.

Hospital Building – Hospital building is any building used for a health facility of a type required to be licensed pursuant to Section 1250 of the Health and Safety Code. The facility may also need to comply with NFPA 101 requirements for CMS and JCAHO standards under the Environment of Care. “Hospital building” does not include any building in which outpatient clinical services of a health facility licensed pursuant to Section 1250 are provided that is separated from a building in which hospital services are provided. If any one or more outpatient clinical services in the building provide services to inpatients, the building shall not be included as a “hospital building” if those services provided to inpatients represent no more than 25 percent of the total outpatient visits provided at the building. Hospitals shall maintain on an ongoing basis, data on the patients receiving services in these buildings, including the number of patients seen, categorized by their inpatient or outpatient status. Hospitals shall submit this data annually to the CDPH.

License – A written authorization to operate a health facility and/or clinic issued by the CDPH.

Local – See Local Building Jurisdiction.

Local Building Jurisdiction – City, county, or city and county building department, and fire authority responsible for enforcing the Title 24, California Building Standards Code.

National Fire Protection Association (NFPA) Standard 101 – Life Safety Code, published by NFPA. Surveys for compliance to 2012 edition of NFPA 101 are performed by CDPH.

Outpatient Clinical Services of a Licensed Hospital – A service under a hospital license that provides non-emergency health care services to patients. The clinic needs to be freestanding and comply with Title 24 requirements including OSHPD 3. NFPA 101 requirements for CMS and JCAHO standards under the Environment of Care may also be applicable. The number of inpatients may represent no more than 25% of the total number of patients served by the clinic. Services provided may include those enumerated in H&SC Section 129730.

OSHPD 3 – Regulations promulgated by OSHPD that apply to licensed clinics and hospital outpatient clinical services provided in a freestanding nonhospital building. OSHPD 3 regulations and other applicable requirements are found in the following parts of Title 24:

- Part 1, California Administrative Code (CAC), Article 21
- Part 2, California Building Code (CBC), including Section 1226
- Part 3, California Electrical Code (CEC)
- Part 4, California Mechanical Code (CMC), including Tables 4-A and 4-B
- Part 5, California Plumbing Code (CPC)

Title 24 – California Code of Regulations (CCR), Title 24, also known as the California Building Standards Code. Title 24 includes the following parts:

- Part 1, California Administrative Code
- Part 2, California Building Code
- Part 3, California Electrical Code
- Part 4, California Mechanical Code
- Part 5, California Plumbing Code
- Part 6, California Energy Code
- Part 7, California Elevator Safety Construction Code (See CCR, Title 8)
- Part 8, California Historical Building Code
- Part 9, California Fire Code
- Part 10, California Existing Building Code
- Part 11, California Green Building Standards Code
- Part 12, California Reference Standards Code

ROLES OF THE AGENCIES INVOLVED

California Medical Board – Responsible for licensing physicians to provide medical care.

California Department of Public Health (CDPH) – Verifies that operational requirements are met and issues a license to operate a licensed clinic. CDPH also conducts the life safety portion of the survey, enforcing the 2012 edition of NFPA 101, Life Safety Code. Clinics must meet both State and Federal standards as a condition of participation in the Medicare program.

Local Building Jurisdiction – Responsible for plan review, building permit issuance, building construction inspection, and issuance of certificate of occupancy. A written certification of conformance with OSHPD 3 amendments is required for Surgical and Dialysis Clinics. When the local building jurisdiction provides certification, it shall certify within 30 days of the completion of construction that the applicable clinic provisions have been met. The local building jurisdiction may choose not to provide this certification, requiring submittal to OSHPD for plan review and certification.

Local fire department – Enforces all fire and life safety requirements Office of the State Fire Marshal (SFM) in Title 24.

Office of Statewide Health Planning and Development (OSHPD) – In consultation with the Community Clinics Advisory Committee, OSHPD shall prescribe minimum construction standards of adequacy and safety for the physical plant of clinics as found in the California Building Standards Code. Additionally, OSHPD may perform a role in the plan review, building inspection and certification process as described in Title 24, Part 1, Article 21, “Plan Review, Building Inspection and Certification of Surgical Clinics, Chronic Dialysis Clinics and Outpatient Services Clinics.”

