



Hospital Building Safety Board Full Board Meeting AGENDA

June 3, 2025
10:00 a.m. – 4:00 p.m.

June 4, 2025
9:00 a.m. – 3:00 p.m.

****Please note early start time****

The Board 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).)

Location:

[355 South Grand Avenue, Ste. 2000, Los Angeles, CA 90071](#)

[Day 1 Teams Meeting Access](#); Meeting ID: 219 592 278 097; Passcode: Ud3zd2Vu
Call in: (916) 535-0978; Phone Conference ID: 595 114 58#

[Day 2 Teams Meeting Access](#); Meeting ID: 298 841 422 261; Passcode: SA6WY646
[Call in](#): (916) 535-0978; Phone Conference ID: 540 056 010#

- Item #1 Call to Order and Welcome
Facilitator: Jim Malley, SE, Senior Principal, Degenkolb Engineers; Board Chair (or designee)
- Item #2 Roll Call and Meeting Advisories/Expectations
- Determination of Quorum
 - Conduct of Meeting
- Facilitator: Veronica M. Yuke, Manager, HCAI; Executive Director (or [designee](#))*

Item #1 Call to Order and Welcome
*Facilitator: Jim Malley, SE, Senior Principal, Degenkolb Engineers,
WSP; Board Chair (or designee)*

Item #2 Roll Call and Meeting Advisories/Expectations

- Determination of Quorum
- Conduct of Meeting

Facilitator: Veronica M. Yuke, Manager, HCAI; Executive Director (or designee)

Item #3

Department of Health Care Access and Information (HCAI) Update

- Swearing-in Ceremony for new HBSB members:
 - Mikhail Fuks, Mechanical Engineer Representative
 - Kelly Martinez, Public Member Representative
 - Noella Tabladillo, Public Member Representative
- Recognition of outgoing HBSB Members:
 - Louise Belair, Mechanical Engineer Representative
 - Michael Foulkes, Public Member Representative
- HCAI Update
- Discussion and public input

Facilitator: Elizabeth Landsberg, Director, HCAI (or designee)



Presented to
Louise Belair



Mechanical Engineer Member
2017-2025
Hospital Building Safety Board



Presented to

D. Michael Foulkes

In recognition of your dedicated service
and lasting impact on the
Hospital Building Safety Board.

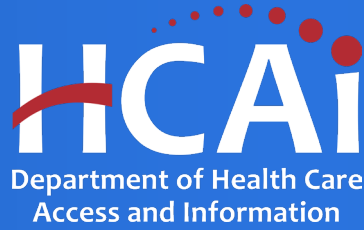
Thank you for your years of
commitment and leadership.



Hospital Building Safety Board

Board Member
1995 – 2025

- Item #4 Overview and approval of the December 11 – 12, 2024 Full Board draft Meeting Report/Minutes
- Discussion and public input
- Facilitator: Jim Malley (or designee)*



Hospital Building Safety Board

Report by
James O. Malley, Board Chair

BOARD MEMBERS Present:

Louise Belair, 2024 Board Chair

Janice Cheung, Jennifer Cox, Michael Davis, Gary Dunger, Teresa Endres, Michael Foulkes,
Martin Hudson, Courtney Johnson, Scott Mackey, Farzad Naeim, Carl Newth

DIRECTOR APPOINTED EX-OFFICIO MEMBERS Present:

David Bliss, Bert Hurlbut, Michael O'Connor

STATUTORY EX-OFFICIO MEMBERS Present:

Elizabeth Landsberg, HCAI Director; Chris Tokas, OSHPD Deputy Director; Kevin Day, Building Standards Commission (Delegate);
Nathaniel Gilmore, Department of Public Health (Delegate); Jennifer Thornburg, State Geologist (Delegate)

HCAI STAFF Present:

Arash Altoontash, Scott Christman, Andia Farzaneh, Roy Lobo, Mia Marvelli, Richard Tannahill

HBSB STAFF Present:

Veronica Yuke, Executive Director, Marcus Palmer, Evett Torres

MEETING REPORT:

Meeting Date: December 11-12, 2024

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

- **Topic 1:** Call to Order and Welcome
 - Louise Belair, Board Chair called the meeting to order.
- **Topic 2:** Roll Call and Meeting Advisories/Expectations
 - Quorum was established.
 - Veronica Yuke, Executive Director read the public announcement regarding meeting rules and procedures.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

- **Topic 3:** HCAI Update – Elizabeth Landsberg, HCAI Director
 - Elizabeth Landsberg provided an update on HCAI's legislative activities, mentioning the governor's actions on seismic safety bills. She discussed the signing of Assembly Bill 869 and the veto of Senate Bill 1432 and a Bill for 16 Providence facilities.
 - Director Landsberg then discussed the budget cuts, including a 7.95% reduction in operating expenses and the elimination of 10,000 vacant positions.
 - She covered the work of the Office of Health Care Affordability on primary care benchmarks and cost growth targets, including the requirement for health plans to achieve a 15% primary care spend rate by 2034.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

- **Topic 4:** Overview and Approval of August 15, 2024, Full Board draft Meeting Report/Minutes – Louise Belair, Board Chair
 - Louis Belair covered the key topics covered in the August 15, 2024 Full Board meeting including updates on HCAI Activities and committee reports.
 - Highlights were:
 - HCAI activities update
 - Updates on budget shortfalls, loan approvals, and legislative actions related to seismic standards.
 - Nomination and approval of the Hospital Building Safety Board Chair (James Malley) and Vice-Chair (Scott Mackey).
 - Review and Approval of previous full board, committee and subcommittee meeting reports and motions.
 - OSHPD, Building Standards Unit, Inspection Services Unit, Fire Prevention Unit, and Structural Services Section updates.

Meeting Date: 12/11-12/2025

OVERVIEW OF TOPICS

- **Topic 5: Education and Outreach Committee, Scott Mackey, Chair**
 - Scott reported on committee meetings on 8/1/24 and 9/26/24 that continued the committee's efforts to improve stakeholder engagement, disseminate critical knowledge and address key educational needs.
 - The committee helped publish two design guides in 2024: " Design Guide for Working on Projects under OSHPD Jurisdiction – Tips from the Experts" and "Design Guide for Planning and Preparing for Disasters". The committee also completed two very successful webinars on " Preapproved Fabricated Components and Systems" and "PIN 50 - Integrated Review."
 - The new Certification Training, Construction Administrative Proficiency (CAP) program launched this year and had a 39% pass rate on the initial exam.
 - The committee also increased engagement with rural hospitals and under-resourced facilities.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

- **Topic 6: “Inspect-to-Pass Approach to Field Inspections” (SINCE RE-NAMED) Webinar Development Subcommittee – Michael Davis, Subcommittee Chair**
 - Michael Davis provided an overview for approval of the October 26, 2024, draft meeting report and update on planning for the webinar. The subcommittee aims to improve field inspection processes by standardizing best practice protocols and fostering collaboration efficiency between regulatory agencies, healthcare facilities, and contractors to enhance efficiency.
 - The subcommittee finalized a draft outline of the webinar to include: preparation steps for inspections, emphasizing pre-inspection documentation, strategies for resolving common compliance issues, and case studies showcasing successful collaborations between inspectors, contractors, and facility owners.
 - The committee assigned material development to: Michael Davis: IOR and testing agency portion, Cody Bartley: contractors and subcontractors, Scott Mackey: DPORs, Gary Dunger: ownership perspective, and Monica Colosi and Joe LaBrie: OSHPD and field staff portion

Meeting Date: 11/11-12/2024

OVERVIEW OF TOPICS

- **Topic 7: Codes and Processes Committee – Michael O'Connor, Committee Chair**
 - Michael O'Connor provided an overview for Approval of the May 8, 2024, draft meeting report/minutes.
 - Highlights were:
 - Details on the triennial code cycle timeline and process, including key deadlines and amendments.
 - Overview of the eTIO system development and the standard details project.
 - Action items included:
 - Finalize and distribute an onboarding guide for the eTIO system, focusing on accessibility for small and rural facilities.
 - Review feedback to strengthen sustainability provisions in modular 12 construction guidelines.
 - Plan training and outreach sessions to prepare stakeholders for the 2025 14 code updates.

Meeting Date: 12/11-12/2025

OVERVIEW OF TOPICS

- **Topic 8:** Structural and Nonstructural Regulations Committee – Louise Belair
 - Louise Belair presented an overview for Approval of October 23, 2024, draft meeting report.
 - Highlights were updates on:
 - Triennial code cycle updates and timelines for 2025 CBC and amendments to CAC related to AB 869.
 - Summarizing plan to streamline process to update pre-approval programs to align with new ASCE 7-22 force equation to provide supplementary guidance to avoid invalidating current pre-approvals.
 - Proposed PIN to align OSHPD steel QA/QC requirements with latest IBC and AISC standards to enhance compliance, streamline inspections and reduce costs.
 - The automated seismic compliance portal to streamline submission of compliance plan submittals.
 - Update on implementation AB 869 for extensions of seismic compliance deadlines for certain small/rural and other facilities.
 - Summary on AB 1882 reporting requirements for services provided at general acute care hospitals.
 - Summary of PIN proposed for design and implementation of NPC anchorage/bracing requirements.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

■ **Topic 9:** Instrumentation Committee – Martin Hudson, Committee Chair

- Martin Hudson provided an Overview for Approval of the October 29, 2024, draft meeting report.
- Highlights were:
 - Discussion of concern of limited promotion of distribution of white paper on seismic instrumentation.
 - Agreement to establish a subcommittee with the Education and Outreach Committee to develop a webinar based to educate stakeholders on the white paper and the OSHPD instrumentation program.
 - Review of recently collected data from OSHPD instrumented buildings and noted interesting response of buildings with different foundation systems at a new hospital in Oxnard.
 - Continued collaboration with OSHPD staff related to implementation of instrumentation program.
 - Discussed ways to enable real-time earthquake response using more modern instrumentation and data collection capabilities.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

- **Topic 10:** Ad hoc Board Procedures Committee, Michael Foulkes, Chair
 - The committee met to discuss changes to the Board's Policies and Procedures.
 - The first change discussed was updating the frequency of board meetings to be “up to three times per year” to provide flexibility. In year's when there is a chair election the board will have three meetings, while in non-election years the board will meet twice.
 - The second change the committee made was to update references to “Facilities Development Division” to Office of Statewide Hospital Planning and Development”.
 - A motion was to approved to make these changes to the Board Policies and Procedures.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

- **Topic 11:** Review and Approve 2025 Committee Assignments, Goals and Meeting Calendar, Facilitated by Scott Mackey, Incoming Board Vice The committee met to discuss changes to the Board's Policies and Procedures.
 - Scott Mackey presented the proposed meeting dates for each committee in 2025. The full Board will meet in 2025 on June 3-4 in Los Angeles and June 11-12 in Sacramento.
 - A comment was made to support the committee assignments. The following suggestions were made:
 - Consider incorporating a mid-year review process to assess progress on committee goals and refine strategies as needed.
 - Provide annual workshops for smaller facilities to address compliance challenges.
 - Early publication of the final meeting calendar.
 - A motion was made and approved to approve the committee assignments, goals and meeting calendar.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

- **Topic 12:** Office of Statewide Hospital Planning and Development Update -
Chris Tokas, OSHPD Deputy Director
 - Chris Tokas provided an end-of-year briefing, celebrating achievements and victories as 10 an organization. He emphasized the importance of having a strategic and dynamic plan 11 of operations. Chris summarized the following topics:
 - Strategic Goals and Achievements – Improving consistency in field operations, enhancing programs and enriching pre-approved details.
 - Legislative Mandates and Compliance – The following bills were noted: SB 1432, AB 869, SB1447, SB1119, the Glazer bill, and SB1319.
 - Plan Review and Field Performance Update – Workload and distribution of projects across the regions emphasizing the need for accountability and collaboration among all parties to result in efficient review and meeting project timelines.
 - Prefabrication and Climate Change Effects - Were highlighted, including all electric hospital.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

- **Topic 12:** OSHPD Update – Continued

- Mia Marvelli provided an update on the Building Standards Unit (BSU) activities, emphasizing:
 - Collaboration with other agencies such as CDPH and State Fire Marshal.
 - Role of the BSU in developing and publishing code updates and various guides
- Joe Labrie provided an update on the Inspection Services Unit (ISU), emphasizing:
 - Increasing the competency of IOR's and internal staff.
 - The importance of training programs such as the Construction Administration Proficiency (CAP) certification, including the success of the first exam and the value of CAP certification for hospital administrators and design professionals.
 - Improving consistency, accountability and collaboration of all parties (OSHPD, Design Professionals and Owners).
 - Continuous improvement and adaptation to meet the changing needs of healthcare facilities.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

■ Topic 12: OSHPD Update, Continued

- Roy Lobo provided an update for the Structural Services Section, emphasizing:
 - NPC compliance progress is that there are no NPC-1 buildings, but 50% are NPC-2. 63% of hospitals are fully compliant, but 11% did not submit any requirements by the 1/1/24 deadline.
 - AB1882 and Signage Requirements. 76% of facilities have reported their services. 13% of hospitals have not submitted any signage, and some have non-compliant signage.
 - Small/Rural Hospital Relief Program – Only \$1.2 million of \$57 million has been allocated. ~~36~~38? applications have been received, 26 approved and 12 finalized. Need to get to SPC4D by 2030.
 - Pre-Approvals – 800 OSP's ready for use. 740 OPM's approved. 59 approved testing agencies.
- Husain Bhatia provided on update on Emergency Operations Center (EOC) activities, emphasizing:
 - The EOC was kept busy by both fires and earthquakes. Spotter cameras and AI used on VISTA and Thompson fires. Cape Mendocino earthquake was discussed.
 - 85 hospitals are currently instrumented, with a need to upgrade obsolete equipment to provide real-time information for post-earthquake response.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

- **Topic 12:** OSHPD Update, Continued
 - Chris Tokas completed the presentation with a discussion of future goals and objectives:
 - 2025 objectives include a smooth to new headquarters office in July, addressing new statutory changes for clinics and addressing AB 869 for seismic extensions.
 - Transition of EOC to cloud-based system.
 - Emphasis on importance of continuous collaboration with facilities to meet seismic compliance deadlines.
 - An extensive discussion period ensued. Topics included:
 - Concerns about impacts of climate change on hospitals, such as heat burden, air quality, resource availability (fuel, e.g.).
 - Project review demands to meet demands of seismic compliance deadlines, expansion of collaborative approaches to plan review, and additional contracting out of review work.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

- **Topic 13:** Special Presentation: Delivering the First All-Electric Hospital in the Nation, Louise Belair, Joe Brothman (UCI) and Chris Tokas
 - Louise Belair, Joe Brothman, and Chris Tokas facilitated a special presentation that explored the challenges and successes of delivering the first all-electric hospital in the United States at the UC Irvine Medical Center. The project includes four buildings, including a central utility plant, two parking structures, and a 144-bed hospital with an emergency department. The project goals included the University of California's carbon neutrality initiative, aiming to be carbon neutral by 2025. The payback time for the investment is expected be less than 4 years.
 - Decarbonization strategies included leveraging renewable energy sources like solar power to minimize the carbon footprint and partnering with utility providers to ensure clean electricity supply. Electrification and decarbonization combined to ensure sustainable building operations, reducing indoor and outdoor air pollution, and improving air quality for patients and staff. All elements of energy usage in the building were assessed for potential savings.

Meeting Date: 08/15/2024

OVERVIEW OF TOPICS

- **Topic 13:** Special Presentation: Delivering the First All-Electric Hospital in the Nation, Louise Belair, Joe Brothman (UCI) and Chris Tokas - Continued
 - There were regulatory obstacles to the project and the project is consistent with California energy goals.
 - Future plans include eliminating diesel generators, introducing microgrids and battery storage and consideration of hydrogen as a fuel source.
 - A lengthy discussion period followed, with extensive positive feedback praising the project and the work of all involved.

Meeting Date: 12/11-12/2024

OVERVIEW OF TOPICS

- **Topic 14:** Comments from the public/board members not on this agenda – Louise Belair, Board Chair
 - Board members expressed gratitude to Chair Louise Belair for her outstanding leadership over the last two years.
- **Topic 15:** Adjournment – Louise Belair, Board Chair
 - Meeting adjourned on December 12, 2024 at 2:03 pm.

Meeting Date: 12/11-12/2024

OVERVIEW OF MOTIONS

- **Motion 1:** The board unanimously voted to approve the August 15, 2024 - Full Board meeting draft Report/Minutes as corrected.
- **Motion 2:** The board unanimously voted to approve the August 1, 2024, and September 26, 2024 – Education and Outreach Committee draft Reports/Minutes as presented.
- **Motion 3:** The board unanimously voted to approve the October 24, 2024– “Inspect-to-Pass Field Inspections” Webinar Development Subcommittee of the Education and Outreach Committee draft Meeting Reports/Minutes as presented.
- **Motion 4:** The board unanimously voted to approve the September 11, 2024 – Codes and Processes Committee draft Meeting Reports/Minutes as presented.
- **Motion 5:** The board unanimously voted to approve the October 23, 2024 – Structural and Nonstructural Regulations Committee draft Meeting Reports/Minutes as corrected.
- **Motion 6:** The board unanimously voted to approve the October 29, 2024 – Instrumentation Committee draft Meeting Reports/Minutes as corrected.

Meeting Date: 12/11-12/2024

OVERVIEW OF MOTIONS - Continued

- **Motion 7:** The board unanimously voted to approve the 2025 Committee Assignments, Goals and Meeting Calendar.
- **Motion 8:** The board unanimously voted to approve the October 24, 2024– “Inspect-to-Pass Field Inspections” Webinar Development Subcommittee of the Education and Outreach Committee draft Meeting Reports/Minutes as presented.

Meeting Date: 12/11-12/2024

ACTION ITEMS:

“Inspect-to-Pass Approach to Field Inspections” Webinar Development Subcommittee of the Education and Outreach Committee:

- Incorporate example case studies and allow for interactive discussion periods in the Inspect-to-Pass Approach to Field Inspections webinar.
- Finalize the content and schedule the webinar in early 2025.

Code & Process Committee:

- Finalize and distribute an onboarding guide for the eTIO system, focusing on accessibility for small and rural facilities.
- Review feedback to strengthen sustainability provisions in modular construction guidelines.
- Plan training and outreach sessions to prepare stakeholders for the 2025 code updates.

Structural and Nonstructural Regulations Committee:

- HCAI to develop new administrative regulations to support implementation 14 of AB 869.

Meeting Date: 12/11-12/2024

ACTION ITEMS:

Instrumentation Committee:

- The committee agreed to establish a subcommittee with the Education and Outreach Committee to develop a webinar promoting the Seismic Instrumentation of Healthcare Facilities white paper.
- Explore the creation of a centralized database for seismic event data to support research and decision-making.

OSHPD Update:

- Conduct public meetings to discuss revisions to clinic construction.
- Coordinate with CDPH to clarify requirements for chemical dependency recovery hospitals.
- Offer annual training program on construction administration proficiency.
- Schedule next certification exam for construction administration proficiency program.

Special Presentation: Delivering the First All-Electric Hospital in the Nation

- Explore the use of ground source heat exchange systems for future projects.
- Discuss concentrated solar technologies that can generate electricity and provide domestic hot water.

Meeting Date: 12/11-12/2024

CONCLUSION

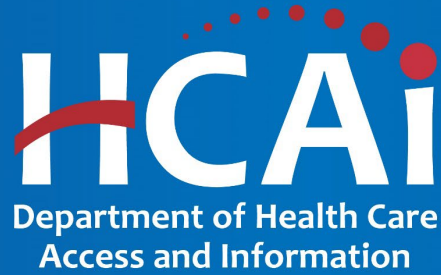
- Questions and Answers
- This report requires a MOTION by a Board Member and must be SECONDED by a Board Member for further ACTION.

