



### Hospital Building Safety Board Collaborative Inspection Approach to Hospital Construction Webinar Development Subcommittee of the Education and Outreach Committee

AGENDA August 13, 2025 10:00 a.m. – 4:00 p.m.

The Subcommittee may not discuss or act on any matter raised during the public comment section that is not included on this agenda, except to place the matter on a future meeting agenda. (Government Code §§ 11125, 11125.7, subd. (a).)

#### Locations:

2020 West El Camino Ave, Conference Room 930, Sacramento, CA 95833 355 South Grand Avenue, Conference Room 2000, Los Angeles, CA 90071 Teams Meeting Access; Meeting ID: 278 301 862 597 0; Passcode: QC6Jk39B Call in: (916) 535-0978; Phone Conference ID: 235 128 430# #

Item #1 Call to Order and Welcome

Facilitator: Michael Davis, CHI, CEO Emeritus, DavisHBC, Inc.;

Subcommittee Chair (or designee)

Item #2 Roll Call and Meeting Advisories/Expectations

Facilitator: Veronica Yuke, HCAI; HBSB Executive Director (or designee)

Item #3 Review presentations for the 90-minute webinar

- Review and discuss the following PowerPoint presentations:
  - a. Ownership Gary Dunger
  - b. Design Professional of Record Belinda Young
  - c. Contractor of Record/Sub-Contractor Cody Bartley
  - d. Inspector of Record/Testing Lab Michael Davis
  - e. OSHPD and Field Staff Monica Colosi
- Discussion and public input

Facilitator: Michael Davis (or designee)

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#### Item #4 Mock delivery of webinar presentations

- Walk-through of each presentation:
  - a. Introduction To be Determined (TBD) (5 minutes)
  - b. Ownership Gary Dunger (12 minutes)
  - c. Design Professional of Record Belinda Young (12 min)
  - d. Contractor of Record/Sub-Contractor Cody Bartley (12 minutes)
  - e. Inspector of Record/Testing Lab Michael Davis (12 minutes)
  - f. HCAI and Field Staff Monica Colosi (12 minutes)
  - g. Conclusion TBD (5 minutes)
  - h. Questions and Answer Panel of Presenters (20 minutes)
- Discussion and public input

Facilitator: Michael Davis (or designee)



# Collaborative Inspection Approach to Hospital Construction

Health Care Access and Information | Hospital Building Safety Board

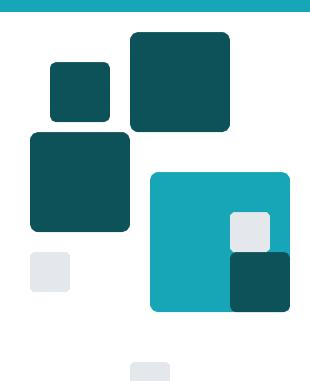
**TBD 2025** 



**Collaborative Approach to Hospital Construction Inspections** 

# The Critical Role of Construction Inspections

A Hospital Owner's Perspective





### Michael Davis Title

**Email** 

Phone



### **Cody Bartley** *Title*

Email

Phone

## Gary Dunger Executive Director, Cedars-Sinai

Gary.Dunger@cshs.org (323) 866-6537



#### Belinda Young Title

Email

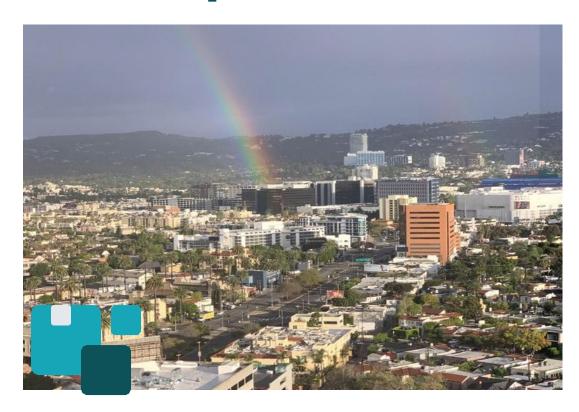
Phone





### Introduction: The Owner's Strategic

### **Perspective**





#### Strategic Oversight

Owners must align inspection processes with project goals, stay actively involved throughout construction, set clear quality standards, hire competent teams, allocate proper resources, and maintain a long-term perspective on facility durability and maintainability.



## Construction Team Roles

#### **Hospital Owner**

01

02

Sets project goals, secures funding, ensures compliance with healthcare standards, and ultimately holds responsibility for patient safety and facility functionality.

03

#### **Contractor**

Builds the facility according to plans and specifications, manages subcontractors, maintains construction schedule, and implements infection control measures.

#### **Architect/Engineer**

Designs the facility, creates specifications, interprets codes, responds to RFIs, and provides direction to the certified inspector during construction.

04

#### Inspector

Certified professional who verifies construction meets code requirements, maintains quality control, documents compliance, and reports to the architect, owner and OSHPD.



### What Could Go Wrong?

- Hospital owner's role: Overseer ensuring quality, safety, and compliance throughout the construction process
- Critical responsibilities: Stay involved in inspections, set clear standards, hire competent teams, allocate sufficient resources, and manage construction risks
- Long-term perspective: Focus on durability and maintainability of critical systems (e.g., HVAC for surgical suites, medical gas systems, emergency power)





"What could go wrong if a hospital isn't properly inspected during construction?"