ACRONYMS

ABC	Alternative Birthing Center
ASC	Ambulatory Surgical Center
CCR	California Code of Regulations
CDPH	California Department of Public Health
CMS	Center for Medicare/Medicaid Services (<i>formerly known as Healthcare Financing Association (HCFA)</i>)
ESRD	End Stage Renal Dialysis
H&SC	Health and Safety Code
JCAHO	Joint Commission Accreditation Hospitals and Organizations known as the Joint Commission
NFPA	National Fire Protection Association
OSHPD	Office of Statewide Health Planning and Development
SFM	Office of the State Fire Marshal

HEALTH FACILITY CHECKLIST

SECTION 1226 [OSHPD 3] CLINICS

1226.6 PRIMARY CARE CLINICS

Primary Care Clinics are Health Facilities licensed under Section 1200 of the California Health & Safety Code that provide services limited to those listed in California Building Code Section 1226.6. Outpatient clinical services of a hospital providing services, licensed under Section 1250 of the California Health & Safety Code, which are equivalent to a primary care clinic, shall also comply with California Building Code Section 1226.6 and be considered a primary care clinic. Primary care clinics are subject to the provisions of Section 1226 [OSHPD 3] CLINICS, of the California Building Code and all amendments to the California Building Standards Code (CBSC) under the banner [OSHPD 3]. OSHPD requirements apply to all facilities described above and are not dependent upon Occupancy Group designations.

While Examination Rooms are required in Primary Care Clinics, the provision of Treatment Rooms is optional and dependent upon the intended delivery of care. Examination Rooms are intended for diagnostic examinations, where Treatment Rooms are intended for clinical/interventional procedures and include appropriate size and finish requirements to accommodate treatment/procedures that do not require a restricted (sterile) environment but may use sterile instruments or equipment.

All new buildings and additions, alterations or repairs to existing buildings, and conversion of space to a clinic use within existing buildings, subject to Licensing and Certification, California Department of Public Health, shall comply with applicable provisions of the California Building Code (CBC), California Electrical Code (CEC), California Mechanical Code (CMC), California Plumbing Code (CPC), California Energy Code, California Green Building Standards Code and California Fire Code (Parts 2, 3, 4, 5, 6, 9, and 11 of Title 24). The enforcing agency for primary care clinics is the **local building department**. Note: Existing clinic facilities that have architectural conditions, such as room size or corridor width, that fail to meet the requirements of OSHPD-3 but were compliant at the time of their construction may be considered acceptable.

EFFECTIVE USE OF THE CHECKLIST

The following checklist is intended to be used in the plan review of applications for health care facilities located in California. The checklist summarizes and references the applicable requirements from the Office of Statewide Health Planning and Development (OSHPD) as adopted and amended to the California Building Standards Code. Applicants should verify compliance of the plans submitted for building permit with all referenced requirements from OSHPD when completing this checklist. The checklist should be completed by the project architect or engineer based on the design actually reflected in the plans at the time of completion of the checklist.

This checklist only references OSHPD requirements associated with primary care clinics. Please note that other jurisdictions, regulations and codes have additional requirements which are not included in this checklist, such as: other applicable provisions of the CBSC and amendments enforced by the local authority having jurisdiction; regulations enforced by the local health department; CEQA, local ordinances and conditions of approval enforced by the local planning department; requirements of the local fire department; requirements and design standards of the local public works department; and any other agency that may have jurisdictional authority over an aspect of the project. The applicant and design professional are encouraged to exercise appropriate due diligence that would be associated with embarking on any construction project.

If a clinical space is being reused under a new tenant/owner, existing non-OSHPD-3 architectural dimensional requirements that were compliant at the time of construction may remain as-is if the use does not change. Examples of this would be exam rooms size or corridor width. If these were compliant with the building code at the time they were constructed, and the use of the room or area is not changing, an increase in size or width would not be required.

If existing ceiling heights are greater than 7'-6" and it is infeasible to raise the ceiling, it may remain as is.

With the implementation of electronic records, the requirement for a dedicated space for storage and sorting of records may be shared with other workstations that may have other functions.