Item #5

Ad hoc Board Procedures Committee

- Overview and approval of the December 11, 2024, draft meeting Report/Minutes
- Discussion and public input

Facilitator: Gary Dunger, Executive Director, Design and Construction, Cedars-Sinai Health System; Committee Vice-Chair (or designee)



Ad hoc Board Procedures Committee

by
Gary Dunger, Vice Chair

COMMITTEE MEMBERS:

**Michael Foulkes, Chair
Gary Dunger, Vice Chair
Louise Belair
Jim Malley**

OSHDP STAFF

Joe LaBrie

HBSB STAFF

**Veronica Yuke, Acting Executive Director
Marcus Palmer
Evelt Torres**

Ad hoc Board Procedures Committee Meeting Report:

Meeting Date: Wednesday, December 11, 2024
 10:00 a.m. – 11:00 a.m.

Ad hoc Board Procedures Committee Meeting

Date: Wednesday, December 11, 2024

- Michael Foulkes disclosed that the Board was scheduled to have only two, two-day Full Board meetings next year, instead of two, one-day Full Board meetings, and one, two-day Full Board meeting. Because the Board Policies and Procedures states that the that the Board meets three times a year, he noted that the Board Policies and Procedures needed to be updated to reflect the change.

Ad hoc Board Procedures Committee Meeting

Date: Wednesday, December 11, 2024

- The Committee discussed various wording options for changing section VII.A.1 and decided to add the words “up to” before “three times a year” and to remove “usually in April, August and December.”
- Gary Dunger pointed out the need to update section V.A.1 to replace “Facilities Development Division” with the Office’s new name, “Office of Statewide Hospital Planning and Development.”

Ad hoc Board Procedures Committee Meeting

Date: Wednesday, December 11, 2024

VII. Meetings

In accordance with Government Code, Sections 11120 through et seq., all meetings are open to the public as required by the Bagley-Keene Open Meeting Act.

A. The types of Board meetings that can be held are:

1) Regular Board Meetings

The Board convenes on the call of the Chair. The Board will meet ***up to*** three times a year ~~usually in April, August, and December~~. It is the intent that the meetings are held in various areas throughout the state.

Ad hoc Board Procedures Committee Meeting

Date: **Wednesday, December 11, 2024**

V. Board Members - Membership and Responsibilities

A. The Director of HCAI appoints members of the Board. When requested by the Director, prospective nominees will be interviewed by the Chair of the Board or Vice-Chair of the Board and the Executive Director. The Board consists of appointed members and six statutory ex-officio members.

1) The statutory ex-officio members include the Director of HCAI, the State Fire Marshal, the State Geologist, the Executive Director of the California Building Standards Commission, the Director of the Department of Public Health, and the Deputy Director of the ~~Facilities Development Division~~ **Office of Statewide Hospital Planning and Development** of HCAI, or their officially designated representatives.

Ad hoc Board Procedures Committee Meeting

Date: **Wednesday, December 11, 2024**

OVERVIEW OF MOTIONS

- The committee unanimously voted to approve changing “Facilities Development Division” in section V.A.1. to “Office of Statewide Hospital Planning and Development,” and changing the second sentence of section VII.A.1 to “The Board will meet up to three times a year.”

Ad hoc Board Procedures Committee Meeting

Date: Wednesday, December 11, 2024

CONCLUSION

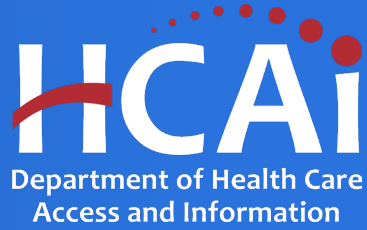
- Questions and Answers
- I move to accept the December 11, 2024, Ad hoc Board Procedures Committee meeting report

Item #6

Instrumentation Committee

- Overview and approval of the January 28, 2025, draft Meeting Report/Minutes
- Discussion and public input

Facilitator: : Farzad Naeim, PhD, SE, Esq, NAE, President, Farzad Naeim, Inc.; Committee Chair (or designee)



Instrumentation Committee

by

FARZAD NAEIM, COMMITTEE CHAIR*

MARTIN HUDSON, COMMITTEE VICE CHAIR (PRESENTING)*

COMMITTEE MEMBERS:

JIM MALLEY*

COURTNEY JOHNSON

JENNIFER THORNBURG*

CONSULTING MEMBERS:

HAMID HADDADI

MOH HUANG

TONY SHAKAL

HCAI STAFF:

CHRIS TOKAS, ARASH ALTOONTASH, HUSSAIN BHATIA,
EROL KALKAN, ROY LOBO, ANDIA FARZANEH

*COMMITTEE MEMBERS PRESENT

MEETING REPORT:

- Meeting Date: January 28, 2025

Meeting Date: 10/28/2025

OVERVIEW OF TOPICS

- **Discussion on issues related to enhancing instrumentation to health monitoring, and status of publication and distribution of the Seismic Instrumentation of Healthcare Facilities White Paper**

Facilitator: Farzad Naeim, Committee Chair

- **Planning Tasks and Objectives for 2025 and Beyond**

Facilitator: Farzad Naeim, Committee Chair

Topic 1: Discussion on issues related to enhancing instrumentation to health monitoring, and status of publication and distribution of the Seismic Instrumentation of Healthcare Facilities White Paper

Seismic Instrumentation of Healthcare Facilities

A White Paper on the Usefulness and Benefits of Seismic Instrumentation of Healthcare Facilities

By the
Hospital Building Safety Board
Instrumentation Committee

Presented to
California Department of Health Care Access
and Information (HCAI)

October 26, 2023

CA
HCAI California Department of Health Care Access and Information

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TABLE OF CONTENTS

1. Guides, Manuals, and Master Glossary
2. Presentations & Seminars
3. Webinars
4. Additional Information/Resources

Guides, Manuals, and Master Glossary

Advisory Guides

- Advisory Guide A1 - Fire Sprinkler Installation for CBPH/CMS
- Advisory Guide A2 - Sterile Compounding Pharmacies for Hospital Facilities
- Advisory Guide A3 - Infectious Disease Design and Review Checklist for Hospital and SNF Facilities
- Advisory Guide A4 - Acute Psychiatric Hospitals - NEW!
- Advisory Guide A5 - Acute Psychiatric Hospitals - NEW!
- Advisory Guide A6 - Alternate Source of Power for SHUs
- Advisory Guide A7 - Alternate Source of Power for SHUs
- Advisory Guide A8 - Electrical Guide for Health Care Facilities (Formerly "Electrical Guide for Health Facilities Review")
- Advisory Guide A9 - Sitework Under OSHPD Jurisdiction
- Advisory Guide A10 - Coming Soon!
- Advisory Guide A11 - Coming Soon!
- Advisory Guide A12 - Weather Protection for Interior Gypsum Wallboard - NEW!
- Advisory Guide A13 - HVAC Upgrade Construction Process for Existing Colleges and About Ceiling Utilities - NEW!

Design Guides

- Design Guide for Planning and Procurement for Disasters
- Design Guide for Working on Projects under OSHPD Jurisdiction - Ties from the Experts

FREER Manual

- FREER Manual - A Guide for Field Review (FR) Projects, Excluded (E) from OSHPD Plan Review, and Expedited Review (ER)
- Request for Excluded Work and FREER Manual (Form Number: HCAI-OSH-102)

Others

- Seismic Instrumentation of Healthcare Facilities - A White Paper on the Usefulness and Benefits of Seismic Instrumentation of Healthcare Facilities

Due to the complexity of the data, technical expertise is needed in order to interpret all the above content. If you have trouble reading please contact helpdesk@hcai.ca.gov

White Paper Link

tgonzalez@calhospital.org with any questions."/>

California Hospital Association

CALLS TO ACTION ABOUT US MEMBER LOGIN SEARCH

Issues Advocacy Education & Publications Newsroom

HCAI Releases White Paper on Seismic Instrumentation

CHA NEWS | 16 JAN 2023

Trina Gonzalez
Vice President, Policy

Contact
Trina Gonzalez
Vice President, Policy

What's happening: The Department of Health Care Access and Information's (HCAI) recent **white paper** covers how useful and beneficial it is for health care facilities to utilize seismic instrumentations, such as various sensors that measure accelerations and displacements.

What else to know: The paper was developed by the Hospital Building Safety Board's Instrumentation Committee and its information is valuable to hospital owners and managers, operators, design professionals, public officials, and the general public.

Seismic instrumentation records motions when earthquakes occur and are essential in understanding the behavior of hospital buildings due to and during earthquakes. As a result of this understanding, design and construction practices can be and have been modified so that future earthquake damage is minimized and continuous operation is maintained.

Contact Trina Gonzalez, vice president, policy, at tgonzalez@calhospital.org with any questions.

Topic 1: Discussion on issues related to enhancing instrumentation to health monitoring, and status of publication and distribution of the Seismic Instrumentation of Healthcare Facilities White Paper

- Future Webinar to Present Seismic Instrumentation Based on White Paper:
 1. Mechanics of setting up such a webinar were discussed, including coordination with Education Committee
 2. Agenda Item for Education Committee was discussed (Education Committee meeting February 13, 2025)
 3. Potential topics to be discussed in webinar was discussed
 4. Overall objective of webinar was discussed as being:
 1. Attractive to hospital facility personnel, showing benefits of such system
 2. Summary of White Paper without Attendees Having to Read Entire White Paper

Topic 1: Discussion on issues related to enhancing instrumentation to health monitoring, and status of publication and distribution of the Seismic Instrumentation of Healthcare Facilities White Paper (continued)

5. Chris Tokas to Incorporate Portions of White Paper in California Society of Hospital Engineers (CSHE) Annual Meeting presentation.
6. Executive summary to be developed (2 to 3 pages) to be distributed and given to webinar participants.
7. Real experience with instrumentation in earthquakes to be described in webinar (such as 2023 Turkey earthquakes)
8. In addition to webinar, short (3-5 minute) videos could be prepared and distributed – this could attract greater audience to webinar. Wendy Bohon of California Geological Survey could help produce videos with animations.

Topic 1: Discussion on issues related to enhancing instrumentation to health monitoring, and status of publication and distribution of the Seismic Instrumentation of Healthcare Facilities White Paper (continued)

9. In material presented, show actual website and notification abilities: current and anticipated.
10. Logistics of near-real-time (within 5 minute) monitoring discussed by committee
11. Data sharing of instruments across networks discussed, such as potential use of CSMIP instruments
12. Significant component of seismic health instrumentation is to help hospital operators not prematurely evacuate hospitals immediately after an earthquake

Topic 2: Planning tasks and objectives for 2025 and beyond

- Naeim led a discussion on strategic planning for 2025 and future objectives for the committee.
 - Work with CGS to establish hospital building to be instrumented
 - Review status of wood frame building instrumentation that has been approved and is in process of implementation
 - Webinar preparation (and associated potential videos)

Meeting Date: 1/28/2025

CONCLUSION

- Questions and Answers
- I move to accept the January 28, 2025, Instrumentation Committee meeting report

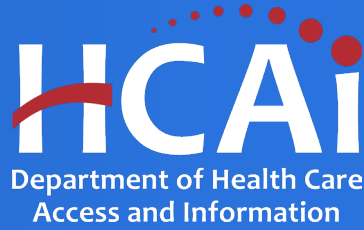
Thank you!

Item #7

Energy Conservation and Management Committee

- Overview and approval of the April 2, 2025, draft Meeting Report/Minutes
- Discussion and public input

Facilitator: Cody Bartley, DPR Construction; Committee Chair (or designee)



Hospital Building Safety Board

Energy Conservation & Management Committee

By : Cody Bartley, Chair

Energy Conservation & Management Committee

MEETING REPORTS:

- Meeting Date: April 2, 2025

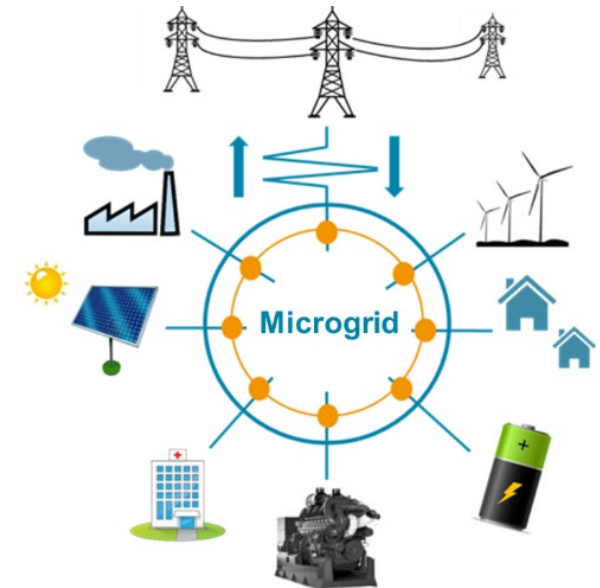


Energy Conservation & Management Committee

MEETING Date: April 2, 2025

Overview of Topics

- Evolution of Microgrid Technologies to Support Healthcare Facilities in California –
Facilitated by Ryan De La Cruz
 - Discussed how diesel generators became the standard for emergency power but the DERs (Distributed Energy Resources) are being deployed for cost saving and sustainability goals but 2 challenges being
 - 1) lack of seismic certification
 - 2) Perceived reliability concerns compared to diesel generators
 - Forecasted broader adoption over next decade driven by
 - 1) Technological advancements
 - 2) Newer funding models
 - 3) Multiple value streams such as demand response and energy arbitrage.



Energy Conservation & Management Committee

MEETING Date: April 2, 2025

Overview of Topics

- Impact and opportunity of AB 2208 ban of fluorescent lamp sales in California by John Griffiths
 - Sean Eyler explained how healthcare facilities could receive utility rebates and no-cost energy audits. Discussed available utility incentives through PG&Es Healthcare Energy HEFI. Program services are free and funded by utility surcharges already paid by customers.
 - Jamie Schnick discussed that PIN 13 on LED Lighting Retrofit has been incorporated into the FREER manual where it is meant to help streamline the processes of permitting and changing out the fixtures.

Energy Conservation & Management Committee

MEETING Date: April 2, 2025

Overview of Topics

- **Microgrids Update by Jamie Schnick**
 - Explained mission of the OSHPD Microgrid Task Force is to accelerate the implementation of compliant microgrids by streamlining regulatory processes, consistent project review and increasing awareness across the healthcare sector.
 - Discussed demonstration projects that illustrate how healthcare facilities are deploying Distributed Energy Resources. Discussed 3 example projects
 - Emphasized these projects aim to prove that microgrids can be code-compliant and as reliable as diesel based emergency power systems. Highlighted regulatory progress being made to legitimize healthcare microgrids.

Energy Conservation & Management Committee

MEETING Date: **April 2, 2025**

Overview of Topics

- Concluded the Meeting by discussing 3 future meeting topics
 - Energy Saving strategies during RACS
 - Improved Commissioning practices
 - Responding to extreme weather-related system failures

CONCLUSION

- Questions and Answers
- I move to accept the April 2, 2025, Energy Conservation and Management Committee meeting report

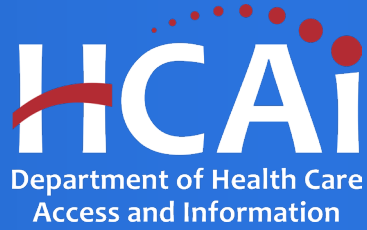


Item #8

Structural and Nonstructural Regulations Committee

- Overview and approval of the March 12, 2025, draft Meeting Report/Minutes
- Discussion and public input

Facilitator: Jim Malley, Committee Chair (or designee)



Structural and Nonstructural Regulations Committee

by
James O. Malley, Chair

COMMITTEE MEMBERS:

Farzad Naeim, Vice Chair

Cody Bartley

Louise Belair

Michael Davis

Teresa Endres

Martin Hudson

Courtney Johnson

Jennifer Thornburg

CONSULTING MEMBER : Mark Hershberg

HCAi STAFF:

Chris Tokas, Richard Tananahill, Arash Altoontash, Roy Lobo,
David Neou, Carl Scheuerman, Mike Hooper, Joe LaBrie, Mia Marvelli,
Jamie Schnick, Ali Sumer, Veronica Yuke, John Gray

MEETING REPORTS:

Meeting Date: March 12, 2025

Meeting Date: March 12, 2025

OVERVIEW OF TOPICS

- Topic 1 –Triennial Code Cycle Update and Timelines (Mia Marvelli, HCAI)
- Topic 2 – Streamlining the Continued Use of Existing OSHPD Preapproval Programs to Align with the New Nonstructural Components Force Equation in ASCE 7-22 (Tim Piland; HCAI)
- Topic 3 –Policy Intent Notice (PIN) 77 for Steel Quality Assurance and Quality Control (Roy Lobo for Mohammad Karim; HCAI)
- Topic 4 – New Automated Seismic Compliance Project Portal to Facilitate Submittals of Updated Compliance Plans (Ali Sumer; HCAI)
- Topic 5 – Advisory Guide A13 – NPC Upgrade Construction Process for Existing Ceilings and Above Grade Utilities (Ali Sumer: HCAI)

Meeting Date: March 12, 2025

OVERVIEW OF TOPICS

- Topic 6 –Seismic Compliance Update on Recently Signed Legislation AB 869 (Chapter 801) and PIN Development (Ali Sumer; HCAI)
- Topic 7 – Proposed Requirement for Amplification of Diaphragm Transfer Shears by Ω_0 and R_{upper}/R_{lower} in building when a Type 4 out-of-plane irregularity is triggered by a stiffness irregularity, using the Two-stage analysis procedure in ASCE 7 (Roy Lobo; HCAI)
- Topic 8 - Proposed reduction of the Lower bound F_p force requirement for design of nonstructural components in base isolated hospital buildings (Roy Lobo: HCAI)
- Topic 9 - Proposed removal or revision of California Building Code exceptions to AISC (American Institute of Steel Construction) design specifications (Jim Malley; HB SB Member)
- Topic 10 – Comments from the Public/Committee Members on Issues Not on this Agenda (Jim Malley; HBSB Member)

Meeting Date: March 12, 2025

Topic 1 –Triennial Code Cycle Update and Timelines

- Mia Marvelli provided an update on the status and upcoming actions for the 2025 California Building Standards Code (Parts, 1, 2 and 10). In December 2024 and February 2025, the CBSC adopted agency rulemaking proposals which form the 2025 version of the codes, incorporating new model codes. Effective date is 1/1/26.
- Work has begun on the Intervening Code Cycle, that will become effective on 1/1/28. The majority of work by staff and HBSB committees on this effort will occur in 2025, with approval by the HBSB at the December meeting and submittal to the CBSC that month. Changes will include updating reference standards, clarifying ambiguous code provisions identified from stakeholder feedback.
- Working to support legislative implementation such as SB 1362 (OSHPD 3 changes for alternative birthing clinics, including public meetings and stakeholder feedback sessions).

Meeting Date: March 12, 2025

Topic 2: Streamlining the Continued Use of Existing OSHPD Preapproval Programs to Align with the New Nonstructural Components Force Equation in ASCE 7-22 (Tim Piland; HCAI)

- Tim Piland summarized the changes for the preapproval programs to align with the significantly changed ASCE 7-22 force equations for architectural and mechanical components now incorporated into the 2025 CBC. A webinar will be held on April 9 to explain the changes (with examples) and the implications for both the OSP and OPM program and the simplified compliance developed by OSHPD. A large turnout is expected with over 400 registrations over a month ahead of the event.
- During the discussion period, Mr. Piland confirmed that webinar will be recorded and posted on the website. The committee thanked OSHPD for preparing this much needed information.