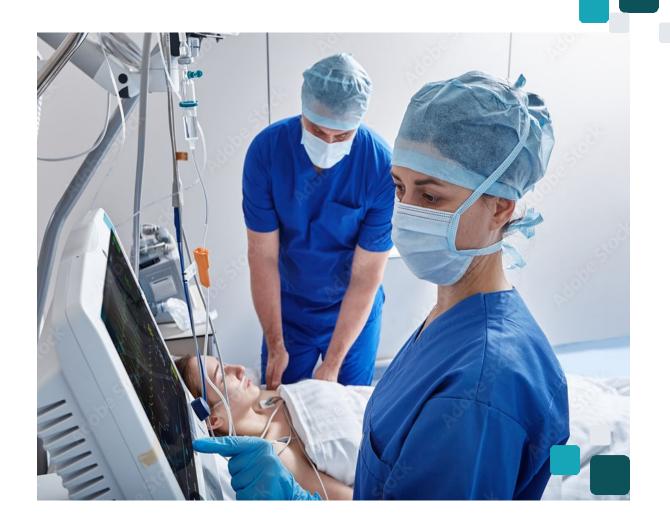


### Why Hospital Construction is Unique



### High Stakes Environment

- Serving vulnerable populations requiring heightened safety protocols
- Zero tolerance for structural, system or equipment failures







### Why Hospital Construction is Unique



### **Regulatory Demands**

- Joint Commission, OSHPD,
   CDPH, Local Planning
   Departments
- Example: Infection control standards during construction require specific containment measures







### Why Hospital Construction is Unique



### **Regulatory Demands**

- Medical gas systems with zero tolerance for contamination
- Redundant emergency power systems for life-critical areas
- Specialized ventilation for sterile environments and airborne infectious isolation rooms
- Integrated technology requirements unique to healthcare occupancies







### Regulatory Accountability

"The hospital governing board or authority shall provide for and require competent and adequate inspection during construction or alteration by an inspector satisfactory to the architect or structural engineer, or both, and the department."

- —California Health & Safety Code, Section 129825(a)
- **Legal mandate:** Inspection is not optional but required by law for healthcare facilities
- Lines of authority: Inspector acts under architect/engineer direction, but is ultimately responsible to the governing board
- Dual approval: Inspector must be satisfactory to both the design professionals and OSHPD





Hospital owners carry legal accountability for ensuring adequate and competent inspections throughout the construction process.







### The Inspector's Role: Competency & Adequacy //



#### 2

#### **Certified Hospital Inspector**

**Code of Ethics:** Commitment to safety, independence in assessments, and honesty in reporting. The inspector maintains professional integrity separate from other project stakeholders.

**Principal Duties:** Verifying compliance with plans, specifications and codes; documenting issues; and coordinating with the construction team to ensure safety and quality standards are met at every phase.



#### **Key Inspection Definitions**

**Adequate:** Thorough examination of all critical components at each construction phase, with inspections timed to align with key construction milestones.

**Competent:** Inspectors with healthcare-specific expertise, proper certifications, and knowledge of complex medical facility requirements and regulations.

**Continuous:** Ongoing oversight throughout the entire project lifecycle, not just at major milestones or upon contractor's request, ensuring consistent compliance and quality control.





### Types of Inspections in Hospital Construction





Comprehensive inspection strategies involve different types of inspections throughout the construction process to ensure all critical healthcare requirements are met consistently and systematically.





#### **Inspection Categories**

**Continuous:** Ongoing oversight of critical work elements by qualified inspectors who remain on-site during installation of specified components to observe methods and materials in real-time.

**Periodic (Inspection Requests):** Scheduled inspections at key milestones that require formal documentation before construction proceeds to next phase. Typically triggered by contractor request when ready for evaluation.

**Required (TIO):** Testing, inspection, and observation points mandated by regulatory agencies, building codes, or contract specifications. Must be verified and documented to ensure compliance with healthcare-specific requirements.



#### **Key Areas of Focus**

**Structural Integrity:** Foundation systems, seismic requirements, structural framing, connections, and reinforcement crucial for lifesafety in healthcare environments.

**MEP Systems:** Medical gas piping, emergency power systems, HVAC for isolation rooms and surgical suites, plumbing for infection control, and specialty electrical systems supporting critical care.

**Fire/Life Safety:** Fire-rated separations, egress routes, smoke control systems, fire suppression, and emergency communications essential for vulnerable populations.

**Infection Control:** ICRA compliance, negative pressure environments, high-efficiency filtration, cleanable surfaces, and construction barriers protecting active patient care areas.