ARCHITECTURAL REQUIREMENTS

**PLUMBING/MECHANICAL/
ELECTRICAL REQUIREMENTS**

1226.6 Primary Care Clinic
 ___ Clinic licensed by CDPH under CH&S Section 1200 or Section 1250

1226.6.1 Examination and treatment areas

1226.6.1.1 Examination rooms

- 1224.4.4.1.1 Space requirements
 - ___ 80 sf min clear floor area, exclusive of
 - ___ Fixed or wall-mounted cabinets, built-in shelves; and
 - ___ Alcoves with a dimension of less than 8', anterooms or vestibules
 - ___ 8' minimum clear dimension, clear of cabinets, etc.
- 11B-404.2.4 ___ *60" maneuvering clearance inside the room, perpendicular to the door
- ___ *18" min clearance beyond latch side of the door
- 11B-805.4.1 ___ *36" wide clear space along at least one side of the exam table
- 11B-805.4.3 ___ *Clear turning space may be either:
 - ___ 60" diameter circle; or
 - ___ "T" shape within a 60" square w/ arms and base with 36" min width
- 1226.6.1.1 Required fixtures
 - 1224.4.4.1.1 ___ Accommodation for written or electronic documentation
 - ___ Handwashing Station w/ following clearances:
 - 11B-305.3 ___ *30" x 48" clear space centered on fixture
 - ___ *9" high toe clearance under counter/fixture;
 - 11B-306.2 ___ 19" min depth;
 - ___ *29" high knee space under counter/fixture;
 - 11B-306.3 ___ 8" min depth @ 29" high;
 - ___ 11" min depth @ 9" high, clearance reduction between 29" & 9" at 1:6
- 1224.4.11 Interior Finishes
 - & Table ___ Pin perforated, fine fissured, or lightly textured ceiling; washable walls; carpet permissible upon agency approval
 - 1224.4.11
- 1224.4.10 Ceiling height
 - ___ 8' minimum – see note in narrative
 - ___ Ceiling height shall accommodate ceiling-mounted equipment & fixtures
 - * see accessibility requirements

Plumbing*:	
___ Handwashing fixture located in exam room, convenient for use by staff entering & leaving room	1224.14.1.6 CPC Table 4-2
___ Wrist/elbow blades are permitted	210.0 (1) a, i
___ ABS & PVC drainage piping are not permitted	701.1-2(b)
Mechanical*:	
___ Ventilation: Neutral pressure balance at corridor	CMC Table 4-A
___ Min 2 air changes/hr OSA	
___ Min 6 air changes/hr total	
___ (2) Filter banks 30% & 90%	Table 4-B
Other OSHPD 3 requirements	
___ Space above a ceiling may not be utilized as an exhaust-air, or return-air plenum	CMC 407.4.1.4
___ Concealed building spaces/ independent construction within buildings may not be used as ducts or plenums	
___ Flexible ducts may not exceed 10 feet	CMC 602.3.1
___ Use of CPVC is not permitted for building water supply piping	CPC 604.1
___ OSHPD 3 disinfection procedures for potable water system is required	CPC 609.9
___ Secondary (redundant) water heater is required	CPC 613.2
___ Vent pipe termination 25' min from any air intake or vent shaft – <u>10' if previously licensed facility.</u>	CPC 906.2
Electrical*:	
___ General illumination: 50 fc @ 36" min	CEC 517.22(A)(1)/ IESNA CEC
___ Metallic raceway or cable with metal sheath qualified as a ground conductor	517.13(A) CEC
___ Insulated copper grounding conductor	517.13(B) CEC
___ GFCI at receptacles <6' from sink	210.8(B)(5)