Meeting Date: March 12, 2025

Topic 3 –Policy Intent Notice (PIN) 77 for Steel Quality Assurance and Quality Control (Roy Lobo for Mohammad Karim; HCAI)

- Roy Lobo delivered an update on Policy Intent Notice (PIN) 77, confirming that the document is now officially published and available on the HCAI website. PIN 77 establishes updated guidelines for Steel Quality Assurance and Quality Control of steel fabrication and erection, specifically targeting construction submittals and inspections involving steel components in healthcare facilities.
- New project designed under the 2025 CBC may incorporate PIN 77. For existing projects, applicants must revise their already-approved specifications and submittals if they choose to apply PIN 77 retroactively.
- The committee acknowledged this as being a valuable step forward to better align OSHPD projects with wider industry approaches and thanked OSHPD for this effort.

Meeting Date: March 12, 2025

Topic 4 – New Automated Seismic Compliance Project Portal to Facilitate Submittals of Updated Compliance Plans (Ali Sumer; HCAI)

- Ali Sumer introduced the new automated Seismic Compliance Project Portal to modernize and streamline submissions of seismic compliance plans. The portal was launched on March 3, 2025, supporting facilities ability to meet January 1, 2026 regulatory requirements. A User Guide and PIN 80 detailing procedures for compliance plan submissions and applications for delay under 869 accompany the release of the portal.
- The portal enables hospitals to submit building-by-building compliance plans and report on SPC/NPC statuses.
- It includes pre-populated building data for each facility, drop down menus to facilitate reporting in a consistent manner, a milestone tracking mechanism to determine if facilities are making the progress needed to meet the 2030 deadlines, and space for OSHPD to provide comments and feedback. The information is publicly available on the HCAI website.
- The intent is to promote timely, accurate submissions that help reduce delays.

Meeting Date: March 12, 2025

Topic 5 – Advisory Guide A13 – NPC Upgrade Construction Process for Existing Ceilings and Above Ceiling Utilities (Ali Sumer; HCAI)

- Ali Sumer provided a detailed overview of Advisory Guide A-13, which introduces an alternative method for completing NPC upgrade projects involving existing utility systems located above ceilings in hospital facilities. He explained that this guide is specific to NPC utility upgrades and is not intended for projects involving equipment upgrades, tenant improvements, or new construction. This guide is intended for facilities where existing conditions are largely unknown—a common situation in older or complex hospital buildings.

The A-13 approach:

- Is most effective when documentation is limited, or ceiling access is constrained.
- Allows phased, strategic construction activities by splitting the scope into manageable zones (i.e., ICU, radiology). Up-front work to prepare/approve typical details and building specific information is vital to this approach.

Meeting Date: March 12, 2025

Topic 5 – Advisory Guide A13 – NPC Upgrade Construction Process for Existing Ceilings and Above Ceiling Utilities (Ali Sumer; HCAI) (Cont.)

- The A-13 approach (cont.):
 - Facilitates a survey-as-you-go process, where details are refined in the field based on what is discovered during ceiling access. Constant communication and documentation among the entire team is vital to the success of this approach.
 - Encourages using typical details selected from OSHPD Preapproval Manuals appropriate to each building's construction type (wood or concrete), while prohibiting blanket inclusion of entire OPMs.
- The process, which is led by Design Professionals, allows permitting on at T&M basis, reduces planning phase-uncertainty, and increases adaptability.

Meeting Date: March 12, 2025

Topic 6 – Seismic Compliance Update on Recently Signed Legislation AB 869 (Chapter 801) and PIN Development (Ali Sumer; HCAI)

Ali Sumer presented a comprehensive overview of the seismic compliance updates related to AB 869 and the development of PIN 80 (released, March 4, 2025) which provides step-by step guidance. He stated that AB 869, signed into law in late 2024, allows certain qualifying hospitals to request a three-year extension beyond the original January 1, 2030, seismic compliance deadline. Up to 130 hospitals may qualify. Applications must document financial hardship or external constraints (small/rural, e.g.). Facilities must submit NPC-5 reports by January 1, 2025, and updated compliance plans on a building-by-building basis by January 1, 2026 to the online portal that provides step-by-step guidance. Enforcement mechanisms include daily fines and permit holds for noncompliance.

Meeting Date: March 12, 2025

Topic 7 – Proposed Requirement for Amplification of Diaphragm Transfer Shears by Ω_0 and $R_{\text{upper}}/R_{\text{lower}}$ in building when a Type 4 out-of-plane irregularity is triggered by a stiffness irregularity, using the Two-stage analysis procedure in ASCE 7 (Roy Lobo; HCAI)

Roy Lobo presented a proposal to that aims to improve seismic resilience and compliance with ASCE 7 modeling intent by modifying the design requirements for diaphragm for buildings with a flexible upper structure over a stiff podium base. The proposed requirement is to amplify diaphragm transfer shears by $\Omega_0 \times (R_{\text{upper}}/R_{\text{lower}})$. This would on apply only to buildings exhibiting Type 4 out-of-plane vertical irregularities and designed using two-stage analysis such as podium structures, with a stiff base and flexible superstructure. The recommendation is based on nonlinear analysis of a 7-story model demonstrating force underestimation in such diaphragms that Roy summarized during the meeting. HCAI will circulate the technical paper and model findings for review. The Committee commented agreeing this is a common condition not clearly addressed in the present code and look forward to reviewing the proposal.

Meeting Date: October 23, 2024

Topic 8 – Proposed reduction of the Lower bound F_p force requirement for design of nonstructural components in base isolated hospital buildings (Roy Lobo: HCAI)

- Roy Lobo presented a proposal to revise the minimum seismic design force (F_p) requirement for nonstructural components located in base-isolated hospital buildings. He explained that current code requirements may overestimate the seismic demand on nonstructural elements in such systems compared to both actual building performance and the results of nonlinear time-history analyses demonstrating reduced floor accelerations in isolated systems. He presented the results of these analyses and proposed a reduction of minimum anchorage force from $0.3S_{DS}W_p$ to $0.2S_{DS}W_p$ for nonstructural components in base-isolated buildings. This aims to reduce unnecessary design conservatism and construction cost, while still meeting the code intent.
- The Proposal applies only to anchored nonstructural components in base-isolated hospital buildings, but excludes equipment mounted on isolated platforms.
- The Committee thanked Roy for this work and looks forward to considering the proposal.

Meeting Date: October 23, 2024

Topic 9 – Proposed removal or revision of California Building Code exceptions to AISC (American Institute of Steel Construction) design specifications (Jim Malley; HB SB Member)

Jim Malley presented a proposal to remove or revise certain California amendments to the AISC design specifications that are currently embedded in the CBC. He explained that many of these state-specific exceptions were added years ago and are now either obsolete, redundant, or in conflict with updated AISC national standards and methodologies. Many of these exceptions were removed in the code cycle, but a few remain. HCAI will prepare a comparative analysis matrix of CBC exceptions vs. AISC standard provisions with the goal to eliminate confusion and outdated references, promote code alignment and reduce unnecessary design hurdles and where appropriate make recommendations to AISC to consider CBC exceptions that still serve a specific purpose. This topic will return for further committee discussion and possible action in a future meeting.

Meeting Date: March 12, 2025

Topic 10 – Comments from the Public/Committee Members on Issues not on this Agenda (Jim Malley; HBSB)

The following comments were made by members of the SNSR Committee:

- Jim Malley noted that several items discussed—particularly proposed structural code amendments—would return for further review or action in future meetings and thanked the committee members and the public for their active participation in the meeting.

Meeting Date: March 12, 2025

CONCLUSION

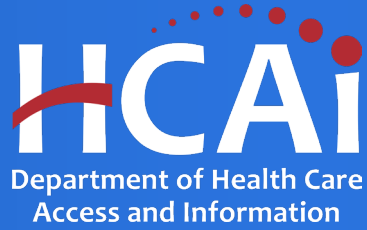
- Questions and Answers
- I move to accept the March 12, 2025, meeting report.

Item #9

Codes and Processes Committee

- Overview and approval of the May 7, 2025, draft Meeting Report/Minutes
- Discussion and public input

Facilitator: Michael O'Connor, Principal, Nichols, Melburg & Rossetto; Committee Chair (or designee)



Codes & Processes Committee

CODES AND PROCESSES COMMITTEE MEMBERS

MICHAEL O'CONNOR, CHAIR
TERESA ENDRES, VICE CHAIR
CODY BARTLEY
LOUISE BELAIR
JENNIFER COX
MICHAEL DAVIS
GARY DUNGER
JOHN GRIFFITHS
SCOTT MACKEY
JIM MALLEY
FARZAD NAEIM

CODES AND PROCESSES CONSULTING MEMBERS

MARK HERSHBERG
KELLY MARTINEZ
BELINDA YOUNG

CODES AND PROCESSES HCAI STAFF

CHRIS TOKAS
RICHARD TANNAHILL
ARASH ALTOONTASH
BRETT BEEKMAN
LARRY ENRIGHT
JOE LABRIE
ROY LOBO
BOB LYONS
MIA MARVELLI
DIANA NAVARRO
CARL SCHEUERMAN
JAMIE SCHNICK
NANCI TIMMINS
JOHN GRAY

CODES AND PROCESSES HBSB STAFF

VERONICA YUKE
MARCUS PALMER
EVETT TORRES

MEETING REPORTS:

- Meeting Date: 5/7/2025

Meeting Date: 5/7/2025

OVERVIEW OF TOPICS - TOPIC 1

Topic 1 – Update on Electronic Test, Inspection, and Observation (eTIO) Development

Presenter: Joe LaBrie, Regional Compliance Officer (on behalf of Chris Davis, SE, HCAI)

Joe LaBrie presented an update on the development of the eTIO system. He explained that internal and public beta testing had occurred, and issues were being resolved. A controlled summer beta rollout for small- to mid-sized projects was planned. Joe emphasized the intent to fine-tune the platform before applying it to larger-scale projects.

- **Informational & Action Items:**
 - Identify beta test project candidates
 - Solicit board member engagement for testing
 - Proceed with summer pilot launch for select projects

The screenshot shows a form titled "Testing, Inspection, and Observation Program" under the "2022 California Building Standards Code - CSHO 1". The form is divided into several sections:

- SECTION A - PROJECT INFORMATION:** Includes fields for Facility Name, Project #, Street Address, City, County, and Record Name (Scope of Project).
- DESIGN PROFESSIONAL OF RECORD RESPONSIBILITY:** Includes a section for the Design Professional of Record, with a note stating: "The administration of the work of construction, including this TIO, shall be under the responsible charge of an architect and structural engineer. When a structural engineer is not substantially involved, the architect shall be solely responsible. Where neither structural nor architectural elements are substantially involved, a mechanical or electrical engineer registered in the branch of engineering most applicable to the project may be in responsible charge. (CSC 2-2.6.1(a))."
- Testing, Inspection, and Observation Stages:** Includes a table for recording stages, with a note: "Note: HCAI plan review staff must provide verification that the TIO program has been 'reviewed' prior to plan approval to confirm the applicability of the tests and inspections identified in the TIO program for each scope, building system, and the construction materials shown in the design drawings. Field staff will issue subsequent 'TIO Program Approval'."

At the bottom, there is a note: "The 'TIO Program Approval' from HCAI field staff must be obtained and included with the notice of start of construction required by CSC Section 2-2.6.1(b)(2) and 2-2.6.1(b)(4)."

Meeting Date: 5/7/2025

OVERVIEW OF TOPICS - TOPIC 2

Topic 2 – Standard Details Update

Presenter: Gary Dunger, Executive Director, Design and Construction, Cedars-Sinai Health System

- Gary Dunger shared an overview of new and previously drafted standard detail drawings. He introduced a new set of wood-frame construction details – provided by committee members - that required committee feedback. These included wall backing, door/window infills, slip joints for deflection, and structural elements like headers and joist connections.
- Proprietary hardware-specific brand names will be avoided.
- Wood framing details to be reviewed will acknowledge fire resistance

Meeting Date: 5/7/2025

OVERVIEW OF TOPICS - TOPIC 3

Topic 3 – 2025 Intervening Code Cycle Update and Timeline

Presenter: Mia Marvelli, Architect and Supervisor, HCAI

2025 Edition of Title 24

December 2024 & February 2025, CBSC approved the 2025 T-24 Code changes

July 2025, Publication of the 2025 Title 24

January 2026, Effective date of the 2025 Title 24

HCAI has already started new code changes for the 2025 Supplement (Intervening Code Cycle)

OSHPD 2025 Timeline and HBSB Meetings

DUE TO CBSC

HCAI/OSHPD INTERNAL TIMELINE

January – June 2025 identify code changes

REVIEW BY HBSB/COMMITTEES

Sept. 10, 2025 (Codes and Process) CAC, CBC Vol. 1, CEC, CMC and CPC

Oct. 22, 2025 Struct & Non-Struct) CAC, CBC Vol. 2

Dec. 10, 2025 HBSB Full Board meeting

December 1, 2025
Submit all Parts of T-24

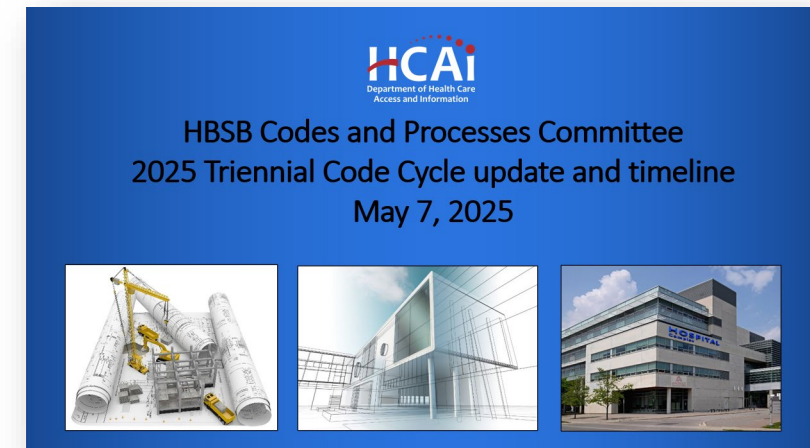
Meeting Date: 5/7/2025

OVERVIEW OF TOPICS - TOPIC 3

Topic 3 – 2025 Intervening Code Cycle Update and Timeline

Presenter: Mia Marvelli, Architect and Supervisor, HCAI

- Mia Marvelli provided a comprehensive update on the upcoming 2025 Intervening Code Cycle and outlined target milestones:
 - Internal review by July 2025
 - Final submission to CBSC by December 1, 2025
 - Effective implementation in July 2028
 - She reviewed key code areas under revision:
 - Primary Care Clinics (SB 1382) – Right-size PCC (1226.6)
 - Alternative Birthing Clinics (ABCs) (1226.11)
 - Behavioral Health/Crisis Stabilization Units
 - Chemical Dependency Recovery Hospitals (AB 2376)



SB 1382 (2024) Building Standards for Primary Care Clinics— OSHPD 3 (CBC 1226.6)

Requires Department of Health Care Access and Information (HCAI) to establish construction standards for community clinics and rural health clinics in consultation with the California Primary Care Association (CPCA) Community Clinics Advisory Committee

Prohibits amended standards from being more restrictive than current construction standards

Requires HCAI to hold at least 2 public meetings for comment on proposed new standards

Public meeting information

On the [HCAI](#) homepage under **Facilities** click **Codes and Regulations**

Then click **Title 24 California Building Standards**

[Codes and Regulations - HCAI](#)

2025 Intervening Code Adoption Cycle

The Intervening Supplement (blue pages) will be published January 1, 2027, with an effective date of July 1, 2027.

Pre-cycle Public Meetings

[Alternative Birthing Clinics \(ABC\) Public Meeting](#) – May 1, 2025 from 10am-12pm.

SB 1382 Public Meeting #1 – More information coming soon.

SB 1382 Public Meeting #2 – More information coming soon.



Empath/Behavioral Health/Crisis Stabilization

Demand for out-patient behavioral health units. State grants encourage these services in hospitals

Behavioral Health Continuum Infrastructure Program by Dept. of Health Care Services

EmPATH by the Mental Health Services Oversight & Accountability Commission

Empath/Behavioral Health/Crisis Stabilization

Physical Space Design Concepts for Crisis Stabilization Units in Hospitals

- Outpatient service outside of any Inpatient Unit and not part of the Emergency Department
- Calming, healing environment that prioritizes safety and freedom
- Large, open space where patients can be together in the same room
- Designed to facilitate socialization, discussion, interaction and therapy
- Patient care stations utilizing a chair model outfitted with recliners, 80 sq. ft. total per patient, which includes 40 sq. ft. patient area around each recliner
- Open staff observation station w/instant access to staff, separate from the patients
- Nourishment area or room for providing food and/or drinks for patients
- Voluntary Calming Rooms – If provided with visual observation for staff

Alternative Birthing Clinics – OSHPD 3 (CBC 1226.11)

Increasing concerns about access to birth services in California
Challenges ABCs face for Title 24 compliance and CDPH licensure

Since 2012, total of 56 hospitals removed labor and delivery services
CA hospitals close maternity wards faster than U.S.rate – CalMatters

Challenges ABCs face for Title 24 compliance and CDPH licensure

Recap of stakeholder engagement

TWO MEETINGS WITH ABC REPRESENTATIVES:

1/7/2025: Discussed ABC environment, challenges faced building an ABC licensed by CDPH, and compliance with Title 24, Title 22 and American Association of Birth Centers, Standards for Birth Centers

- [Birth Center Standards - American Association Of Birth Centers](#)

Developed an ABC Title 24, Title 22 comparison table

2/4/2025: Reviewed ABC Title 24, Title 22 comparison table and discussed regulations that could be changed. Discussed opportunities for a guidance document and ABC checklist to help the local jurisdictions.

Chemical Dependency Recovery Hospitals OSHPD 6

AB 2376 (2004)

The bill would **delete** the requirement for **chemical dependency recovery as a supplemental service to be provided in a distinct part** of a general acute care hospital or acute psychiatric hospital, and instead would **authorize** those facilities to provide chemical dependency recovery services as a **supplemental service within the same building** or in a separate building on campus that meets specified structural requirements of a freestanding chemical dependency recovery hospital. The bill would also **authorize** chemical dependency recovery services **to be provided in a general acute care hospital or acute psychiatric hospital without a distinct part**, or outside the distinct part, in beds that are licensed for a service other than chemical dependency recovery if certain conditions are satisfied.

Chemical Dependency Recovery Hospitals OSHPD 6

AB 2376 (2004)

Chemical dependency recovery services provided pursuant to this subdivision shall not require a separate license.

..... [CDPH] may, without taking any regulatory actions implement, interpret, or make specific this section by means of an All Facilities Letter or similar instruction.

Meeting Date: 5/7/2025

OVERVIEW OF MOTIONS

- No motions were made at this meeting.