## The Benefits of Proper Inspection



#### **Visible Outcomes**

**Enhanced Safety:** Ensures patient and staff protection through structural integrity and systems reliability

**Financial Protection:** Prevents costly rework, legal liabilities, and regulatory penalties **Project Efficiency:** Maintains construction timelines and budgets by identifying issues early

**Operational Excellence:** Supports long-term facility function through properly installed systems







### Risks: The Consequences of Inadequate Inspection

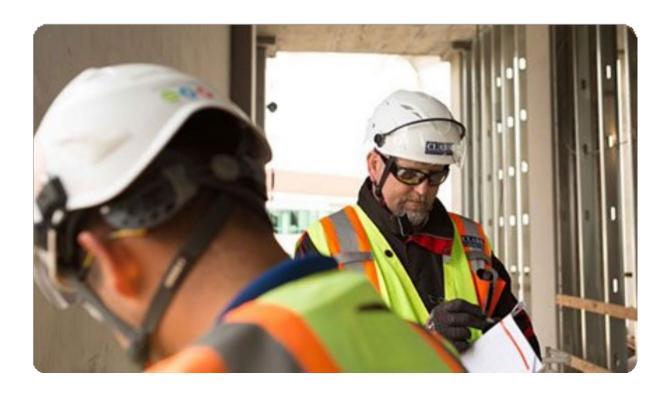
#### ▲ Critical Safety Risks

Inadequate inspections can result in catastrophic structural failures or dangerous system malfunctions. Issues such as collapsing structures, electrical fires, and medical gas contamination directly endanger patients and staff lives in an already vulnerable healthcare environment.



#### **Severe Financial Impact**

The financial burden of rectifying construction defects post- occupancy is typically 4-5 times higher than addressing them during construction. This includes not only remediation costs but also potential regulatory fines, increased insurance premiums, and legal liabilities from patient or staff incidents.







### **Best Practices for Effective Inspections**





### Owner's Role & Personnel

- Stay actively involved throughout the entire project
- Clearly share expectations with all team members
- Hire certified inspectors with healthcare facility expertise
- Allocate adequate resources for thorough inspections
- Maintain executive-level support for inspection processes



### Planning & Documentation

- Create comprehensive pre/during/post-construction plans
- Develop healthcare-specific inspection checklists
- Maintain detailed inspection records and reports
- Utilize technology (software, drones) for documentation
- Establish clear inspection scheduling protocols



### Communication & Closeout

- Hold regular progress meetings with all stakeholders
- Maintain open communication channels with IORs
- Include IOR Inspection
   Request Program in contracts
- Begin closeout planning at project commencement
- Document lessons learned for future projects





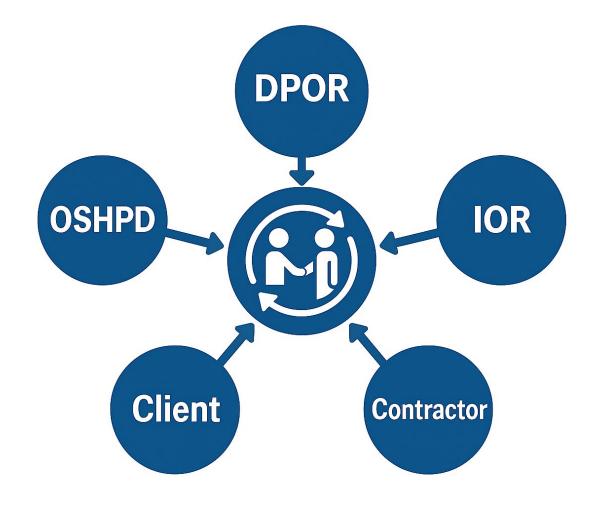
## Perspective of the Design Professional of Record (DPOR)

Belinda Young, AIA, LEED BD+C, Assoc. DBIA Regional Leader of Healthcare



### Why Collaboration

- All parties invited to the table as partners working towards common goals and project success
- Breakdown silos and encourage open communication
- Build trust, empathy and accountability
- Leverage collective expertise and continuous improvement
- Understand each others' perspectives and advocate for one another
- No room for egos





### **Early Engagement**



- OSHPD, Client, Contractor and IOR as partners in design process
- Collaborative review of proposed details prior to plan review
- Leverage expertise from trade partners
- Enhance understanding of project means and methods
- Proactive constructability review to avoid costly change orders and delays in the field



### **Inspection Process Alignment**

- Requires advanced planning and collaboration
- OSHPD and IOR concurrence on proposed material ID, inspection cadence and tracking
- Clearly identify off-site fabrication and on-site requirements
- Facilitate IOR review with accurate and updated information on drawings and specifications





### Personal Knowledge

I have exercised reasonable diligence to obtain the facts for my personal knowledge that includes: (Check only those applicable below)

Continuous physical presence on-site

Periodic physical presence on-site

Review of reports submitted by others

I have reviewed and accepted the following items of the TIO Program required in this milestone / interval: (Check only those applicable below)

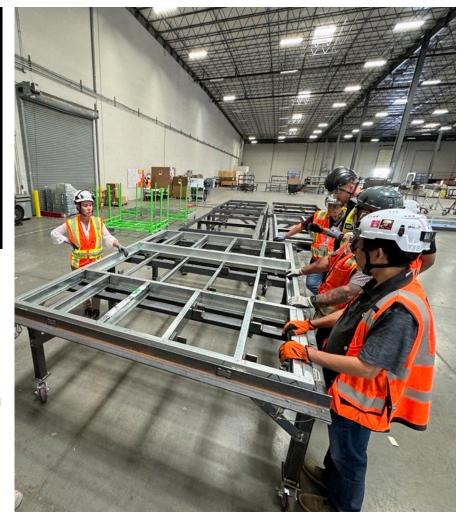
Inspection Reports

Compliance Statement:

By signature below, I hereby declare that, to the best of my personal knowledge\*\*, the work performed, and the materials used and installed covered by this report, are in compliance with the approved drawings and specifications and any approved Post Approval Documents/Amended Construction

Documents. If applicable, a tentative list of items to be completed or corrected is given on the attached hereto. This list may not be all-inclusive. Failure to include an item in it does not alter the responsibility of the Contractor/Builder to complete all of the work in accordance with the approved drawings and specifications and all applicable building codes. (\*\*As defined in CCR, Title 24, Part 1, Section 7-151)

- Importance of physical presence on-site
- Observation and review of reports
- Timely notification and resolution of items needing attention
- Personal knowledge enables effective problem-solving
- Constant coordination with IOR team





### **Active Management of TIO**

- Testing, Inspection and Observation Program is authored by the Architect/Engineer of Record but should be informed by DPOR, Client, Contractor and IOR input
- Review stages, milestones and desired phase sign-offs with Client
- Determine responsible party for tests with Contractor and IOR
- Update and track revisions throughout construction
- Obtain timely sign-offs from IOR and OSHPD field staff
- Gather Final VCRs as specific scope is completed difficult to gather at the end, especially for projects with long durations



#### OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMEN

FACILITIES DEVELOPMENT DIVISION - www.oshpd.ca.gov/fcd 400 R Street, Suite 200 ~ Sacramento, California 95811

Phone (918) 440-8300 FAX (918) 324-9188 Phone (213) 897-0166 FAX (213) 897-0168

Testing, Inspection and Observation Program

2016 California Building Standards Code - OSHPD 1

SECTION B ▲			NOTE: Approved agencies, individuals, and all changes to the TIO program shall be identified, evaluated by the DPOR and approved by OSHPD prior to proceeding with the related work.		
Facili	ity#:	Facility Name:		Project #:	Sub #:
15	5570	Kaiser Foundation Hospital - South Sacramento		H193035-34-00	٥
D	URII	NG CONSTRUCTION DOCUMENT SUBMITTAL		DURING CONSTRUCTION	
# xapul	REQUIRED (Select)	TESTS	PERFORMED OFF-SITE	RESPONSIBLE APPROVED AGENCY AND/OR INDIVIDUAL  RESPONSIBLE APPROVED AGENCY AND/OR AGEN	OSHPD/FDD USE
		L TESTS			
ound	datior				
B-F1	х	Soil fill CBC 1705A.6 Fill material acceptance test		CEL/See List	91/J.A.
B-F2	х	Soil fill CBC 1705A.6 Compaction test		CEL/See List	DSE O
oncr	rete				
B-C1	х	Concrete CBC 1705A.3, 1903A.6 & 1910A.1; ACI 318 1.9.1 & 26.4 Cementificus materials		CEL/See List	10/3//
B-C2	Х	Concrete CBC 1705A.3, 1903A.5; ACI-318 1.9.1 & 26.4 Aggregates/Reactive aggregates		CEL/See List	955
B-C3	х	Concrete CBC 1705A.3, ACI-318 26.4.1.3 Water		CEL/See List	明知
B-C4	х	Concrete CBC 1705A.3 & 1905A.1.16; ACI-318 26.12 Strength test		CEL/See List	DSE;
B-C5	х	Concrete CBC 1705A.3 & 1910A.2; & ACI-318 20.2, 25.4.5.1 & 26.6.1.2 Metal reinforcement (including welded wire fabric and headed rebar)		CEL/See List	DSE N
B-C7	х	Concrete CBC 1705A.3 & ACI-318 20.5 Headed stude and headed stud assemblies		CEL/See List	PAFE.
82-B	×	Concrete CBC Table 1705A.3 Item #2e, 1903A.8 Weldability of reinforcing bars		CEL/See List	DSE:
B-C15	х	Post-installed anchors CBC 1910A.5 Installation verification test		CEL/See List	DSE:
teel			A	0.3	2
B-S1	х	Steel CBC 2203A.1 Identification test for structural steel and cold formed steel	х	CEL/See List	DSF(
B-82	х	Steel CBC 2213A.1 & 1705A.13.1 High strength boits, nuts, and washers		CEL/See List	DSF(
ES-8	х	Steel CBC 2213A.2 & 1706A.13.1 End-welded studs		CEL/See List	DSE 8/10
B-84	х	Steel CBC 1705A.2.1 & 1705A.13.1.2 Nondestructive testing of welds		CEL/See List	DSB 8/10
B-87	х	Steel 2205A.4, 1705A.12.2 & AISC-341 K2 Beam to Column Moment Connections		CEL/See List	8/10
CTRI	ICAL	TESTS			
B-E1	х	Ground fault protection CEC 230.95(C) & 517.17(D) Performance test		Morrow Meadows	OO:

OSH-FD-303A (Rev 03/12/2015)