* Common requirements for all exam rooms

ARCHITECTURAL REQUIREMENTS

**PLUMBING/MECHANICAL/
ELECTRICAL REQUIREMENTS**

- 1226.6.1.2** **Treatment rooms** (when provided)
Space requirements
 - ___ 120 sf min clear floor area exclusive of
 - ___ Fixed or wall-mounted cabinets, built-in shelves; and
 - ___ Alcoves with a dimension of less than 10', anterooms or vestibules
 - ___ 10' minimum clear dimension, clear of cabinets, etc.
 - 11B-404.2.4 ___ *60" maneuvering clearance inside the room, perpendicular to the door
 - ___ *18" min clearance beyond latch side of the door
 - 11B-805.4.1 ___ *36" wide clear space along both sides of the exam/treatment table
 - 11B.805.4.3 ___ *Clear turning space may be either:
 - ___ 60" diameter circle; or
 - ___ "T" shape within a 60" square w/ arms and base with 36" min width
 - 1226.6.1.2 Required fixtures
 - 1224.4.4.1.2 ___ Examination light
 - ___ Work Counter
 - ___ Cabinets & medication storage
 - ___ Handwashing Station w/ the following:
 - ___ *30" x 48" clear space centered on fixture
 - ___ *9" high toe clearance under counter/fixture;
 - ___ 19" min depth;
 - ___ *29" high knee space under counter/fixture;
 - ___ 8" min depth @ 29" high;
 - ___ 11" min depth @ 9" high, clearance reduction between 29" & 9" at 1:6
 - 11B-305.3
 - 11B-306.2
 - 11B-306.3
 - Table 1224.4.11 Treatment Room Interior Finishes
 - 1224.4.11.4.1.1 ___ Smooth and easily cleanable ceiling without perforations or fissures
 - 1224.4.11.3.3 ___ Smooth washable walls able to withstand cleaning & chemicals
 - 1224.4.11.1 ___ Smooth, waterproof and durable flooring; carpet prohibited
 - 1224.4.10 Ceiling height
 - 1224.5.2 ___ 8' minimum – see note in narrative.
___ Ceiling height shall accommodate ceiling-mounted equipment & fixtures
- * See accessibility requirements

- Plumbing*:
 - ___ Handwashing fixture located in treatment room 1224.14.1.6 CPC
 - ___ Wrist/elbow blades are not permitted Table 4-2 210.0 (1) a, i
 - ___ ABS & PVC drainage piping are not permitted 701.1-2(b)
- Mechanical*:
 - ___ Ventilation: Neutral pressure balance at corridor CMC Table 4-A
 - ___ Min 2 air changes/hr OSA
 - ___ Min 6 air changes/hr total
 - ___ (2) Filter banks 30% & 90% Table 4-B
- Other OSHPD 3 requirements
 - ___ Space above a ceiling may not be utilized as an exhaust-air, or return-air plenum CMC 407.4.1.4
 - ___ Concealed building spaces/ independent construction within buildings may not be used as ducts or plenums
 - ___ Flexible ducts may not exceed 10 feet CMC 602.3.1
 - ___ Use of CPVC is not permitted for building water supply piping CPC 604.1
 - ___ OSHPD 3 disinfection procedures for potable water system is required CPC 609.9
 - ___ Secondary (redundant) water heater is required CPC 613.2
 - ___ Vent pipe termination 25' min from any air intake or vent shaft – 10' if previously licensed facility. CPC 906.2
- Electrical*:
 - ___ General illumination: 50 fc@ 36" min CEC 517.22(A)(1)/ IESNA
 - ___ Metallic raceway or cable with metal sheath qualified as a ground conductor CEC 517.13(A)
 - ___ Insulated copper grounding conductor CEC 517.13(B)
 - ___ GFCI at receptacles <6' from sink CEC 210.8(B)(5)

* Common requirements for all exam rooms

ARCHITECTURAL REQUIREMENTS

- 1226.6.2 Support areas for exam/treatment rms**
 General
 1224.4.4.7.3 60" min corridor if treatment rms incl or
 44" min corridor if exam rms only
 1224.4.10 8' min ceiling height

- 1226.6.2.1 Administrative Center / Nurse Station**
 11B-904.4 Counter space
 28" min, 34" max, high work surface
 36" min wide x 34" max high assessable transaction top
 1226.4.13.1 Storage space
 Access to handwashing fixture
 Reception/charting/communication

- 1226.6.2.2 Medication station**
 1226.4.13.2.1 Directly accessible form Nurse Sta.
 Counter w/ handwashing station
 Prep sink
 Lockable refrigerator
 Locked storage for controlled Rx

Or

- 1226.4.13.2.2 Self-contained dispensing unit
 Located in the nurse station, **or**
 Located in the clean utility room

- 1226.6.2.3 Clean utility room**
 Counter w/ handwashing station
 Clean & sterile storage

Or

- Clean holding room

- 1226.6.2.4 Soiled workroom**
 1226.4.13.4 Counter w/ handwashing station
 Flushing-rim clinical sink, or
 Utility/service sink
 Covered soiled linen area
 Covered waste storage area

Or

- Soiled holding room
 Covered soiled linen
 Covered waste storage
 Bed-pan washing at patient toilet

PLUMBING/MECHANICAL/ ELECTRICAL REQUIREMENTS

- Mechanical:
 Min 2 air changes/hr OSA
 Min 4 air changes/hr total
 (1) Filter bank 30%
 CMC Table 4-A