Meeting Date: 5/7/2025

CONCLUSION

- Questions and Answers
- I move to accept the May 7, 2025, Codes and Processes Committee meeting report.
- Next Codes & Processes Meeting - **Sept. 10, 2025**

Item #10

Education and Outreach Committee

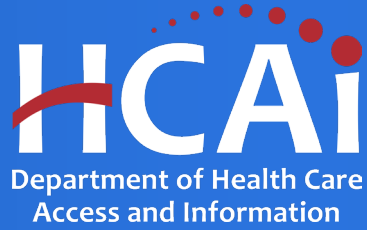
- Overview and approval of the following draft Meeting Report/Minutes:
 - February 13, 2025
 - April 23, 2025

Facilitator: Scott Mackey, AIA, NCARB, APEC, Design Manager, Hensel Phelps; Committee Chair (or designee)

Item #10 Continued

- Discussion and creation of an ad-hoc committee to develop a “Designing for Resilience” webinar on dealing with natural hazard events
- Discussion and creation of an ad-hoc committee to develop educational opportunities to advance utilization of structural health monitoring by hospitals using seismic instrumentation
- Discussion and creation of an ad-hoc committee to develop a how-to guide on preapproved fabricated components and systems as a follow up to the June 2024 webinar
- Discussion and public input

Facilitator: Scott Mackey, AIA, NCARB, APEC, Design Manager, Hensel Phelps; Committee Chair (or designee)



Education and Outreach Committee

by
Cody Bartley, VICE CHAIR

COMMITTEE MEMBERS

Louise Belair
Janice Cheung
Michael Davis
Gary Dunger
Teresa Endres
Bert Hurlbut
Courtney Johnson
Jim Malley

CONSULTING MEMBERS

Kelly Martinez
Bruce Rainey
Belinda Young
Bill Zellmer

OSHPD STAFF

Hussain Bhatia
Monica Colosi
Darren Graves
Joe LaBrie
Mia Marvelli
Jamie Schnick
Nanci Timmins

MEETING REPORTS:

- **Meeting Dates**
 - **February 13, 2025**
 - **April 23, 2025**

Meeting Date: **February 13, 2025**

OVERVIEW OF TOPICS

Update on Future Educational Programs

1. Classification of imaging procedures into Class 1, 2, & 3
 - Mia Marvelli provided an update that Eric Jacobson is still working on it alongside CDPH
2. How to write a functional program and operational program to make it easy for CDPH to approve.
 - Kelly Martinez and Teresa Endres provided an update that a power point presentation is in progress to show all required elements in a format that is concise and easy to understand. Includes references to Title 24 & Title 22 regulations with a checklist that users will be able to fill out themselves.

Meeting Date: **February 13, 2025**

OVERVIEW OF TOPICS

Update on Future Educational Programs

3. Development of formal design-professional mentorship program with HCAI
 - New program that will be developed after finalizing the functional program guide. Started last summer with the CAP certification program but there is a willingness to work on a more detailed agenda for the program.
4. The 2025 educational seminar was discussed but tabled until there is a better understanding of the organization budget around the June timeframe
5. Discussed the idea of outreach program to educate the public on the differences between HCAI and OSHPD. Discussed the idea of a roadshow or power point including organizational charts, links to upcoming meetings and board vacancies to encourage public participation. Teresa Endres mentioned having done a test run with the Academy of Architecture for Health and they had plans to present to more organizations.

Meeting Date: **February 13, 2025**

OVERVIEW OF TOPICS

Coordination with the Instrumentation Committee to advance utilization of Structural Health Monitoring by Hospitals using Seismic Instrumentation

1. Courtney Johnson and Martin Hudson presented the white paper prepared by the Instrumentation Committee. Looking for ways to differentiate between structural and non-structural damage. Instrumentation is not intended to replace professional evaluations but to provide data to assist in determination of intervention. Instrumentation Committee will begin refining webinar content.

Meeting Date: February 13, 2025

OVERVIEW OF TOPICS

Update on Policy Intent Notice (PIN) 50

1. PIN 50 document was noted as in its final review and planned to be published before next E&O Meeting

Follow up from the preapproved Fabricated Components and System webinar

1. Discussed responding to open questions from the Webinar as a starting point for a white paper, committee wants to keep momentum on the topic

Update on the Inspect-to-Pass Approach to Field Inspections Webinar

1. Facilitated by Michael Davis, provided update on upcoming meeting to finalize development. Aiming for presentation by the end of the year. Name of the webinar was formally recognized as “Collaborative Inspection Approach”

Meeting Date: **February 13, 2025**

OVERVIEW OF TOPICS

Update on PINs, CANs and Advisory Guides

1. Mia provided an update on several upcoming webinars including “small and rural hospital relief program,” emphasized the importance of promoting the compliance seminar and encouraging attendance within networks. Discussed the
 - Nurse Stations CAN
 - PIN 74 related to power sources and life saving equipment
 - PIN 51 on pre-approved details
 - The release of PIN 78 related to Fire Pump Automatic Switches
 - PIN 79 advisory guides related to electrical code for fire pump station and tier four generators

Meeting Date: February 13, 2025

OVERVIEW OF TOPICS

Update on a Program Flex Unit collaboration with CDPH

1. Noted collaboration was ongoing but due to changes with CDPH program manager that communication would continue to develop.

Update on exploring the opportunity to develop a Small and Rural Hospital Relief Program webinar.

1. Webinar in development to explain how smaller hospitals can comply with AB 869 and funding available for seismic compliance

Update on the creation of a Sustainability Guide for dealing with Extreme natural Hazard Events.

1. Mia suggested a review of the existing “Planning and Preparing for Disasters” guide as a starting point.
Tabled to be discussed at future EO Meetings

Meeting Date: **April 23, 2025**

OVERVIEW OF TOPICS

Update on Instrumentation Committee to Advance utilization of Structural Health Monitoring by hospitals using Seismic Instrumentation

1. Committee discussed best time to form Subcommittee to further development of a webinar focusing on instrumentation would be at the full board meeting in June.

Discussion on Preapproved Fabricated Components and System Webinar Part 2

1. Moving beyond the conceptual framework of preapproval and focus instead on practical experiences. Discussion focused on greatest impact and reaching diverse aspects of industry, first webinar was successful but some questions remained unanswered. Committee to focus on responding to Q&A from Part 1 and develop step by step white paper outlining process for increased adoption.

Meeting Date: **April 23, 2025**

OVERVIEW OF TOPICS

Update from Collaborative Inspection Approach to Field Inspections Webinar Development Subcommittee

1. Subcommittee continues development of power point and outline. Discussing in person Seminar or webinar potential but dependent upon budget position that will become clearer after July 1, committee to continue with development of webinar but keep option for a seminar or in-person delivery at a later time.

Update on How to Write a Functional Program and Operational Program, and How to Make it Easy for CDPH to approve

1. Clara Wu provided an update of the Functional Program Advisory Guide with target posting date of October 2025. Emphasizing the importance of keeping functional programs concise to accelerate CDPH and OSHPD review processes by ensuring alignment.

Meeting Date: **April 23, 2025**

OVERVIEW OF TOPICS

Update on Designing for Resilience webinar subcommittee for dealing with extreme natural hazard events

1. Discussion continued defining terms, discussed development of a subcommittee would be best to occur at June Full Board Meeting when all board members could be solicited for interest in the subcommittee.

Meeting Date: April 23, 2024

OVERVIEW OF MOTIONS

- **Motion made to approve the draft Functional Program Advisory Guide with the understanding that additional comments may be submitted by May 15, 2025.**

Vote was unanimous via role call to approve

- **Motion to approve the Draft Feb 13,2025 E&O Committee meeting report Minutes**

Meeting Date: **April 23, 2024**

OVERVIEW OF Action Item

1. **Formation of Subcommittee to develop Webinar for Designing for Resilience, dealing with extreme natural hazard events.**
2. **Formation of Subcommittee to continue content development for webinar on Seismic Instrumentation. Facilitator Courtney Johnson.**
3. **Formation of Subcommittee to continue white paper development for Preapproved Fabricated Components and Systems**

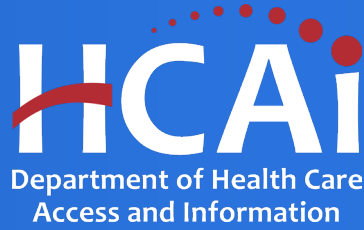
CONCLUSION

- **Questions and Answers**
- **I move to accept the Committee's meeting reports.**

Item #11 “Collaborative Inspection Approach to Field Inspection” Webinar
Development Subcommittee of the Education and Outreach
Committee

- Overview and approval of the following draft Meeting Report/Minutes:
 - February 27, 2025
 - March 27, 2025
 - April 24, 2025
- Discussion and public input

*Facilitator: Michael L. Davis, CHI, Senior Consultant, DavisHBC, Inc;
Subcommittee Chair (or designee)*



Collaborative Inspection Approach (formerly Inspect-to-Pass) Webinar Development Subcommittee of the Education and Outreach Committee

by
Michael Davis, CHAIR
Cody Bartley, VICE CHAIR

COMMITTEE MEMBERS

Cody Bartley
Michael Davis
Gary Dunger
Bert Hurlbut
Scott Mackey

OSHPD STAFF
Monica Colosi
Joe LaBrie

MEETING REPORTS:

- 1. Meeting Date: February 27, 2025**
- 2. Meeting Date: March 27, 2025**
- 3. Meeting Date: April 24, 2025**

**PLEASE NOTE THE FOLLOWING REGARDING
THE MEETINGS:**

- 1. Agendas for all three meetings were nearly identical**
- 2. These meeting were about the progressive, systematic development of the basic material**
- 3. All three meetings were very productive with outstanding input from all sub-committee members, OSHPD staff, and the public**

Meeting Date: **February 27, 2025**

OVERVIEW OF TOPICS

Progressive Review the Current Presentation Outline Subsections

- Discussion:
 - Each presenter walked the committee thru the content that they had developed thus far:
 - Michael Davis: Inspector of Record and Testing Lab
 - Gary Dunger: Ownership
 - Scot Mackey: Design Professional of Record
 - Cody Bartley: Contractor of Record and Subcontractors
 - Monica Colosi: OSHPD and Field Staff

Meeting Date: **February 27, 2025**

OVERVIEW OF TOPICS

Progressive Review the Current Presentation Outline Subsections

- Discussion:
 - After each presenter discussed their material, there was input from the committee members and OSHPD
 - Discussed the order that the material should be presented in:
 1. Ownership
 2. DPOR
 3. COR/Sub-Contractor
 4. IOR/Testing Lab
 5. OSHPD

Meeting Date: **February 27, 2025**

OVERVIEW OF TOPICS

Explore Options For Renaming the Webinar

- Discussion:
 - Various options were shared and discussed
 - Revised Working Title: Collaborative Inspection Approach (CIA)

Meeting Date: **February 27, 2025**

OVERVIEW OF TOPICS

Determine Schedule and Plan For Future Meeting and Practice Sessions

- Discussion:
 - Discussed goals for next two scheduled meetings

Meeting Date: **February 27, 2025**

OVERVIEW OF TOPICS

Comments From the Public/Committee Members On Issues Not On This Agenda

- Discussion:
 - Various points related to the presentation were shared

Meeting Date: **February 27, 2025**

OVERVIEW OF MOTIONS

No Motions were presented.

Meeting Date: **March 27, 2025**

OVERVIEW OF TOPICS

Progress Review the Current Presentation Outline Subsections

- Discussion:
 - Each presenter walked the committee thru the content that they had developed thus far (delivered in revised order):
 - Gary Dunger: Ownership
 - Scot Mackey: Design Professional of Record
 - Cody Bartley: Contractor of Record and Subcontractors
 - Michael Davis: Inspector of Record and Testing Lab
 - Monica Colosi: OSHPD and Field Staff

Meeting Date: **March 27, 2025**

OVERVIEW OF TOPICS

Determine Schedule and Plan For Future Meeting and Practice Sessions

- Discussion:
 - Discussed goals for next scheduled meeting
 - Discussed basic thoughts on adding additional meetings

Meeting Date: **March 27, 2025**

OVERVIEW OF TOPICS

Comments From the Public/Committee Members On Issues Not On This Agenda

- Discussion:
 - Various points related to the presentation were shared

Meeting Date: **March 27, 2025**

OVERVIEW OF MOTIONS

No Motions were presented.

Meeting Date: **April 24, 2025**

OVERVIEW OF TOPICS

Progress Review the Current Presentation Outline Subsections

- Discussion:
 - Each presenter walked the committee thru the content that they had developed thus far:
 - Gary Dunger: Ownership
 - Scot Mackey: Design Professional of Record
 - Cody Bartley: Contractor of Record and Subcontractors
 - Michael Davis: Inspector of Record and Testing Lab
 - Monica Colosi: OSHPD and Field Staff

Meeting Date: **April 24, 2025**

OVERVIEW OF TOPICS

Discuss Ideas/Approaches to the Introduction and Conclusion of the Webinar

- Discussion:
 - Various points shared
 - Ultimately decided to wait until material development was more complete

Meeting Date: **April 24, 2025**

OVERVIEW OF TOPICS

Determine Schedule and Plan For Future Meeting and Practice Sessions

- Discussion:
 - Scheduled next meeting for June 19, 2025
 - Goals:
 - Refined practice session of each of the major subsections
 - Develop Introduction and Conclusion

Meeting Date: **April 24, 2025**

OVERVIEW OF TOPICS

Comments From the Public/Committee Members On Issues Not On This Agenda

- Discussion:
 - Nothing new brought up at this time

Meeting Date: **April 24, 2025**

OVERVIEW OF MOTIONS

No Motions were presented.

Meeting Date: **All Three Meetings**

CONCLUSION

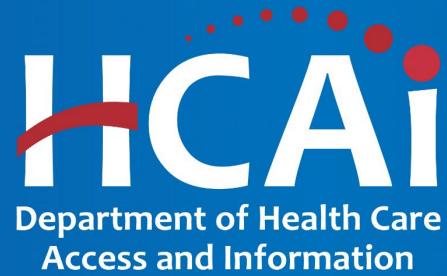
- **Questions and Answers**
- **I move to approve this Committee's meeting reports**

Item #12

Office of Statewide Hospital Planning and Development (OSHDP)
Update

- Workload and performance
- Discussion and public input

*Facilitator: Chris Tokas, SE, F.SEAOC, CBO, Deputy Director, HCAI
(or designee)*



Office of Hospital Planning & Development California's Building Department for Hospitals

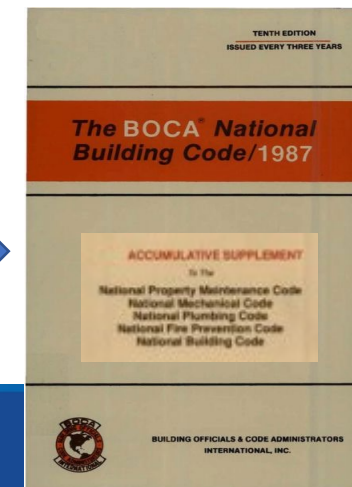


Update for the Hospital Building Safety Board
June 4, 2025

Numerous High Profile Structural Failures Draws National Attention

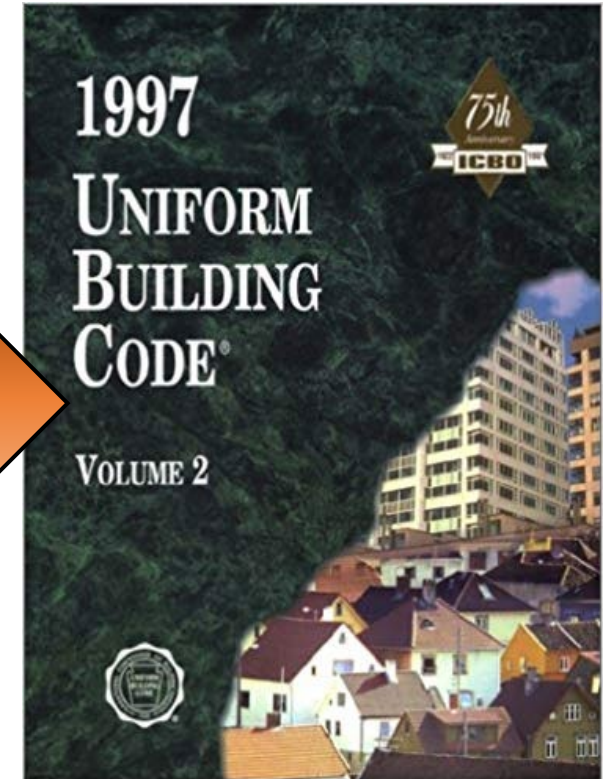
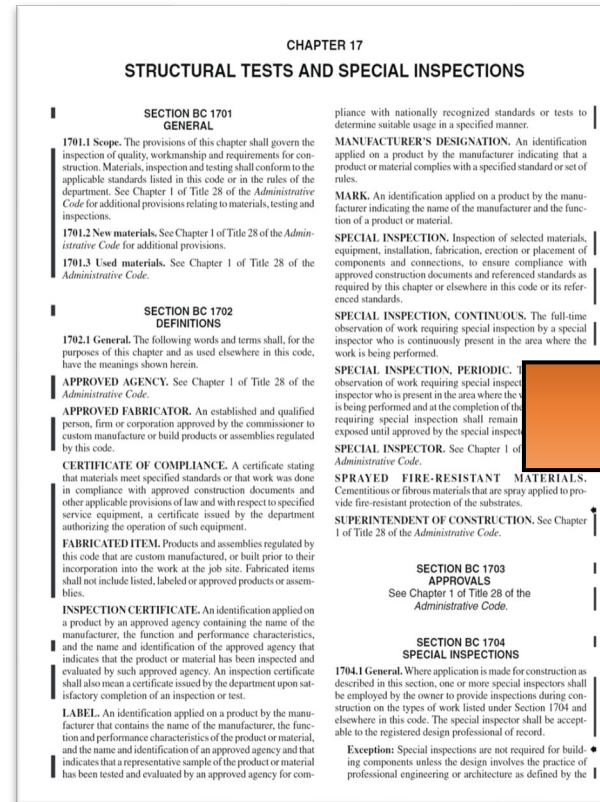
1982 Congress gets involved

- U.S Congress Sub-Committee on Science & Technology
 - 1982 studies of structural failures
 - 1984 the Investigations and Oversight Subcommittee in House Report 98-621 presents findings on Structural Failures in Public Facilities
 - **Need for improved communication during the construction process**
 - **Need for construction inspection**
-special inspection is born
- 1988 special inspection is adopted by BOCA



Model Code Adopts provisions for QC

- 1994 Northridge EQ. further substantiates lessons learned from previous EQs
 - Deficiencies in Construction Inspection
- Chapter 17 of 1997 UBC created



IBC adopts provisions for QC

- In 2000 Chapter 17 of IBC was created from legacy codes (UBC, BOCA, SBC)



BREAKING NEWS



EAST BAY TIMES

‘Not to code:’ Cracked beams at Transbay Terminal preventable, official says

“It’s a failure of quality control in the construction process,” Zabaneh said. “That’s why we are reviewing the rest of the building to make sure we don’t have any other incidents.”