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#### **Lessons Learned**

Close out of phase 2 surgery

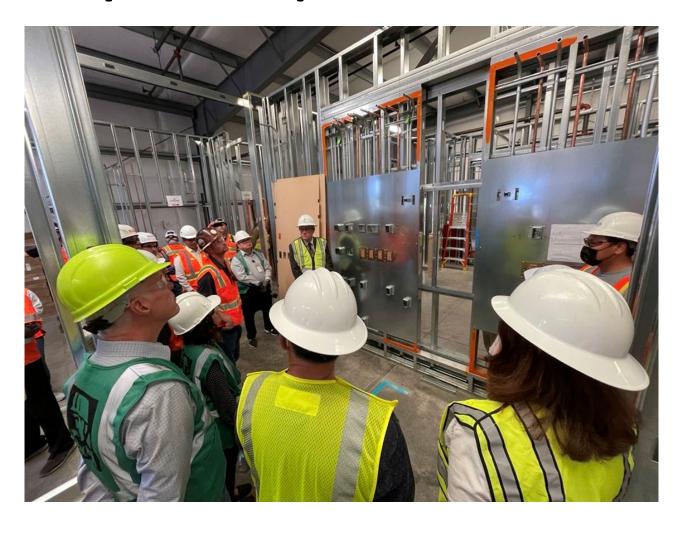


It has been asked that I push off the ACO visit till Wednesday the 27th If I do that we run the risk of not having the ACO scheduled and may loose time because today is a furlo day and I have the ACO scheduled for Monday at 7am there is no way to reschedule at the last minute please advise what you would need me to do keep in mind that the FLSO is also scheduled for a final fire alarm test on Monday the 25th at 10:30 am. As of today the system has not been tested I was sheduled to test today at 6am but the system was not programed properly to allow testing with the fan function in operation to shut down the unit. Mario and I will be testing the fire alarm system today at noon again without the fan operating per the fire alarm matrix. I received a report by the ACO allowing me to approve ceiling closure as to not effect the weekend work and also confirmation from the FLSO to take down the temp walls after the IOR punch list and testing is complete, Scott and myself are doing everything possible to help you thru this phase please let us know how you would like to proceed.

Thank you Inspector of Record



### Respect People and Processes



- Be respectful of people's time and commitments
- Be complete, meaningful, and timely with requests
- Be objective in describing issues and avoid making situations personal
- Be grateful and don't take people for granted
- Be prepared and plan ahead to avoid creating emergent situations



#### **True Teamwork**

- We build facilities
   that help save lives –
   elevates significance
   and importance of
   our work
- We can sleep better knowing inspections were done with care and attention to approved plans and specifications





## Perspective of the Contractor & Subcontractors – Build To Pass

**Cody Bartley – DPR Construction** 





### IOR and Testing Agency

### Inspect-To-Pass

#### • Preview:

- What attitude should an inspector have toward a project and the project team?
- What does "inspect-to-pass" mean for any inspector (IOR or special)
- What does "inspect-to-pass" NOT mean
- What are the principles & practices that serve as a foundation of the "inspect-to-pass" approach?
- And how are these principles put into action?
- What can make a collaborative inspection approach challenging, and how does an inspector deal with it?



#### Metal Attitude

- How do you view the Contractor?
- How do you view the Designers?
- How do you view the Owners?
- How do you view OSHPD and the field staff?
- How do you view the project as a whole?



### What "Inspect-To-Pass" Is NOT:

- It does NOT mean that the IOR is giving the contractor a free pass to do things incorrectly.
- It does NOT mean that the IOR is looking the other way, or turning a blind eye to non-compliant work.
- It does NOT mean that the IOR is going to be a pushover.
- It does NOT mean that an inspection will pass when the actual work installed does not match the approved construction documents or does not comply with minimum code requirements.
- It does NOT mean that OSHPD now wants IORs to pass Inspection Requests at all costs.



### What "Inspect-To-Pass" Means:

- Inspect to Pass is the mental attitude with which you approach your inspection duties.
- Inspect to Pass is a philosophical approach to inspection.
- When that philosophical approach is put into action, Inspect to Pass is the embodiment of the <u>collaborative</u>, <u>communicative</u>, <u>pro-active</u> (anticipatory) approach to inspection.
- Inspect to Pass is project centric, NOT ego centric.



## The Principles of the Philosophical Approach of the Inspect-To-Pass (Collaborative) Approach:

- Collaboration
- Communication
- Proactivity (Anticipatory)



## Collaboration

- Have Team Mentality: As the IOR, you are part of that team.
- Responsibility to Ownership: You are paid by the owner and therefore have a fiduciary responsibility to ownership.
- Responsibility to the Public: You are licensed by the state and therefore have a moral responsibility to the people of California to see to it that the hospital is constructed in a safe manner.
- Responsibility to Title 24 Part 1: By statute, you have the legal responsibility to work under and take direction from the DPOR and report to the OSHPD field staff.



### Communication

- Should be open and transparent at all times.
- Should always be honest.
- Should be timely.
- Delivering Bad News.
- The project delivery method can influence how chains of communication go, but do not affect areas of responsibility.



# Proactivity (Anticipatory)

- As an IOR, you should be performing observation walks of your projects on a regular basis.
  - Large projects walk them at least twice a day
  - Small project regularly stop by and take a look at progress
- Be in constant communication with the superintendent regarding any potential deficiencies, deviations, or non-compliance.
- If you are truly proactive, and the contractor is responsive, the IR should just be just a formality.