- Plumbing:
 Handwashing fixture
 CPC Table 4-2

- Lighting:
 Task lighting as required
 IESNA

- Plumbing:
 Handwashing fixture, and
 Separate prep sink
 CPC Table 4-2

- Mechanical:
 Positive pressure
 Min 2 air changes/hr OSA
 Min 4 air changes/hr total
 (1) Filter bank 30%
 CMC Table 4-A
 Table 4-B

- Lighting:
 Task lighting as required
 IESNA

- Power:
 Min: 1 receptacle

- Plumbing:
 Handwashing fixture
 CPC Table 4-2

- Mechanical:
 Positive pressure
 Min 2 air changes/hr OSA
 Min 6 air changes/hr total
 Min 4 air changes if 100% OSA
 (2) Filter bank 30% & 90%
 CMC Table 4-A
 Table 4-B

- Plumbing:
 Handwashing fixture
 Clinical sink w/ bed-pan washing
 Or utility sink
 CPC Table 4-2

- Mechanical:
 Negative pressure
 100% exhaust
 Min 2 air changes/hr OSA
 Min 10 air changes/hr total
 Min 4 air changes if 100% OSA
 (1) Filter bank 30%
 CMC Table 4-A
 Table 4-B

ARCHITECTURAL REQUIREMENTS

**PLUMBING/MECHANICAL/
ELECTRICAL REQUIREMENTS**

1226.6.3 Support areas for patients

1226.6.3.1 Patient toilet room(s)

- Shall be provided separate from public use and be located for access from patient care areas without passing through publicly accessible areas, or
- May serve outpatient waiting rooms in clinics with a maximum of three exam &/or treatment rooms
- Each toilet room shall include the following:
 - Fully accessible water closet
 - Fully accessible lavatory
 - 7' min ceiling height
 - 5" min coved base for resilient floors

Plumbing:

- Handwashing fixture located in patient toilet room, conventional spouts & controls acceptable, aerators are not permitted
- Toilet may be equipped with bedpan washing device

CPC
Table 4-2

Mechanical:

- Ventilation: 100% exhaust
- 10 min air changes per hour

CMC
Table 4-A

- 1224.4.4.1** Doors must be equipped with hardware which will permit the door to swing outward

1226.6.3.2 Specimen and/or blood collection

- When provided:
- Space for a chair and work counter shall be provided for blood draw
 - Handwashing station is required
 - Use of the patient toilet room is permitted for specimen collection
 - Handwashing station is required
 - Lab pass-thru must be accessible

Plumbing:

- Handwashing fixture

1226.6.4 General support services

1226.6.4.1 Garbage / medical waste / trash

- 1226.4.9.2 Lockable room or screened enclosure
- 25 sf minimum floor area
 - 4 foot minimum dimension
 - Concrete floor & curb w/ drain to sewer
 - Steam/hot water & cold water supplies

Plumbing:

- Steam/hot water & cold water supplies

Mechanical, if interior room:

- Ventilation: 100% exhaust
- 10 min air changes per hour

Or

- 1226.4.9.3 Waste holding room
- 25 sf minimum floor area
 - 4 foot minimum dimension
 - Convenient access to exterior
 - 5" min coved base for resilient floors

Mechanical:

- Ventilation: 100% exhaust
- 10 min air changes per hour

1226.6.4.2 Housekeeping room

- 1224.4.15 Minimum floor area of 15 sf
- Service sink or
 - Floor receptor
 - Storage of supplies & housekeeping equipment

Plumbing:

- Service sink

CPC
Table 4-2

Mechanical:

- Negative pressure - 100% exhaust
- 10 min air changes per hour

CMC
Table 4-A

ARCHITECTURAL REQUIREMENTS

**PLUMBING/MECHANICAL/
ELECTRICAL REQUIREMENTS**

1226.6.5 Public and administrative areas

1226.6.5.1 Public area

1226.6.5.1.1 Reception

- 1226.4.16.1.1 Reception/information counter or desk shall be provided
 - 28" min, 34" max, high work surface
 - 36" min wide x 34" max high accessible transaction top