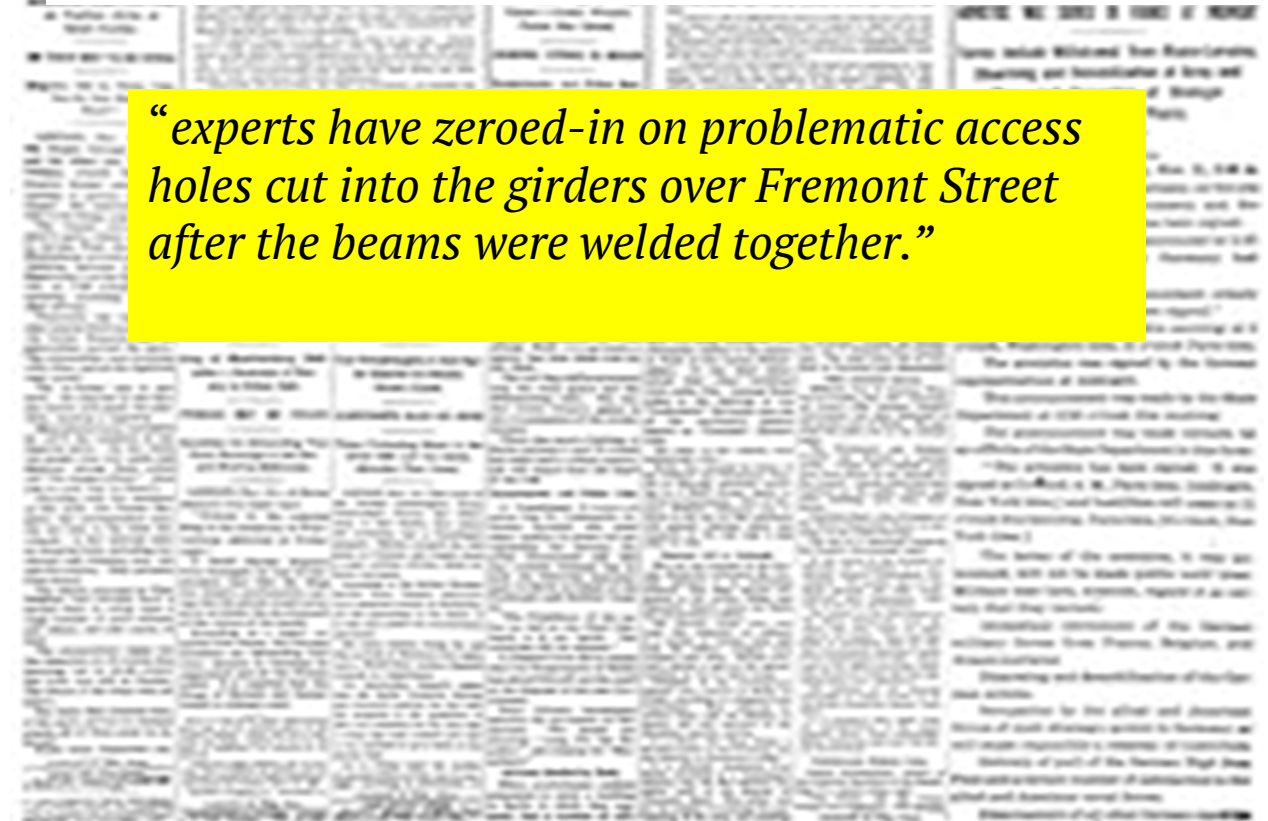
The Mercury News

The Newspaper of Silicon Valley

‘Extraordinary’ oversight failed to identify issues with cracked steel beams at SF’s Transbay Terminal

More than 21,000 inspection reports of the building were completed, officials said

“experts have zeroed-in on problematic access holes cut into the girders over Fremont Street after the beams were welded together.”



SF's Transbay Terminal



New details released about 'Stop Work Order' at Enloe Health Cancer Center

Kelli Saam
May 28, 2025



CHICO, Calif. - Chico City Manager Mark Sorensen relased new details about the issues that prompted a stop work order at the Enloe Health Gonzales Cancer Center in Chico. Construction was paused due to concerns from city inspectors. A stop work order was issued on April 24. City officials did not publicly announce the work stoppage until May 21.

City Manager Mark Sorensen explained that the pause was necessary to improve inspection records and engineering documentation. Weather-related factors also contributed. Sorensen said.

.. "In this instance, construction was temporarily paused due to a combination of factors including to improve the inspection records, improve the engineering documentation to support certain building elements and their relationship to installation of certain materials (very detailed, complex systems), which also including some weather-related factors during construction. The City has been working with Enloe, the contractor, engineer, and architect to reconcile these items so that we all deliver a first-class facility that will serve the community and last for decades. "

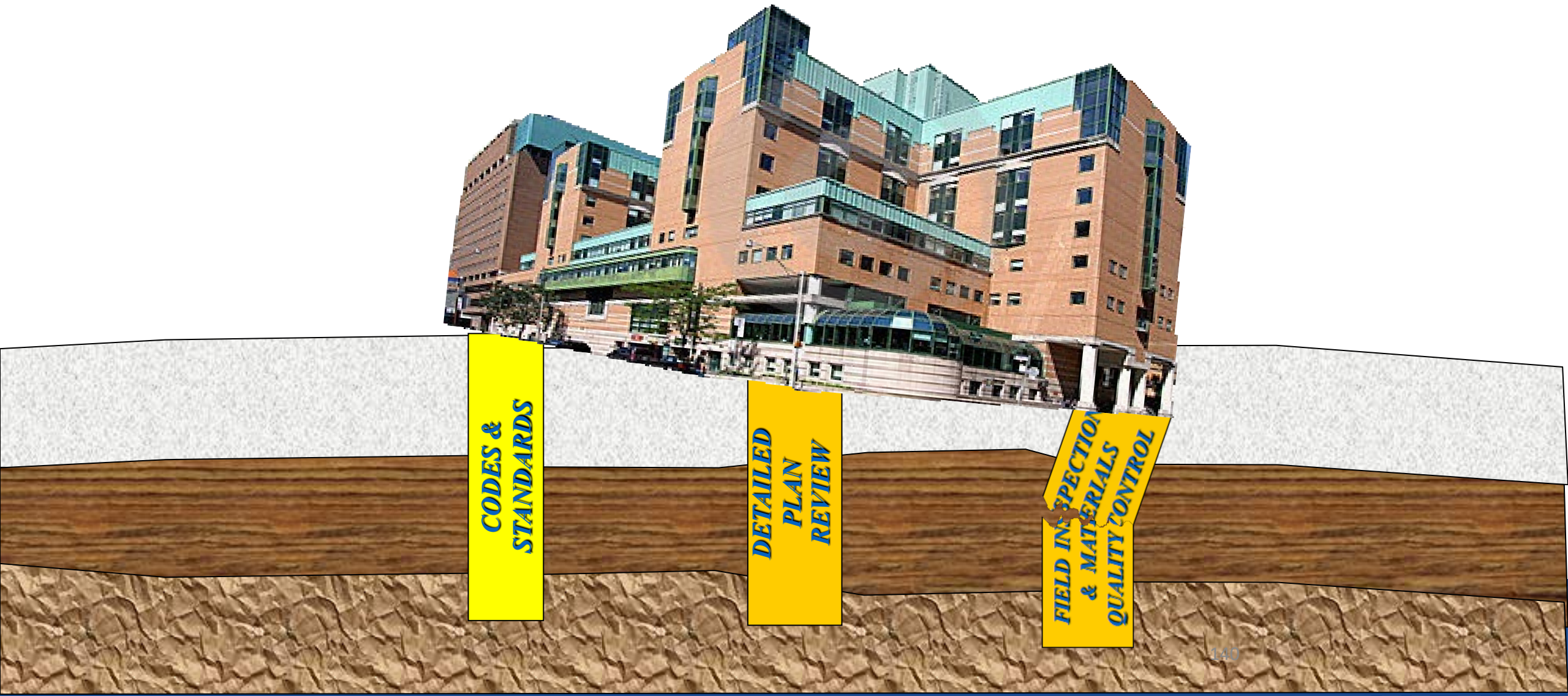
...

Lessons Learned in the San- Fernando Earthquake

- The Earthquake demonstrated Deficiencies in:
 - Building Design Codes
 - Code enforcement process
 - Plan review
 - Quality Control & Assurance During Construction (Construction inspection. . .)



The Foundation Pillars for Achieving the Targeted Building Performance Level



California Administrative Code Requirements

- 7-141 Excerpt

(e) The **testing** program shall identify materials and tests to be performed on the project. The approved agency and/or individual(s) to perform each of the required tests shall also be identified. The testing program shall include, at a minimum, those tests required by applicable sections of the *California Building Standards Code*.

(f) The **inspection** program shall include a completed application for **inspector(s)** of record for the project. If a project has more than one **inspector** of record, the distribution of responsibilities for the work shall be clearly identified for each inspector of record.

(g) The **inspection** program shall also identify all special inspections to be performed on the project along with approved agency and the individual(s) to perform the **inspections**. The special **inspections** shall include, at a minimum, those special **inspections** required by applicable sections of the *California Building Standards Code*.

(h) The **observation** program shall identify each design professional that must, through personal knowledge as defined in Section 7-151, verify that the work is in compliance with the approved construction documents.

Testing Inspection & Observation

- OSHPD's Checklist for CSBC requirements on testing and inspections
- The Inspection/Observation Job Card for Hospitals

OSHPD
State of California - Health and Human Services Agency
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT

400 "R" Street, Suite 200 ~ Sacramento
700 N. Alameda Street, Suite 2-500

TESTING, INSPECTION AND OBSERVATION

This program is prepared and submitted for general acute-care hospitals and acute psychiatric hospitals except those of single-story, Type V, wood or light steel-frame construction.

A Facility Name _____
Address - Street _____
City _____
Title of Project _____

B TESTS - DOCUMENTATION

STRUCTURAL TESTS

Compact fill CBC 3301.1
Filled material acceptance test
Compact fill CBC 3301.1
Compaction test
Concrete CBC 1903A.1.2, 1903A.2
Cement
Concrete CBC 1903A.1.2, 1903A.2
Aggregates/Reactive aggregates
Concrete CBC 1903A.1.2 & 1903A.2
Admixtures
Concrete CBC 1904A, 1905A.2
Mix design (Select method A, B or C)
Concrete CBC 1905A.6
Strength test
Concrete CBC 1903A.5 & 1926A
Metal reinforcement (incl. welded wire fabric)
Concrete CBC 1903A.5.5 & 1926A
Prestressing tendons and anchors
Shotcrete CBC 1924A.5
Preconstruction test
Shotcrete CBC 1924A.10
Strength test
Shotcrete CBC 1924A.11.2
Core test
Masonry CBC 2102A.2
Material standards tests
Masonry CBC 2103A.3
Mortar proportion, Aggregates
Masonry CBC 2103A.4
Grout proportion, Aggregates
Masonry CBC 2103A.5
Additives
Masonry CBC 2105A.3.1
Core test
Masonry CBC 2105A.3.2, 3.3, 3.4
Compressive strength from test

TBD To Be Determined-The name of the person to proceed with the work that requires

CAN 1-7-141(d)-(i)
OSH-FD-303A (Revised 9/7/07)

OSHPD
State of California - Health and Human Services Agency
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT

TESTING, INSPECTION AND OBSERVATION

Facility Name _____

C SPECIAL INSPECTIONS

STRUCTURAL INSPECTIONS

Concrete CBC 1926A.9.1
Prestressed concrete
Concrete CBC 1926A.10
Pneumatically placed concrete
Concrete CBC 1701A.5, 1701A.6
Insulating concrete
Concrete CBC 1926A.12
Welding of reinforcing bars
Concrete CBC 1704A
Precast panels
Concrete CBC 1704A
GFRP panels
Masonry CBC 2105A.7
Laying and grouting
Masonry CBC 2104A.6.1.1
Low lift grout
Masonry CBC 2104A.6.1.1
High lift grout
Steel CBC 2231A.4
Steel shop fabrication
Steel CBC 2231A.5
Automatic end-welded stud
Steel CBC 2231A.5
Shop and field welding
Steel CBC 2231A.6
High strength bolt installation
Wood CBC 2337A.1
Glue laminated timber
Wood CBC 2337A.2
Installation of timber connect
Wood CBC 2337A.3
Manufactured trusses
Miscellaneous CBC 1405A
Veneer
Miscellaneous CBC 1701A
Epoxy injection
Miscellaneous CBC 1701A
Site work where special hazard
Base isolation CBC Appendix
Isolator unit prototype & production
Aluminum CBC 2004A.8
Welding

TBD To Be Determined-The name of the person to proceed with the work that requires

CAN 1-7-141(d)-(i)
OSH-FD-303A (Revised 9/7/07)

OSHPD
State of California - Health and Human Services Agency
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT

TESTING, INSPECTION AND OBSERVATION

Facility Name _____

D REQUIRED CONSTRUCTION OBSERVATION (See "PERSONAL KNOWLEDGE" defined in CCR T-24)

Ref. No. _____

MILESTONE _____

FINAL VERIFIED COMPLETION _____

AOR: Architect of Record CONT: Construction Observation may be required

NOTE: Construction observation may be required

CAN 1-7-141(d)-(i)
OSH-FD-303A (Revised 9/7/07)

OSHPD
State of California - Health and Human Services Agency
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT

TESTING, INSPECTION AND OBSERVATION PROGRAM - 2001 CALIFORNIA BUILDING STANDARDS CODES - OSHPD 1 Page 10 of 13

Facility Name _____ Project Number _____ Sub Number _____

Samples of test and inspection reports are:

[] Attached
[] To be provided following determination of responsible firm(s) or individual(s) - Samples shall be submitted to and approved by the Office prior to proceeding with the work that requires tests or special inspections.
[] Not Applicable - Project has no required tests or special inspections.
Required test and inspection reports shall be prepared and submitted to OSHPD FDD within ____ days of the completion of all tests and inspections. If not designated, all reports shall be submitted to the Office within 15 calendar days.
[] In addition to the preprinted tests and special inspections identified on this form, this program includes additional tests and special inspections as indicated:
[] Other Tests
[] Other Special Inspections
[] See Attachment

This program has been prepared and submitted for an OSHPD 1 project. OSHPD 1 projects include all construction and remodel projects for general acute-care hospitals and acute psychiatric hospitals. OSHPD 1 projects also include construction and remodel of skilled nursing facilities and/or intermediate care facilities except those of single-story, Type V, wood or light steel-frame construction.

E SUBMITTED BY:

Architect/Engineer of Record _____ Date _____

PRINT NAME: _____

OSHPD PLAN APPROVAL:

Name _____ Date _____

OSHPD FIELD APPROVAL:

Name _____ Date _____

FDD COMMENTS:

FDD STAMP OFFICE USE ONLY

| | | | |
|---------------|------------|---|---|
| Architectural | Date _____ | A | D |
| Structural | Date _____ | A | D |
| Mechanical | Date _____ | A | D |
| Electrical | Date _____ | A | D |
| Fire Marshal | Date _____ | A | D |

CAN 1-7-141(d)-(i)
OSH-FD-303A (Revised 9/7/07)

HBSB Collaborative Approach to Field Inspections - Webinar Development

“Collaborative Inspection Approach” Webinar Presentation Outline (formerly: Inspect-To-Pass)

- I. Introduction (stimulate interest, break down barriers) (Scott Mackey)
 - a. What is a successful inspection?
 - i. It's an inspection that is approved by the **inspector (IOR)** on the first pass.
 - ii. That inspection verifies that the work put in place by the **contractor** matches the approved construction documents and is code compliant.
 - b. Successful inspections require more than just effort on the part of the IOR
 - i. But owners, designers and contractors can benefit from this information as they play a role in the success of this approach to inspection.
 - ii. Owners are paying for IOR services and have a direct role in the success of the IORs activities. The project is theirs and they should have the greatest vested interest in project success.
 - iii. The DPOR is
- II. To Ownership (Gary Dunger)
 - a. Hire-To-Pass
 - b. Hire sufficient number of IORs
 - c. Small cost when compared to the price of the project
 - d. Success rates of inspections goes up
 - e. Minimize changes and tear outs
 - f. Try to view investment in inspection as a cheap insurance policy of project success
- III. To Design Professionals (Scott Mackey)
 - a. Design-To-Pass
- IV. To Contractors and Sub-Contractors (Cody Bartly)
 - a. Build-To-Pass
- V. To the IOR and Testing Agency (Michael Davis)
 - a. Inspect-To-Pass
 - i. Preview:
 - i. What does “inspect-to-pass” mean for any inspector (IOR or special)
 - ii. What does “inspect-to-pass: NOT mean
 - iii. What are the principles that serve as a foundation of the “inspect-to-pass” approach?
 - iv. And how are these principles put into action?

The Roles and Responsibilities of:

- Hospital Owner
- Design Professional of Record
- Contractor of Record/Sub-Contractor
- Inspector of Record/Testing Lab
- OSHPD and Field Staff

OSHPD Strategy Map

**Serving Together, Building Together, Providing Together,
Smarter Together**

HCAI Vision

A healthier California where all receive equitable, affordable, and quality health care.

OSHPD Purpose

Advancing collaboration with healthcare design professionals and providers, to build safe, sustainable, and resilient, facilities that remain Functional through disasters for all Californians.

Deliver
Valuable
Public
Service

Integrate &
Promote
Equity
Throughout
HCAI

Promote an
Inclusive HCAI
Community of
Professional
Learning &
Growth

Maximize
Operational
Efficiency &
Effectiveness
Through
Innovation

Optimize
Fiscal
Stewardship
&
Transparency

Our Products & Services

- Plan Review
- Construction Observation
- Seismic Compliance Program
- Development of Building Standards
- Emergency Response
- Research
- Hospital Building Safety Board

Our Values and Guiding Principles

Professionalism-Innovation-Equity-Service

Communication-Teamwork-Accountability-Integrity-Respect-Customer centric and Data Driven

Our Rallying Cry
A Shared Commitment to Excellence



Empowering our Stakeholders Through Education & Outreach

- **Broad Engagement:**

- Reaching diverse audiences through Seminars, workshops, public forums, and digital platforms.

- **Accessible Education:**

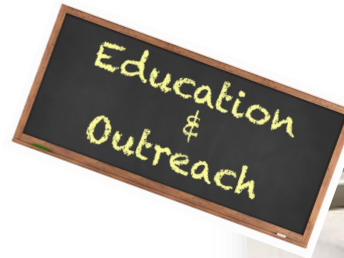
- Providing user-friendly materials, trainings, and resources to enhance understanding.

- **Community Partnerships:**

- Collaborating with stakeholders, organizations, and local leaders.