# How the Philosophy Is Put Into Action

- Pre-Construction Phase
- Construction Phase
- Close-Out Phase



# What Can Make "Inspect-To-Pass" Challenging

- Uncooperative contractor
- Inexperienced contractor
- Uninvolved DPOR
- Ownership pushing speedy inspection approvals over compliance
- Ownership not being willing to pay for a sufficient number of IORs
- If the IOR feels bullied or pressured to pass inspections



# Key Points To Remember

• TBD

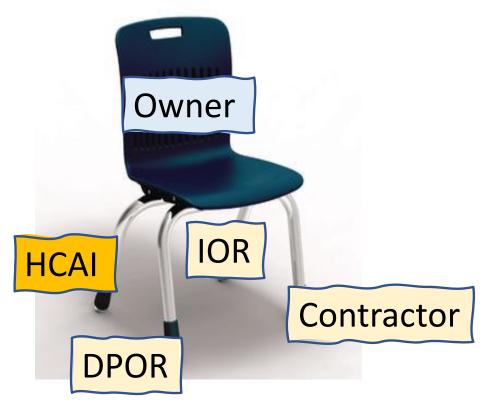




# Collaborative Approach to Hospital Construction

**HCAI-Observe to Pass** 

# Somebody said: "A project team is like a chair, 4 legs"



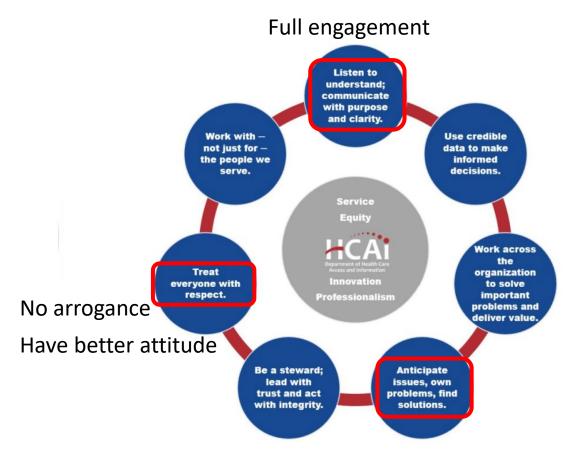
Team Effort with any project delivery: One Goal



# **Support to Pass**



#### **Guiding Principles**



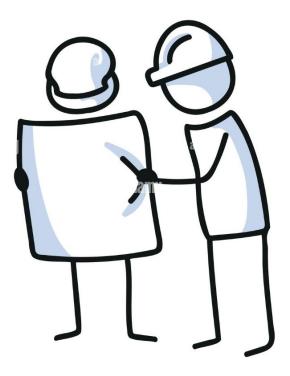


# **HCAI** Responsibility

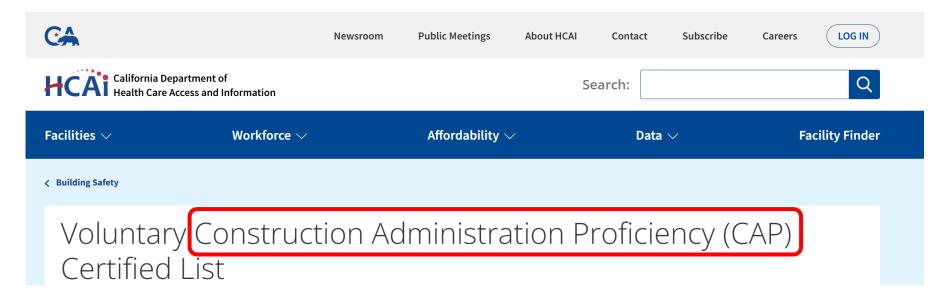
- Review Projects for approval (new projects, ACD), concurrence (NMA), sign off (TIO)
- Observe the construction work:
  - Walk with IORs and DPOR, GC too if possible, Owner PM
  - Meeting on site with the team
- Issue Field Report, TIO SC/CoO/CF
- Monitor IOR performance
  - Certification Examination
  - Recertification
  - Ongoing Training
  - Ongoing Monitoring
  - Corrective Measures



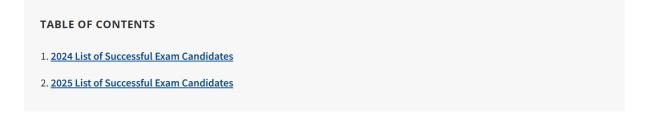
- Construction Administration Proficiency (CAP)
- Tip of the Day
  - Observation Reports
- IOR Voluntary Daily Report Template

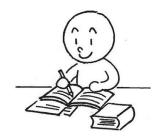




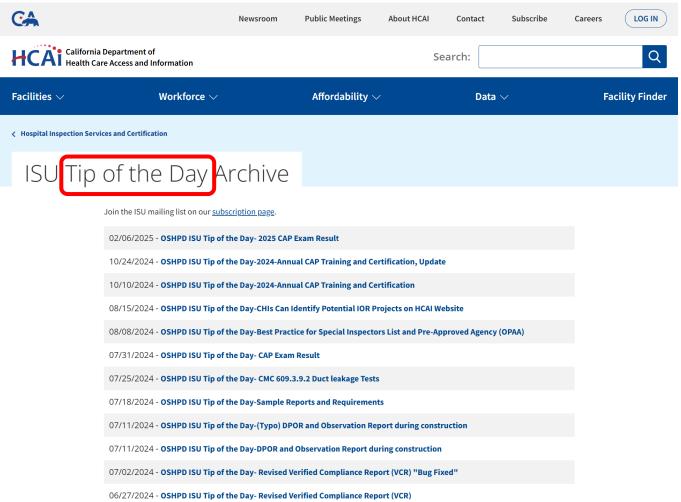


#### **LIST OF SUCCESSFUL EXAM CANDIDATES**















#### **Construction Matters:**

It is common to misuse words like Inspection and Observation.