1226.5.1.2 Outpatient waiting room

- 1224.4.5 Provide seating area and space for wheelchairs, and have public corridor access to, or provision of:
 - Public toilet(s)
 - Separate accessible men's and women's toilet rooms, **Or**
 - Single toilet shared by both sexes if occupant load is 10 or fewer, **Or**
 - Served by patient toilet if clinic has 3 or fewer exam rooms
 - Accessible hi & low drinking fountain
- 11B.602 Telephone available to the public
 - 30"x48" clear floor space
 - Reach range per 11B.308
 - 29" min cord length
 - Volume control

1226.6.5.2 Administrative services

1226.6.5.2.1 Medical records storage

- Provide a health record service that includes:
- Accessible work area for sorting and recording paper or electronic media
 - Record storage area for paper or electronic media

1226.6.5.2.2 Equipment and supply storage

- General storage for office supplies and equipment

1226.6.6 Support areas for staff

1226.6.6.1 Staff toilet room(s) – provide as follows:

- CPC Male staff @ 1:1-15, **and**
- 422.3.1 Female staff @ 1:1-15, **Or**
- Table 4-2 Single toilet if less than 5 staff
- Separate from patients & visitors

Each toilet room shall contain:

- Handwashing fixture,
- Water closet, and
- Be fully accessible

Mechanical:

- Negative pressure
- 100% exhaust
- Min 2 air changes/hr OSA
- Min 10 air changes/hr total
- Min 10 air changes /100% OSA
- (1) Filter bank 30%

CMC
Table 4-A

Table 4-B

Plumbing:

- Handwashing fixture located in each staff toilet room, conventional spouts & controls acceptable, aerators are not permitted

CPC
Table 4-2

Mechanical:

- Ventilation: 100% exhaust
- 10 min air changes per hour

CMC
Table 4-A

ARCHITECTURAL REQUIREMENTS

**PLUMBING/MECHANICAL/
ELECTRICAL REQUIREMENTS**

1226.6.6 Support areas for staff (continued)

1226.6.6.2 Storage for employees

- Provide storage for staff personal effects
- Locking drawers or cabinets
- Note: desk/workstation drawers or cabinets are acceptable
- Located convenient to individual workstations and shall be staff controlled

Supplemental (when provided)

1226.4.1.4 Airborne infection isolation exam room

1224.4.4.1.1

- Capacity – one exam table
- Labeled “Airborne infection room”
- Handwashing station
- Gowning area & storage of clean and soiled materials located directly outside or inside the entry door
- Doors – self-closing with latching devices
- Sealed-tight to minimize air infiltration from the outside or other spaces
 - Floors
 - Perimeter walls
 - Ceilings
 - Doors
 - Penetrations
- Seamless flooring with integral covered base
- Smooth, easily cleanable ceiling without perforations or fissures
- 8’ minimum ceiling height

Plumbing:	
<input type="checkbox"/> Handwashing fixture located in patient room, convenient for use by staff entering & leaving room	CPC Table 4-2
Mechanical:	
<input type="checkbox"/> Ventilation: Negative pressure	CMC
<input type="checkbox"/> 100% exhaust	Table 4-A
<input type="checkbox"/> Min 2 air changes/hr OSA	
<input type="checkbox"/> Min 12 air changes/hr total	
<input type="checkbox"/> Min 12 air changes /100% OSA	
<input type="checkbox"/> (2) Filter banks 30% & 90%	Table 4-B
Lighting:	
<input type="checkbox"/> General: 30 ft-candles @ 30” min	IESNA
<input type="checkbox"/> Task lighting	
Power:	
<input type="checkbox"/> Min of 1 receptacle at exam table	

1224.4.4.1.1.1 Airborne infection isolation exam room anteroom

- An anteroom is not required, however when provided it shall comply with the following:
- Space to don personal protective equipment before entering the patient room
- All doors shall have self-closing devices
- Provide storage of personal protective equipment (e.g. respirators, gowns, gloves) and clean equipment

Mechanical:	
<input type="checkbox"/> Ventilation: Positive pressure	CMC
<input type="checkbox"/> 100% exhaust	Table 4-A
<input type="checkbox"/> Min 2 air changes/hr OSA	
<input type="checkbox"/> Min 10 air changes/hr total	
<input type="checkbox"/> Min 10 air changes /100% OSA	
<input type="checkbox"/> (2) Filter banks 30% & 90%	Table 4-B

ADDITIONAL REQUIREMENTS FOR DENTAL SERVICES (when provided)