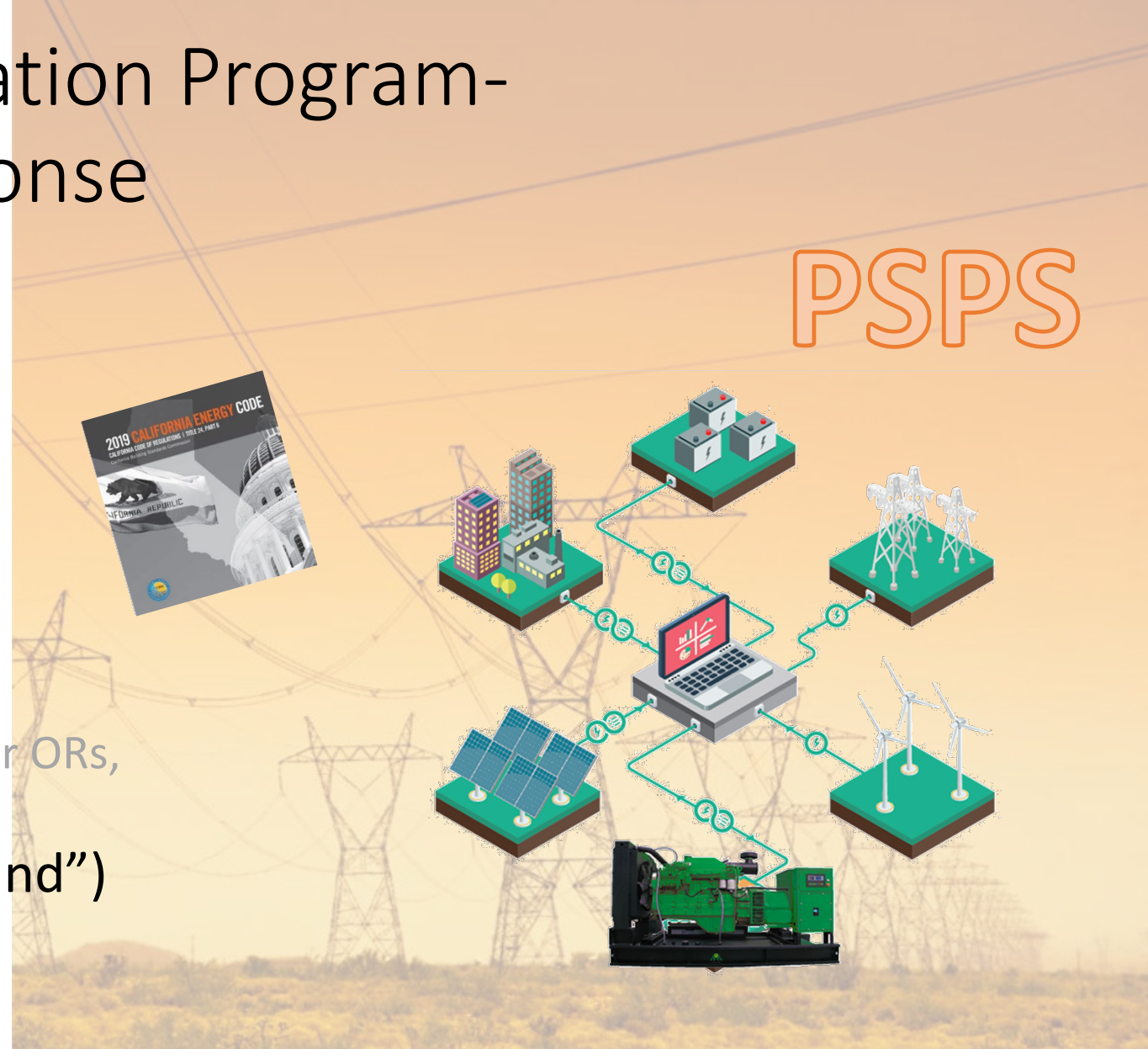
- **Innovative Approaches:**

- Leveraging technology and creative outreach strategies to maximize impact.



Natural Hazards Adaptation Program- The HCAI/OSHPD Response

- 2019 CBSC, Part 6 - Energy Code
 - Building Envelope
 - Mechanical Systems
 - Lighting systems
 - Domestic hot water systems
- Sustainability/Redundancy
 - Microgrids
 - The all-electric hospital
 - Standard sequence of operations for ORs, ASHRAE Guideline 36
- The self sufficient/sustained (“island”) Hospital
- . . .



OSHPD Microgrid Task Force

THE MISSION

Microgrids can be implemented NOW.



To help speed up and simplify the processing of Microgrid projects.

- Early discussions
- Consistent team/approach to review
- Sharing knowledge

To help with the process of delivering Microgrids as Emergency Power Sources (EPS's) for California Healthcare Facilities that are:

- Code compliant
- At least as reliable as the current go to EPS's - Diesel Generators.

Industry Conferences



Healthcare Microgrids to the Rescue

Jamie Schnick/Duc Bui/Rocky Tanner (January 31st)



How California is Making Microgrids Work

Walt Vernon/Ratan Milevej/Jamie Schnick



Health Care Microgrids offer the opportunity to simultaneously lower utility costs, reduce facilities' carbon footprints and provide much needed resilience.

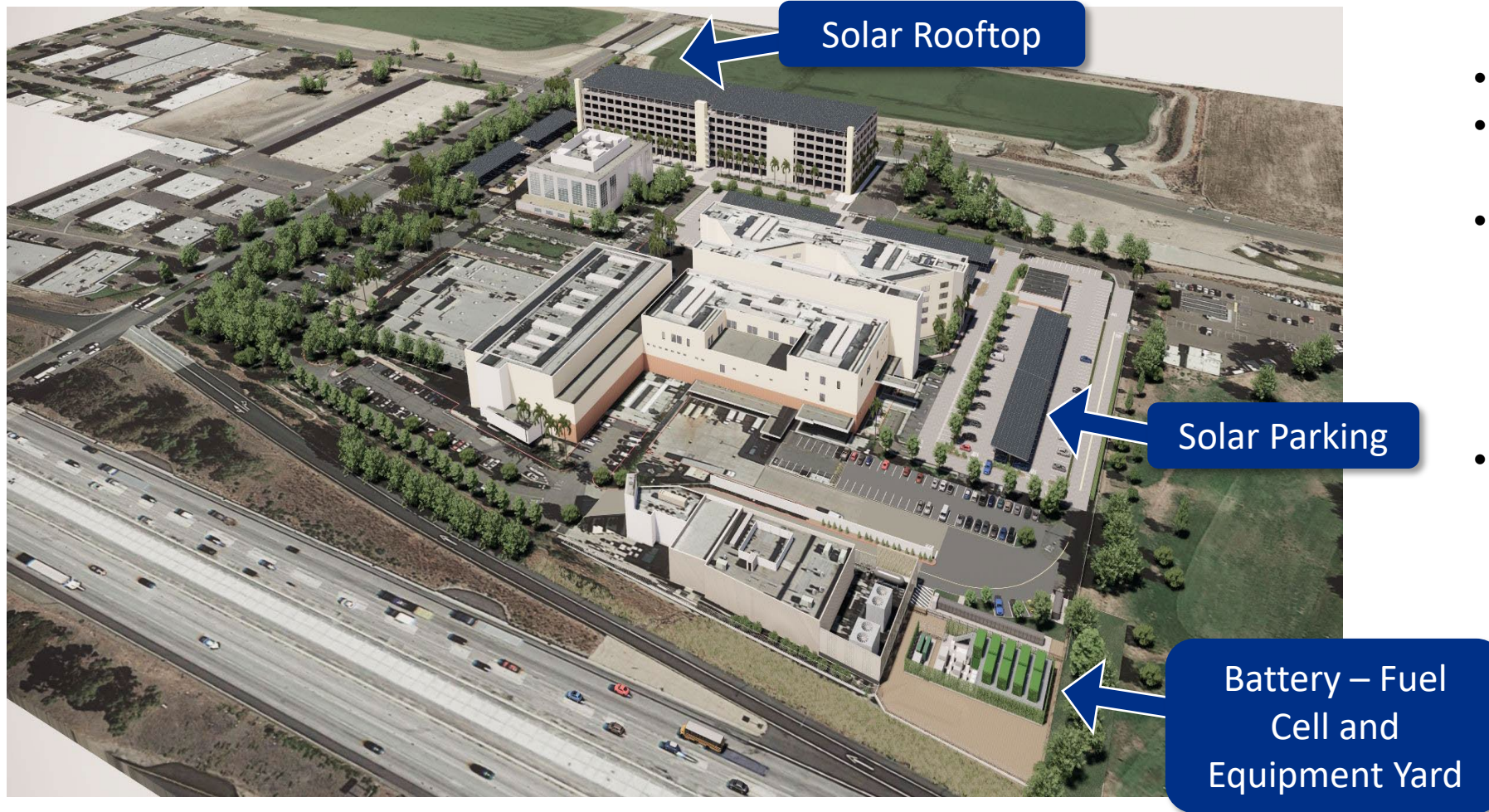
Jamie Schnick/Duc Bui/Rocky Tanner/Rame Hemstreet (September 25th)

Demonstration Projects

- 5 SNF's in Northern California.
- Kaiser San Marcos
- Kaiser Ontario
- Valley Children's Healthcare



Demonstration Project: Kaiser Ontario



- New Hospital
- 224 Bed Facility Project
- 2 MW Solar, 9 MWH Battery, 1.7 MW Fuel Cell,
 - 100% Backup Power
- 6 MW Diesel Generators Emergency

IMPLEMENTING ONE OF THE LARGEST RENEWAL ENERGY MICROGRID

- Solar PV - 1.32MW
- Fuel Cell - 2.2 MW
- Battery - 1.4 MWH



CDPH and OSHPD Joint Issues, Task Force Groups, etc.

- **CDPH Program Flexures (Flex)**

- CDPH Policy Change

- Decentralized and processed thru the District Offices
 - 3 years Max approval
 - HCAI electronic submittal and distribution to CDPH's District Offices

- OSHPD & CPFU Joint monthly meetings, i.e.

- Temporary use of exist space.
 - OSHPD role as ambassador.

- **Purpose:** Provide valuable service!

- Utilizing specialized attributes only available when collaborating with both offices.



Imaging Room Classification

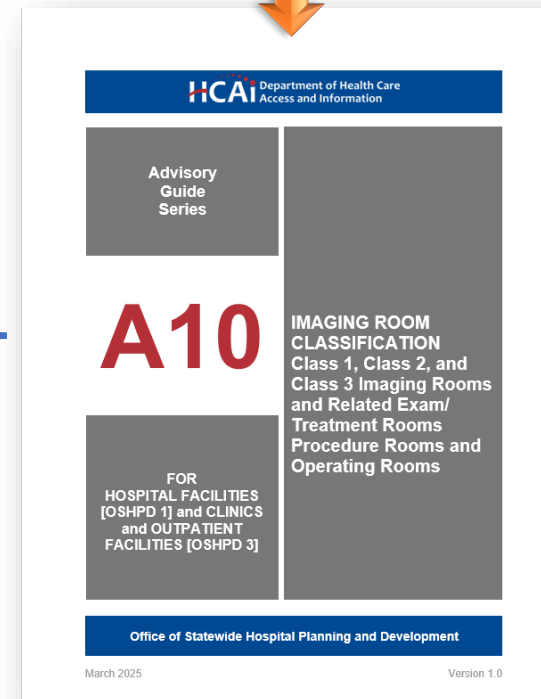
Class 2 Imaging Room – The Gray Area Between Class 1 & 3

Reviewed by HCAI's Chief Med Officer

Approved by HBSB

| Class 2 Imaging Room – The Gray Area Between | | |
|--|--|--|
| Class 1 Imaging (Exam/Treatment Room) | Class 2 Imaging (Procedure Room) | Class 3 Imaging (Hybrid Operating Room) |
| Unrestricted Area Accessed from an unrestricted area | Semi-restricted Area Accessed from an unrestricted area or a semi-restricted area | Restricted Area Accessed from a semi-restricted area |
| An imaging room designated for the performance of patient care activities that may require high-level disinfected or sterile instruments but does not require the environmental controls of a Class 2 imaging room / procedure room. | An imaging room designated for the performance of patient care activities that may require high-level disinfected or sterile instruments and some environmental controls but do not require the environmental controls of a Class 3 Imaging Room. | and has equipment to enable diagnostic imaging before, during and after surgical procedures. |

2025 CBC Changes approved by CBSC.
Effective Jan. 2025



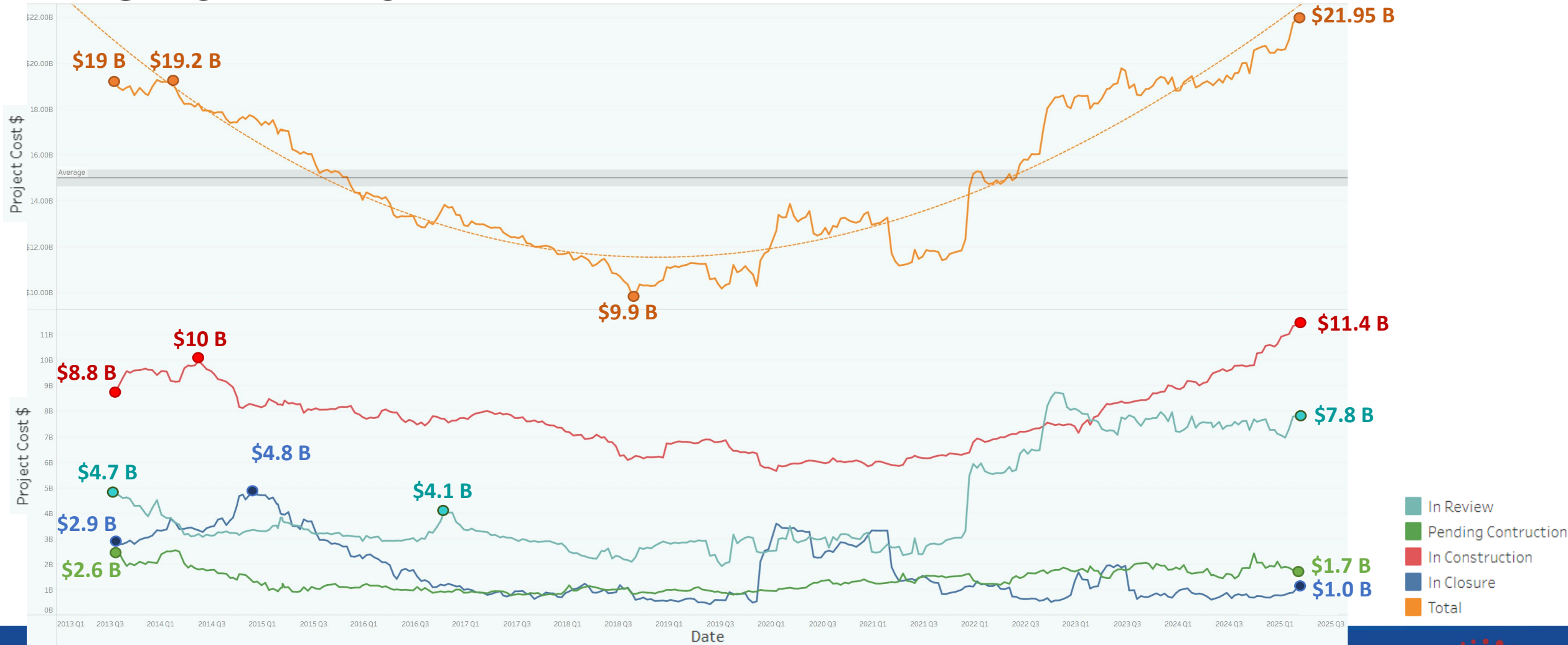
Working w/ CDPH ...

Working w/ HCAI's
Chief Med Officer

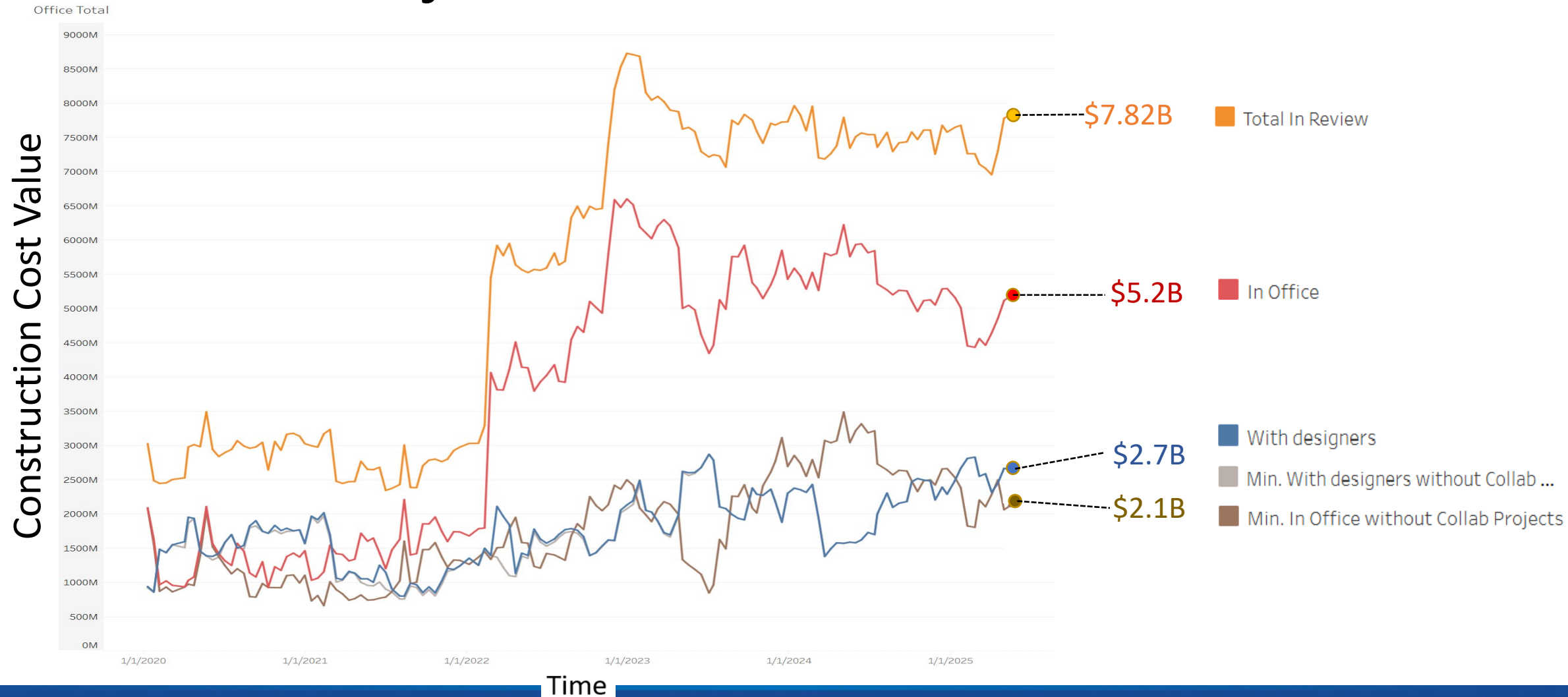
Plan Review and Field Performance Update



Workload in Construction Costs for Projects Over Time

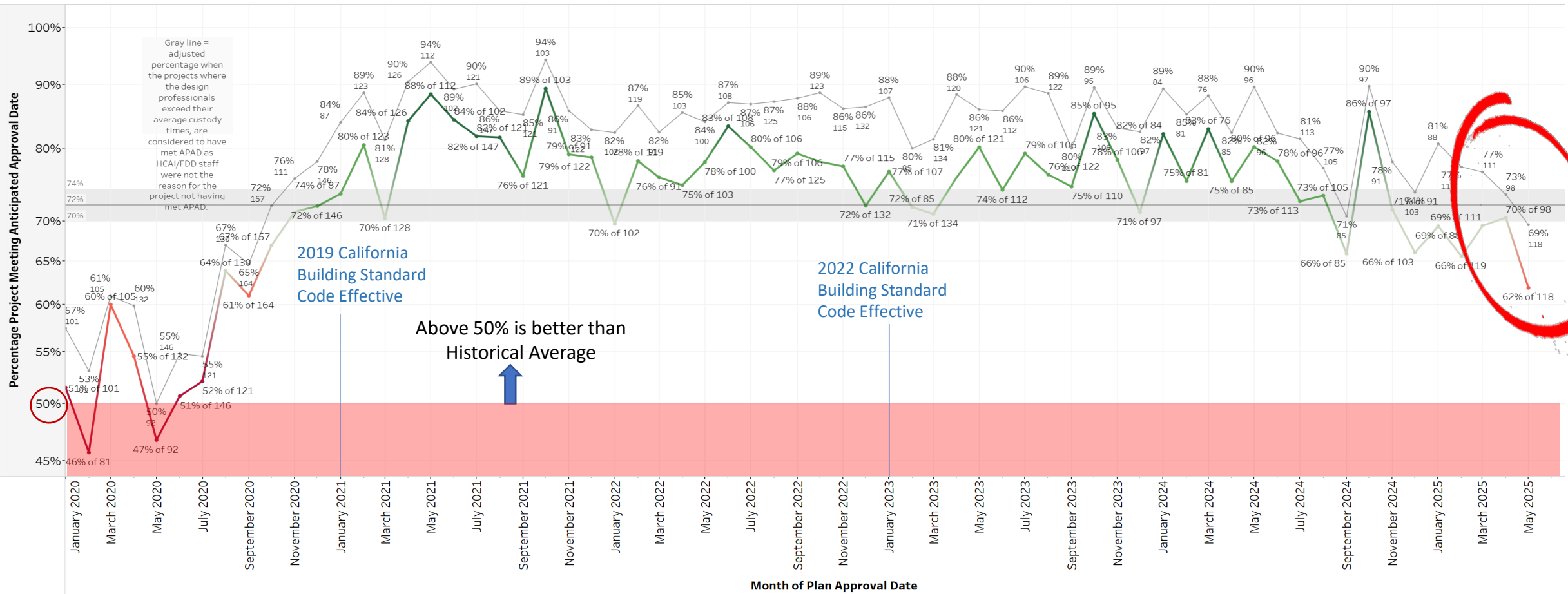


Who Has My Plans?