The two terms have very different meaning and should be recognized accordingly. The regulations clearly apply these words differently with intentional application for each project stakeholder.

The word 'Observation' has been used interchangeably with the word 'Inspection' on forms and reports used by many Inspectors of Record (IOR) and Special Inspectors in several instances throughout the State.

INSPECTION 2022 CAC 7-144	OBSERVATION	Verified Compliance Report 2022 CAC 7-151
Reports:	Reports:	VCR:
Inspector(s) Of Record	Design Professionals 7-141	Design Professionals
Special Inspector	Office CAC 7-147	Contractor or Owner/Builder
Approved Agency		Approved Agency
	Contractors, Subs, Owner, etc	Special Inspector(s)
Note: IORs verify Special Inspection	they are encouraged to provide observation	Inspector(s) Of Record

#### Today's Tip:

OSHPD Field Staff will strive for consistency by enforcing terminology that aligns with the regulations:

'Inspection': To be used by Approved Agency and/or Special Inspectors and IORs

'Observation': To be used by all other project stakeholders\_.e.g.-OSHPD Field Staff and Design Professional.

#### The Big Idea:

During construction, inspection reports/daily reports are used by the Approved Agency and/or Special Inspectors and IORs; while other project stakeholders provide observation reports.

Do not confuse the above reports with the Verified Compliance Report (VCR).

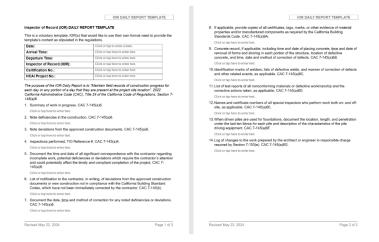
VCRs are submitted to the Office during a period of work/milestone by Design Professionals, Contractor or Owner/Builder, Approved Agency, Special Inspectors, and IORs reporting their personal knowledge of the completion of the specific portion of the project. CAC 7-151.





#### **Construction Matters:**

The purpose of the Inspector of Record (IOR) Daily Report is to "maintain field records of construction progress for each day or any portion of a day that they are present at the project site location." 2022 California Administrative Code (CAC), Title 24 of the California Code of Regulations, Section 7-145(a)6.



#### Today's Tip:

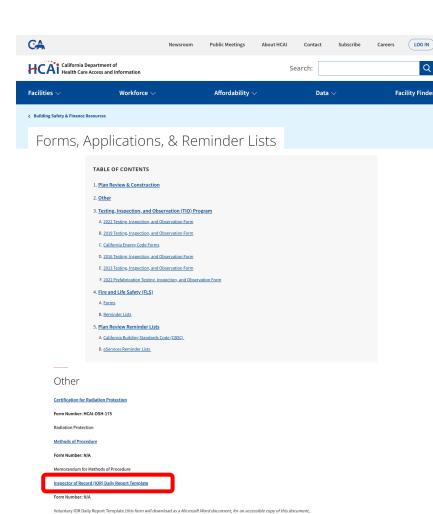
Using the Voluntary Template helps IORs to provide the required information, per CAC 7-145(a)4 and CAC 7-145(a)6. This is not a mandatory template. IORs that decide to use their own template shall meet the minimum code requirement. Click the  $\underline{\text{link}}$  to get to the template

#### The Big Idea:

To support IORs, HCAI Inspection Services Unit (ISU) is providing the Voluntary Template. Additional documentation may be needed to support the daily report and can be added as an attachment.

If you have any question, please email <a href="mailto:isu@hcai.ca.gov">isu@hcai.ca.gov</a>

If you would like to know more, please register <u>here</u> for the Field Brief Advice (FBA) on July 10th at 1PM.





TOR DAILY REPORT TEMPLATE

#### Inspector of Record (IOR) DAILY REPORT TEMPLATE.

This is a voluntary template. IOR(s) that would like to use their own format need to provide the template's content as stipulated in the regulations.

Date:	Click or tap to enter a date.
Arrival lime:	Click or tap here to entertext.
Departure Ilme:	Click or tap here to enter lext.
Inspector of Record (IOR):	Click ortap here to enterlect.
Certification No.:	Click ortap here to enterlect.
HCAI Project No.:	Click or tap here to entertext.

The gurgoze of the IOR Delly Regord is to "Meintein field records of construction gragness for each day or any portion of a day that they are greatert at the graject site location". 2022 Celifornia Administrative Code (CAC), Title 24 of the Celifornia Code of Regulations, Section 7-145(a)5.