ARCHITECTURAL REQUIREMENTS		PLUMBING/MECHANICAL/ ELECTRICAL REQUIREMENTS	
1226.6.1	<u>Examination/Treatment area</u>		
1226.6.1.3	<u>Dental exam and treatment areas</u>		
1226.6.1.3.1	Space requirements – may be provided as a patient care station in an open treatment area	Plumbing*: ___ Handwashing fixture located in exam room, convenient for use by staff entering & leaving room	1224.14.1.6 CPC Table 4-2
	___ 80 sf min clear floor area, exclusive of Fixed or wall-mounted cabinets, built-in shelves; and	One handwashing fixture may be shared by two treatment stations in an open operatory/treatment area	1226.6.1.3.3
	___ Alcoves with a dimension of less than 8’, anterooms or vestibules	___ Wrist/elbow blades are permitted	210.0 (1) a, i
	___ 8’ minimum clear dimension, clear of cabinets, etc.	___ ABS & PVC drainage piping are not permitted	701.1-2(b)
11B-805.4.1	___ *36” wide clear space along full length of one side of the exam chair and at the head of the chair up to the cuspidor on the opposing side	Mechanical*: ___ Ventilation: Neutral pressure balance at corridor	CMC Table 4-A
1226.6.1.3.1		___ Min 2 air changes/hr OSA	
		___ Min 6 air changes/hr total	Table 4-B
11B-805.4.3	___ *Clear turning space within the room or open bay treatment area may be either: ___ 60” diameter circle; or ___ “T” shape within a 60” square w/ arms and base with 36” min width	___ (2) Filter banks 30% & 90%	
	Required fixtures	Other OSHPD 3 requirements	CMC
1226.6.1.1	___ Accommodation for written or electronic documentation	___ Space above a ceiling may not be utilized as an exhaust-air, or return-air plenum	407.4.1.4
1226.6.1.3.3	___ Handwashing Station - may be shared by two treatment stations in an open operatory/treatment area w/ following clearances:	___ Concealed building spaces/ independent construction within buildings may not be used as ducts or plenums	CMC
11B-305.3	___ *30” x 48” clear space centered on fixture	___ Flexible ducts may not exceed 10 feet	602.3.1
	___ *9” high toe clearance under counter/fixture;	___ Use of CPVC is not permitted for building water supply piping	CPC 604.1
11B-306.2	___ 19” min depth;	___ OSHPD 3 disinfection procedures for potable water system is required	CPC 609.9
	___ *29” high knee space under counter/fixture;	___ Secondary (redundant) water heater is required	CPC 613.2
11B-306.3	___ 8” min depth @ 29” high;	___ Vent pipe termination 25’ min from any air intake or vent shaft - 10’ if previously licensed facility.	CPC 906.2
	___ 11” min depth @ 9” high, clearance reduction between 29” & 9” at 1:6		
1224.4.11 & Table	___ Pin perforated, fine fissured, or lightly textured ceiling; washable walls; carpet permissible upon agency approval	Lighting*: ___ General: 30 ft-candles @ 30” min	IESNA
1224.4.11		___ Task illumination as required	
1224.4.10	Ceiling height ___ 8’ minimum - <u>see note in narrative</u> ___ Ceiling height shall accommodate ceiling-mounted equipment & fixtures	Power*: ___ Min of 1 receptacle at exam table	
	<i>* See accessibility requirements</i>		

** Common requirements for all dental exam and treatment rooms*

ARCHITECTURAL REQUIREMENTS

**PLUMBING/MECHANICAL/
ELECTRICAL REQUIREMENTS**

1226.6.1.3.2 Pediatric patients

___ At least one private consultation/
treatment room shall be provided when
pediatric patients are treated.

*See common requirements for all
exam rooms.