Anticipated Plan Approval Date

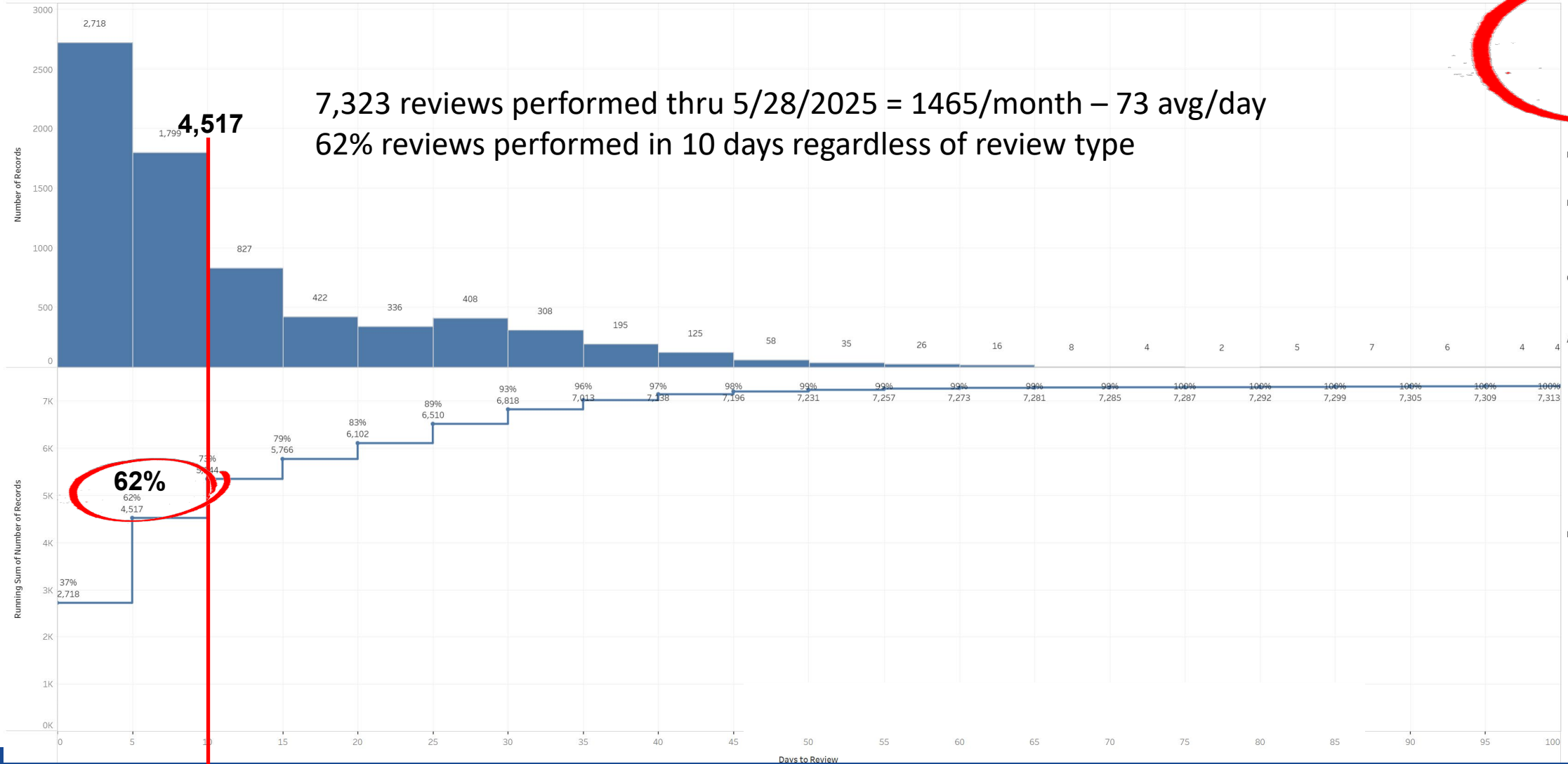
Year over Year Comparison of Records Meeting or Beating APAD (Data as of 5/29/2025 7:04:27 AM):



Project Review Turnaround Times

2025

Performance for Period Selected (1/2/2025 to 5/28/2025)



Number of Records
7,323

Average Days to Review
11.86

Results Date
1/1/2025

5/28/2025

Project Type

- ☒ (All)
- ☒ Application for New Project
- ☒ Incremental
- ☒ Post Approval Document

Office or Field Region

- ☒ (All)
- ☒ Field Regions
- ☒ Office Review Regions

Assigned Region

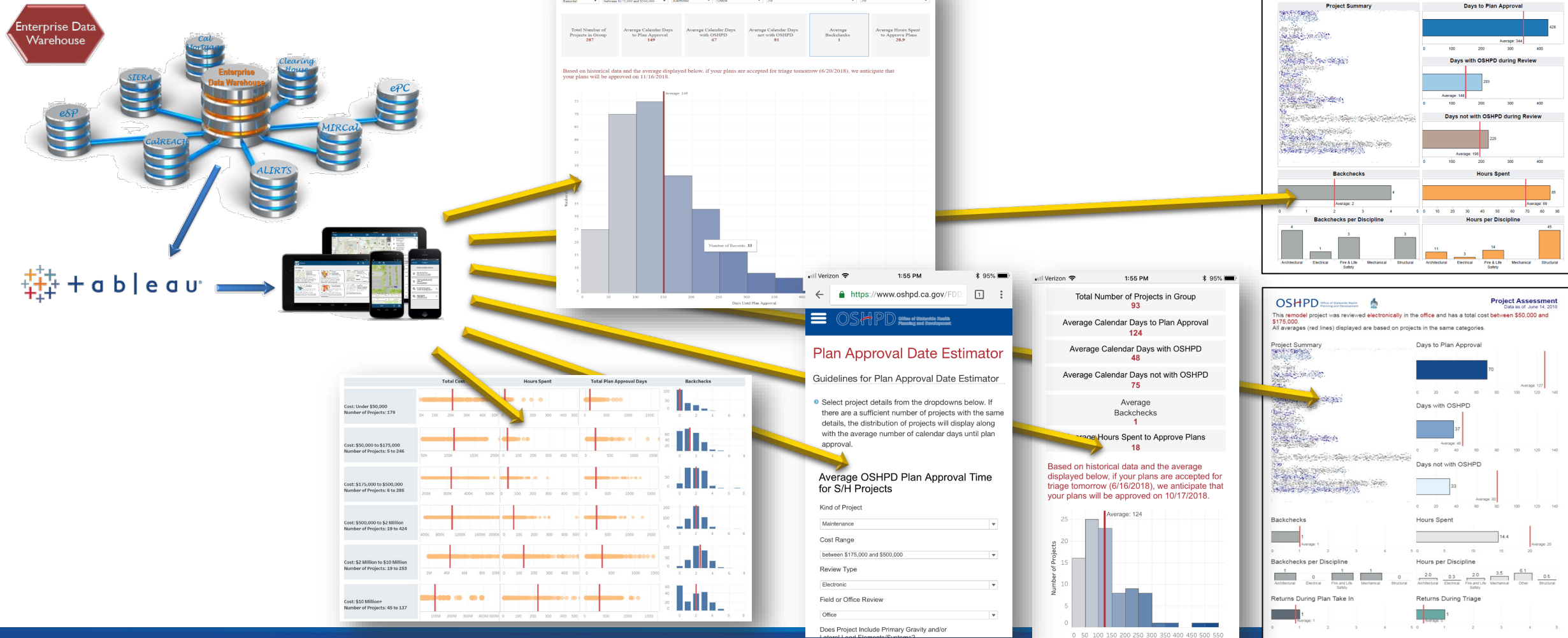
- ☒ (All)
- ☒ Central Region
- ☒ Central Region - Field
- ☒ Coastal Region
- ☒ Coastal Region - Field
- ☒ North Los Angeles Region
- ☒ North Los Angeles Region - Field
- ☒ North Region
- ☒ North Region - Field
- ☒ South Los Angeles Region
- ☒ South Los Angeles Region - Field
- ☒ South Region
- ☒ South Region - Field

Backcheck

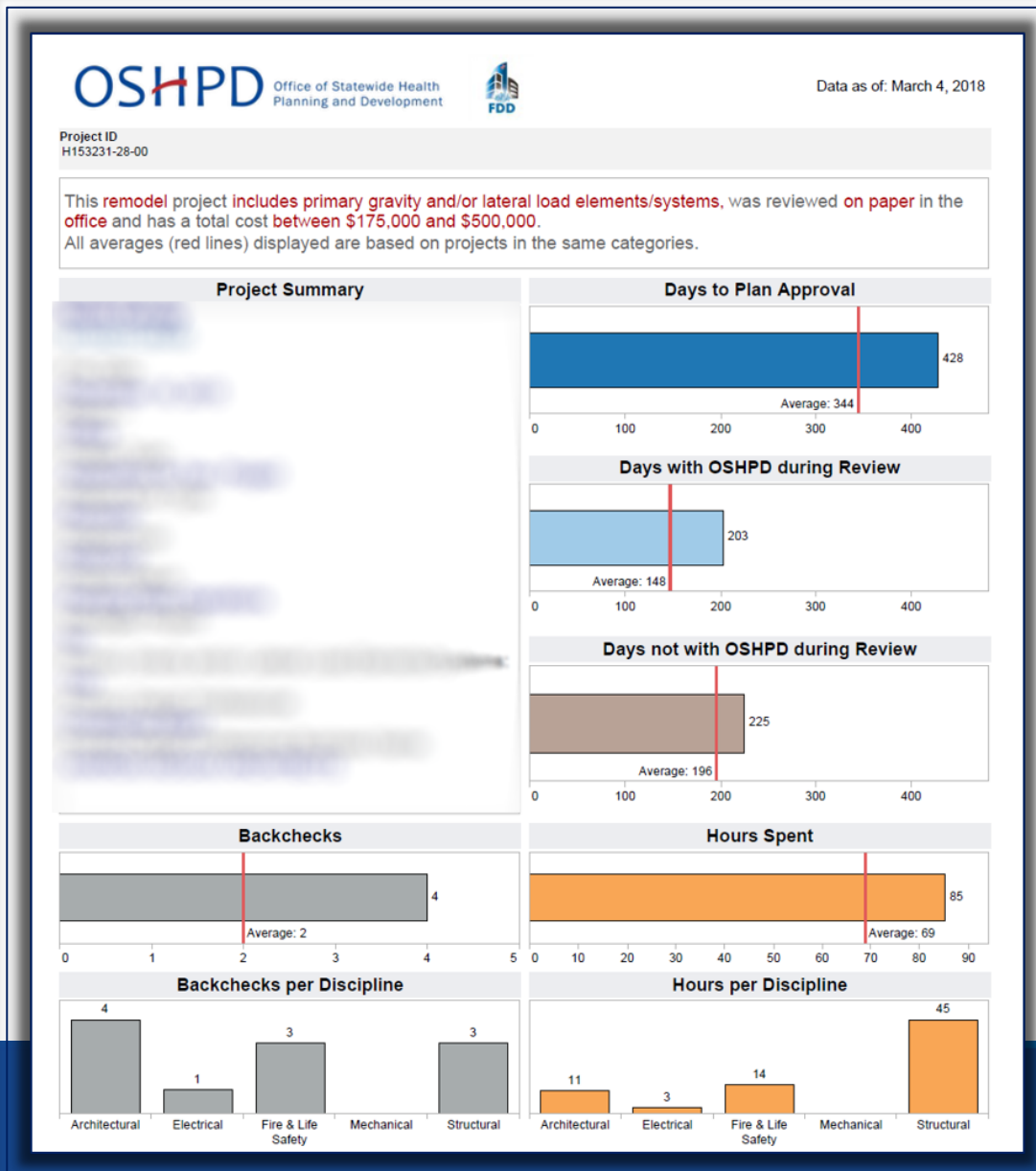
- ☒ (All)
- ☒ Backcheck 0, First Review
- ☒ Backcheck 1
- ☒ Backcheck 2+

10 days

Technology as a Catalyst for HCAi to Deliver Value to its Constituency

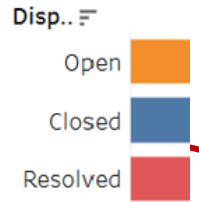


Project Assessment Report

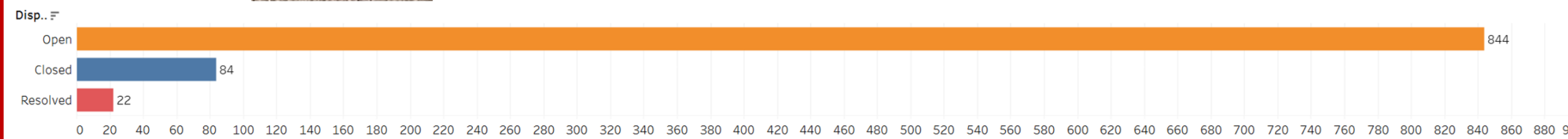


- The Project Assessment Report is a fact-based visualization that graphically displays the key metrics for the project and compares them to statistical averages
- When plans are approved, a Project Assessment Report is generated and automatically uploaded to the Project Documents
- *Are projects resubmitted “complete” in a timely manner?*

IRP (Collaborative) Review- Project X

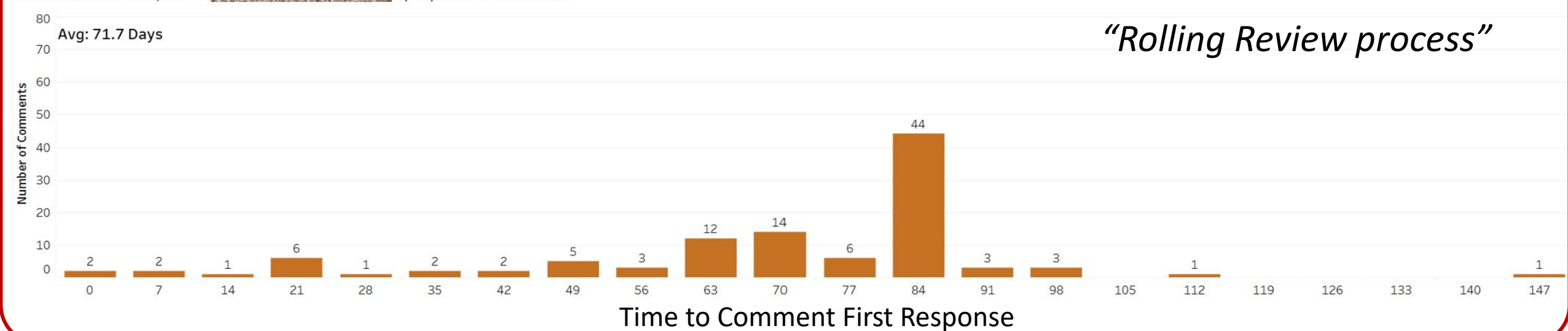


Current Comment Disposition - 5/27/2025 7:03:30 AM



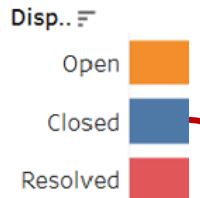
No. of Comments in Ea. Resolution State

Comment First Response - 5/27/2025 7:03:30 AM

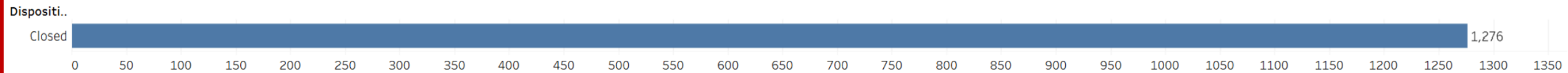


Are responses resubmitted "complete" in a timely manner?