- Summary of work in progress. CAC 7-145(a)6.
- Click or tap here to enter best.
- 2. Note deficiencies in the construction. CAC 7-145(a)6.
- Click-or tap here to enter text.
- Note deviations from the approved construction documents. CAC 7-145(a)6.
- Click-or tap here to enter text.
- Click or tap here to enter built.
- Document the time and date of all significant correspondence with the contractor regarding incomplete work, potential deficiencies or deviations which require the contractor's attention and could potentially affect the timely and compliant completion of the project. CAC 7-145/496.
- Click-or tap here to enter text.
- List of notification to the contractor, in writing, of deviations from the approved construction documents or new construction not in compliance with the California Building Standard Codes, which have not been immediately corrected by the contractor. CAC 7-145(b).
- Click or tap here to enter text.
- Document the date, time and method of correction for any noted deficiencies or deviations. CAC 7-145(a)8.
- Click or tap here to enter built.

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TOR DAILY REPORT TEMPLATE

 Il applicable, provide copies of all certificates, tags, marks, or other evidence of material properties and/or manufactured components as required by the California Building Standards Code. CAC 7-145(a)6A.

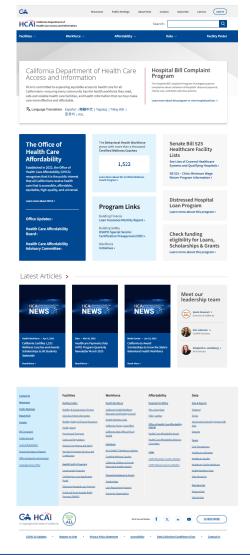
Click or tap here to enter best.

- Concrete record, if applicable, including time and date of placing concrete, time and date of removal of forms and shoring in each portion of the structure, location of defective concrete, and time, date and method of correction of defects. CAC 7-145(a)68.
- Identification marks of welders, lists of defective welds, and manner of correction of defects and other related events, as applicable. CAC 7-145(a)6C.
- Click or tap here to enter text.
- List of test reports of all nonconforming materials or defective workmanship and the corrective actions taken, as applicable, CAC 7-145(a)8D.
- Click or tap here to enter text.
- Names and certificate numbers of all special inspectors who perform work both on- and offsite, as applicable. CAC 7-145(a)8E.
- Click or tap here to enter text.
- When driven piles are used for foundations, document the location, length, and penetration under the last ten blows for each pile and description of the characteristics of the pile driving equipment, CAC 7-145(a)8F.
- Click or tap here to enter text.
- Log of changes to the work prepared by the architect or engineer in responsible charge required by Section 7-153(e), CAC 7-145(e)6G.

Click or tap here to enter text.

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Public survey:
How are we doing?
Quality of Service Survey







It is ok Not to know everything
Active listening: turn listening into action

#### **Empathy**

 Deeply understanding the challenges and lived experiences of people.





## **Support to Pass**

#### Oversight-To-Pass:

- Approved Construction Document with the rest of documentation.
   CAC 7-135, CAC 7-137, CAC 7-141, CAC 7-153
- Contractor to build per Approved Construction Document. CAC 7-143
- Inspector to inspect contractor work per approved document. CAC 7-145

Approved Construction Document, NSC, TIO CAC 7-135, CAC 7-137, CAC 7-141, CAC 7-153



Contractor CAC 7-143



IOR CAC 7-145





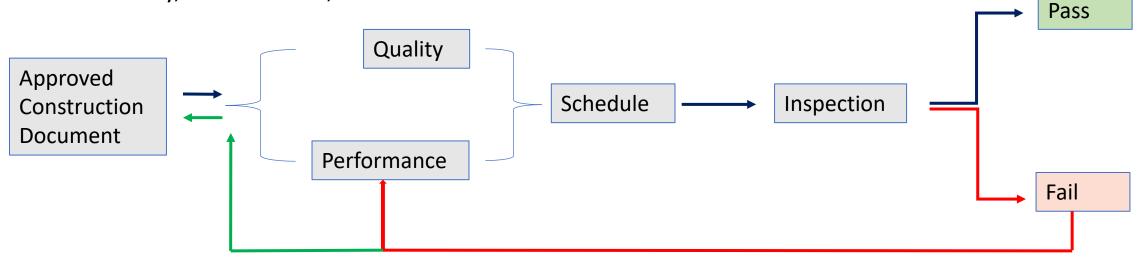




# **Support to Pass**

Do you have an "inspect to pass" mentality?

• Quality, Performance, Schedule





Item #5

Discuss ideas for the introduction and conclusion and determine who should deliver each

Discussion and public input

Facilitator: Michael Davis (or designee)

Item #6 Plan for future meetings and practice sessions

- Schedule subsequent subcommittee meeting
  - Goal: Refined practice session, including the introduction and conclusion
- Discuss webinar dates
- Discussion and public input

Facilitator: Michael Davis (or designee)

# Item #7 Comments from the Public/Subcommittee Members on Issues not on this Agenda The Subcommittee will receive comments from the Public/Subcommittee Members. Matters raised at this time may be taken under consideration for placement on a subsequent agenda. Facilitator: Michael Davis (or designee)

No future Collaborative Inspection Approach to Field Inspections Webinar Development Subcommittee meetings scheduled at this time.

Item #8 Adjournment