1226.6.1.3.4 Imaging

___ When imaging is provided the following
is required:
___ Space for a dental panoramic x-ray
system and printer; and
1226.5.5.2 ___ Shielding requirements; and
1224.18.1.1 ___ Alcove requirements

Mechanical:
___ Ventilation: Neutral pressure
balance at corridor *CMC*
Table 4-A
___ Min 2 air changes/hr OSA
___ Min 6 air changes/hr total
___ (2) Filter banks 30% & 90% *Table 4-B*

1226.6.1.4 Oral surgery

___ When provided, treatment areas for
procedures for which general
anesthesia is used on more than 5
patients at a time shall comply with the
requirements in Section 1226.8

Lighting:
___ General: 30 ft-candles @ 30" min *IESNA*

See requirements for Surgical Service
Space *CMC*
407.4.1.4

Support areas for dental exam rooms

1226.6.2.5 Consultation room

___ Dental facilities must provide a
consultation room for private
conferences with patients.
1224.2 ___ 70 sq. ft. minimum room with a door.
11B-306.2 ___ *60" maneuvering clearance inside
the room, perpendicular to the door
___ *18" min clearance beyond latch side
of the door
11B.306.3 ___ *Clear turning space may be either:
___ 60" diameter circle; or
___ "T" shape within a 60" square w/
arms and base with 36" min width

Mechanical:
___ Ventilation: Neutral pressure
balance at corridor *CMC*
Table 4-A
___ Min 2 air changes/hr OSA
___ Min 6 air changes/hr total
___ (2) Filter banks 30% & 90% *Table 4-B*

Lighting:
___ General: 30 ft-candles @ 30" min *IESNA*

1226.6.2.6 Sterilization facilities

___ When sterilization facilities are provided
the following is required:

1226.6.2.6.1 ___ Decontamination area:
___ Countertop (separated from clean
countertop by 4' minimum);
___ Instrument washing sink
(separated from clean area by 4'
minimum or 4' min high screen;
___ * Accessible handwashing fixture
separate from instrument sink;
___ Storage for supplies

1226.6.2.6.2 ___ Clean work area:
___ Countertop (separated from clean
countertop by 4' minimum);
___ Sterilization equipment, as
required for service provided;
___ * Accessible handwashing fixture
(may share with decontamination)
___ Storage for supplies

Mechanical - Decontamination:
___ Ventilation: Negative pressure
___ 100% exhaust *CMC*
Table 4-A
___ Min 2 air changes/hr OSA
___ Min 4 air changes/hr total
___ (2) Filter banks 30% & 90% *Table 4-B*

Mechanical – Clean work area:
___ Ventilation: Positive pressure
___ Min 2 air changes/hr OSA *CMC*
Table 4-A
___ Min 4 air changes/hr total
___ (2) Filter banks 30% & 90% *Table 4-B*

Plumbing:
___ Instrument washing sink
___ Handwashing fixture *CPC*
Table 4-2
___ Wrist/elbow blades are permitted
___ ABS & PVC drainage piping are
not permitted

Lighting:
___ General: 30 ft-candles @ 30" min *IESNA*
___ Task illumination as required

Power:
___ Min of 1 recept. at work counter

* See accessibility requirements

ARCHITECTURAL REQUIREMENTS

**PLUMBING/MECHANICAL/
ELECTRICAL REQUIREMENTS**

1226.6.2 Support areas for dental exam rooms

1226.6.2.7 Laboratory

___ Facilities for laboratory services shall be provided in dental facilities or through a contract arrangement with a laboratory service. When provided on site, the following is required:

- ___ Work area:
 - ___ Work counter;
 - ___ Laboratory sink;
 - ___ Tele/data service; and
 - ___ Electrical service

___ Handwashing Station w/ the following:

- 11B-305.3 ___ *30" x 48" clear space centered on fixture
- ___ *9" high toe clearance under counter/fixture;
- 11B-306.2 ___ 19" min depth;
- ___ *29" high knee space under counter/fixture;
- ___ 8" min depth @ 29" high;
- 11B.306.3 ___ 11" min depth @ 9" high, clearance reduction between 29" & 9" at 1:6

___ Storage for supplies

* See accessibility requirements

Plumbing:

- ___ Sink CPC
- ___ Handwashing fixture located in the laboratory, convenient for use by staff entering & leaving room Table 4-2
- ___ Wrist/elbow blades are permitted 210.0 (1) a, i
- ___ ABS & PVC drainage piping are not permitted 701.1-2(b)

Mechanical:

- ___ Ventilation: Negative pressure balance at corridor CMC
- ___ Min 2 air changes/hr OSA Table 4-A
- ___ Min 6 air changes/hr total
- ___ (2) Filter banks 30% & 90% Table 4-B

Lighting:

- ___ General: 30 ft-candles @ 30" min IESNA
- ___ Task illumination as required

Power:

- ___ Min of 1 receptacle at work counter