IRP (Collaborative) Review- Project Y

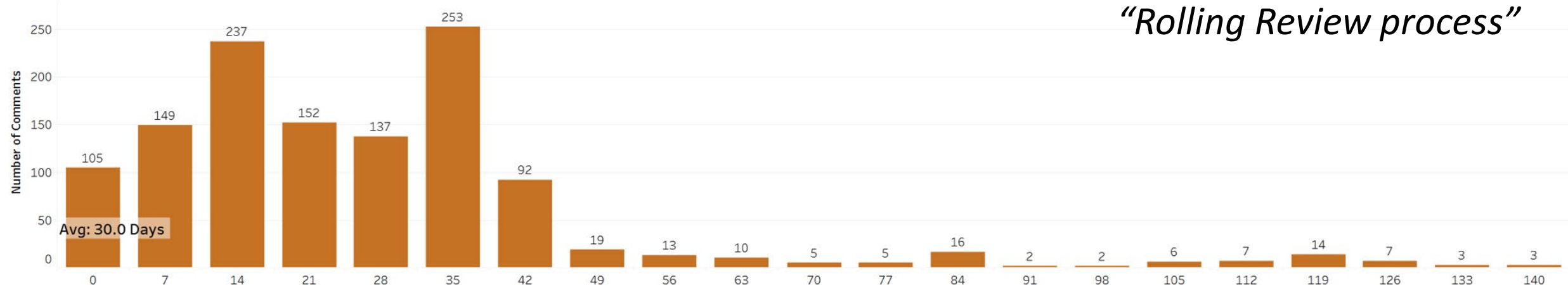


Current Comment Disposition - [REDACTED] - 5/27/2025 7:03:30 AM



No. of Comments in Ea. Resolution State

Comment First Response [REDACTED] - 5/27/2025 7:03:30 AM

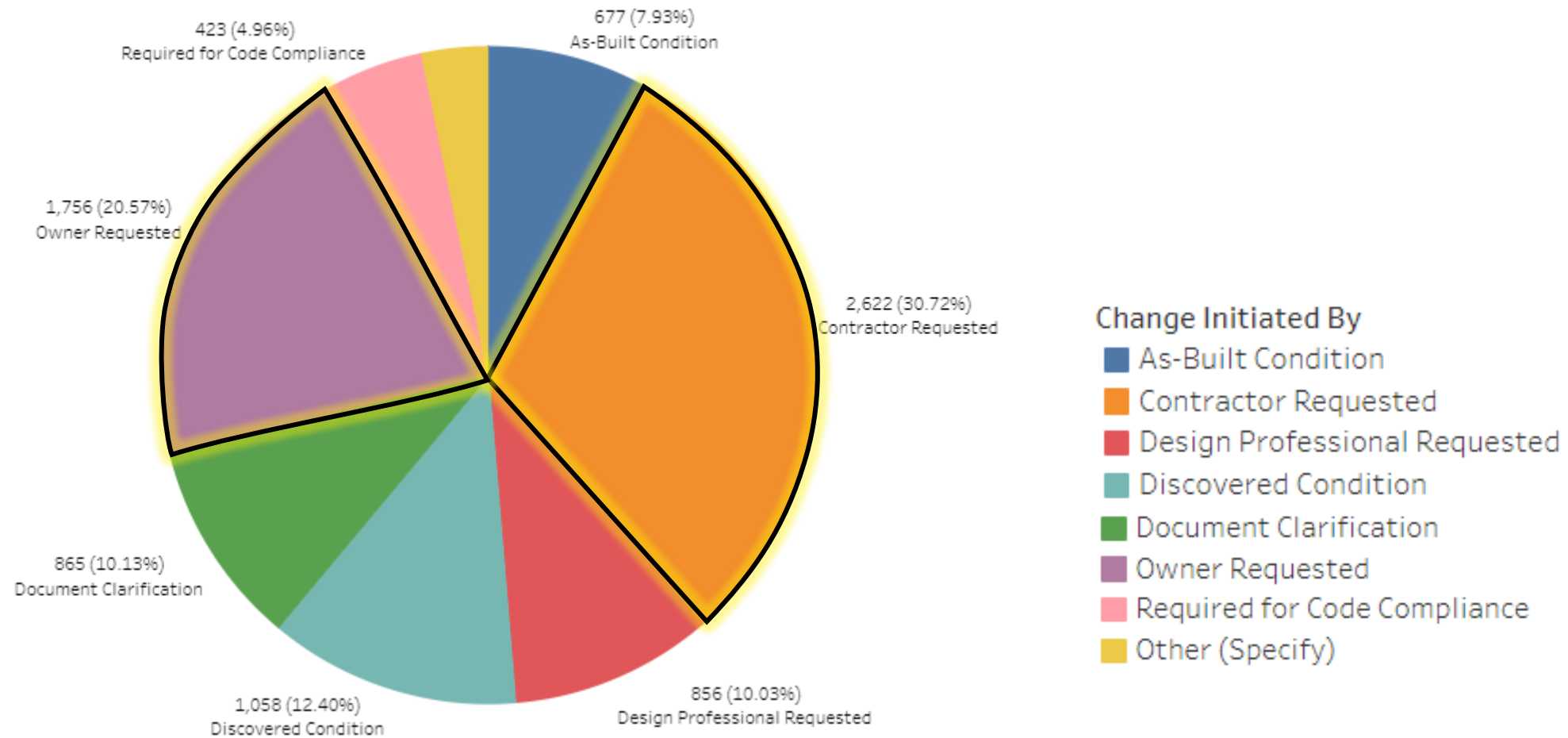


“Rolling Review process”

Time to Comment First Response

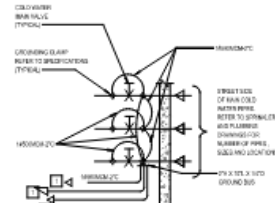
ACDs Where Reason Provided (2025)

Based on Count

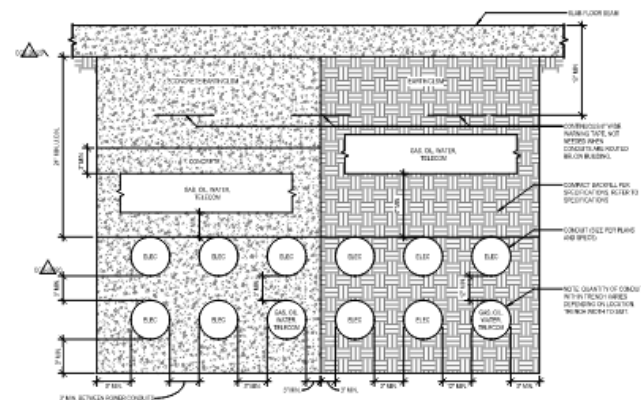


CCD-20256

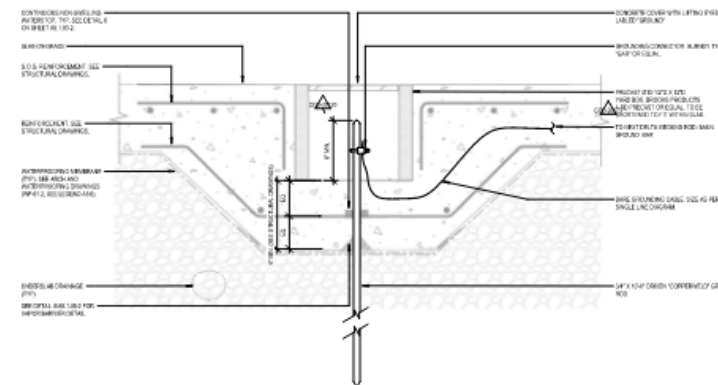
THESE STANDARD DETAILS ARE INTENDED TO ILLUSTRATE VARIOUS MATERIALS AND METHODS FOR INSTALLATION OF ELECTRICAL SYSTEMS. THEY ARE NOT INTENDED TO RESTRICT THE USE OF OTHER CODE COMPLIANT INSTALLATION MATERIALS AND METHODS THAT ARE NOT DETAILED ON DRAWINGS BUT ALLOWED BY SPECIFICATIONS. FOLLOW MANUFACTURER'S INSTALLATION INSTRUCTIONS.



NOTE: IF STANDARD DETAILS ARE INTENDED TO ILLUSTRATE VARIOUS MATERIALS AND METHODS FOR INSTALLATION OF ELECTRICAL SYSTEMS, THEY ARE NOT INTENDED TO RESTRICT THE USE OF OTHER CODE COMPLIANT INSTALLATION MATERIALS AND METHODS THAT ARE NOT DETAILED ON DRAWINGS BUT ALLOWED BY SPECIFICATIONS. FOLLOW MANUFACTURER'S INSTALLATION INSTRUCTIONS.



UNDER SLAB TRENCH (TYPICAL)



GROUND ROD AND WELL (TYPICAL)





HCAI Emergency Operations Center

Southern California Fires January 2025

Disasters related to what we do

- Natural Hazards Events

- Earthquakes

- Floods

- Tsunamis

- Hurricanes

- Mudslides

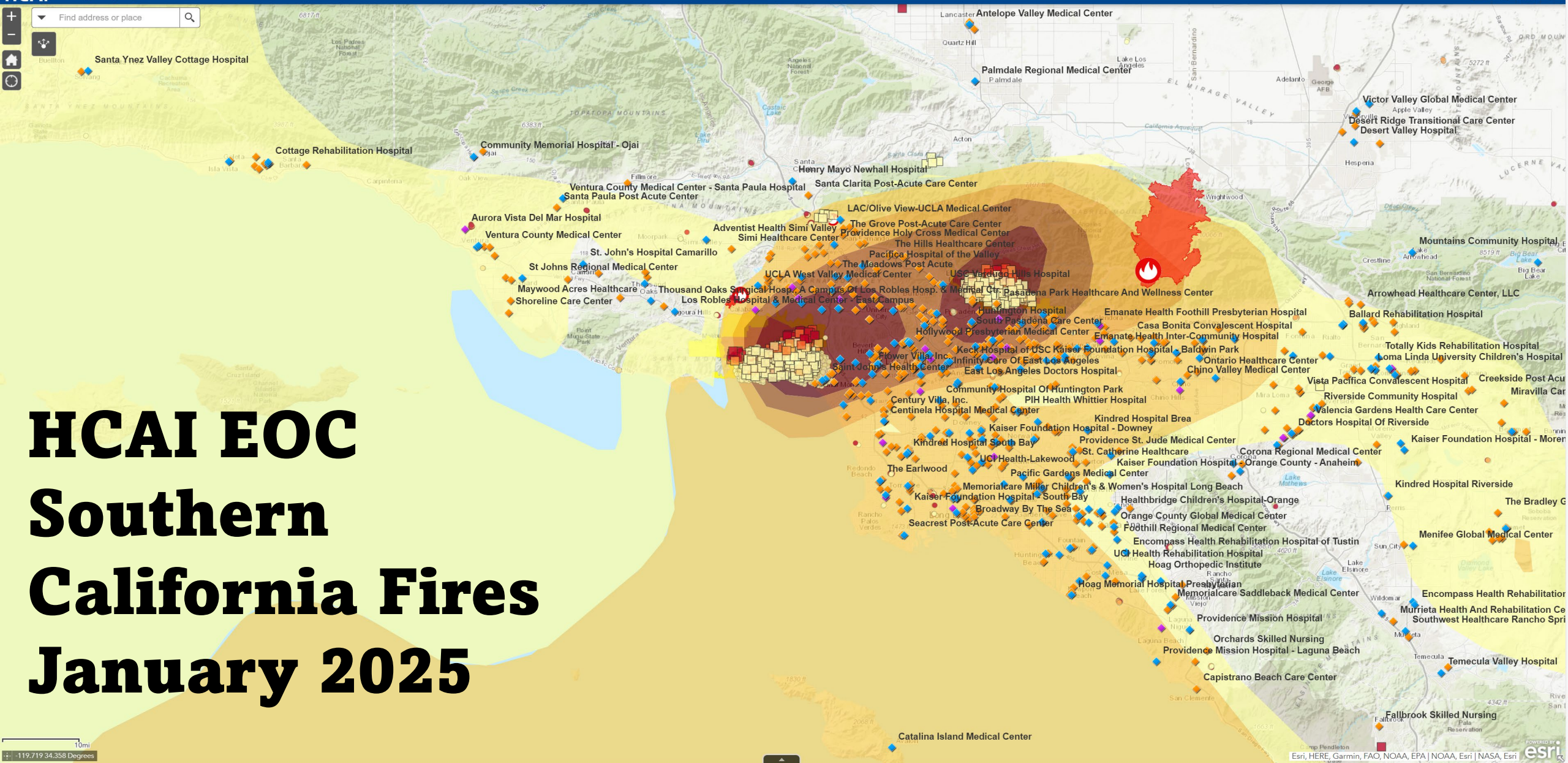
- Infrastructure Failure

- Fires

- Epidemics/Pandemics

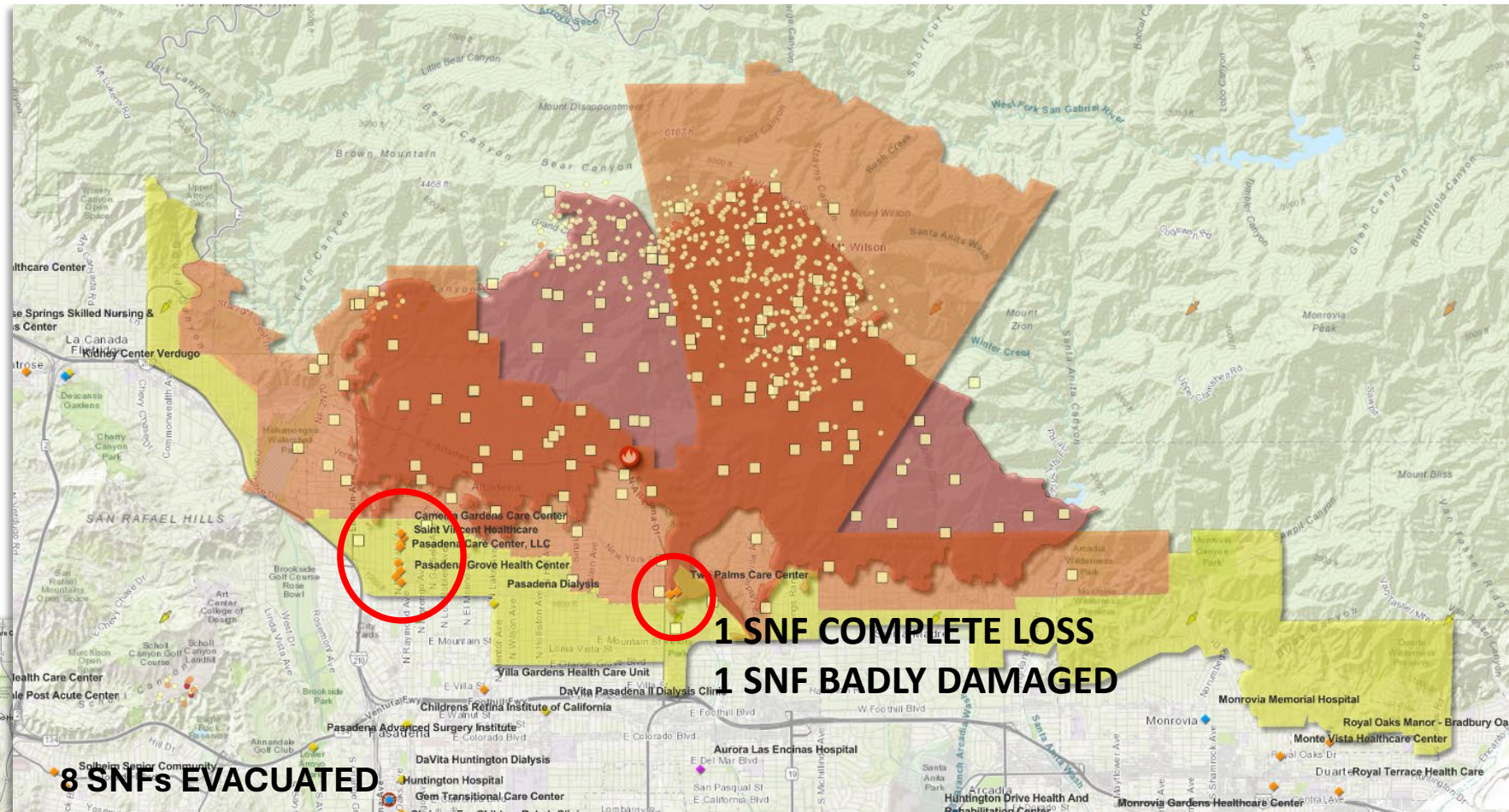
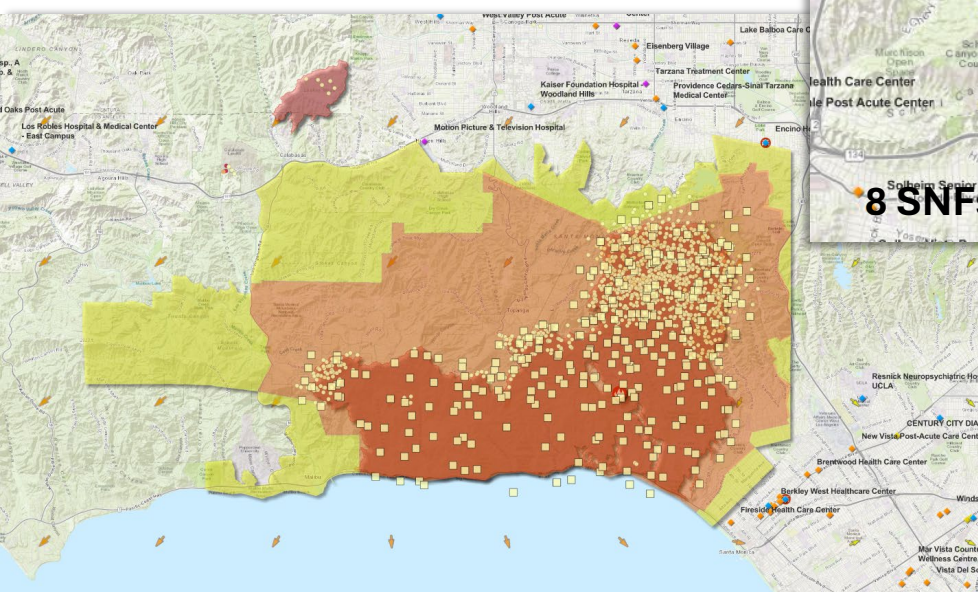
- Other





1/13/2025
17:30 hrs.

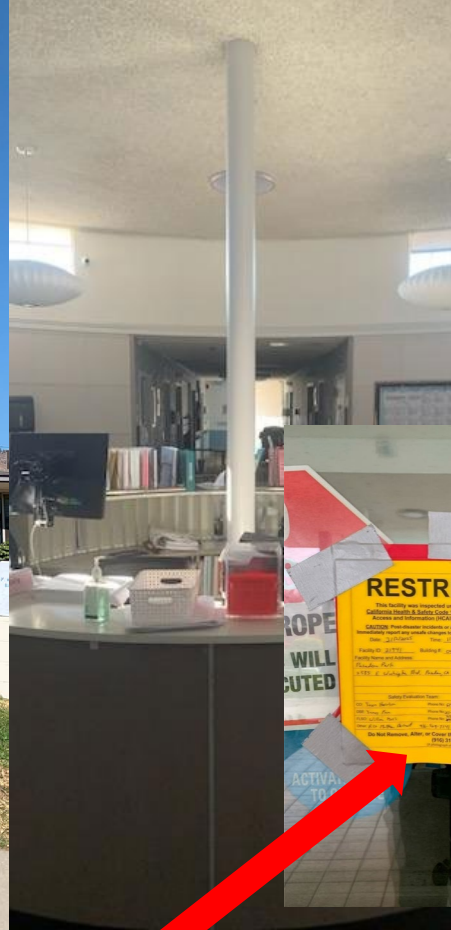
PALISADES INCIDENT
Type: Wildfire
Acres Burned: 23,713
Percent Contained: 14%
No OSHPD Jurisdiction
Facilities in Evacuation Zones



↑ **EATON INCIDENT**
Type: Wildfire
Acres Burned: 14,117
Percent Contained: 33%

SNF Repopulation Visits by OSHPD Field Staff





SNF Badly Damaged (Pasadena Park)

Initially Red tagged, revised to yellow to allow repair work

California Administrative Code, Chapter 7 Safety Standards for Health Facilities, Article 2 Definitions, Section 7-111

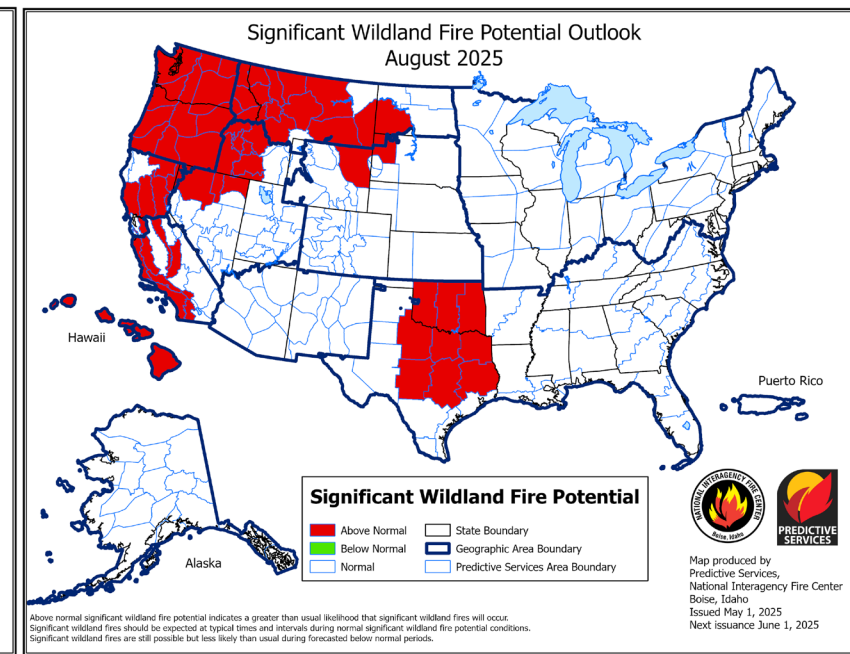
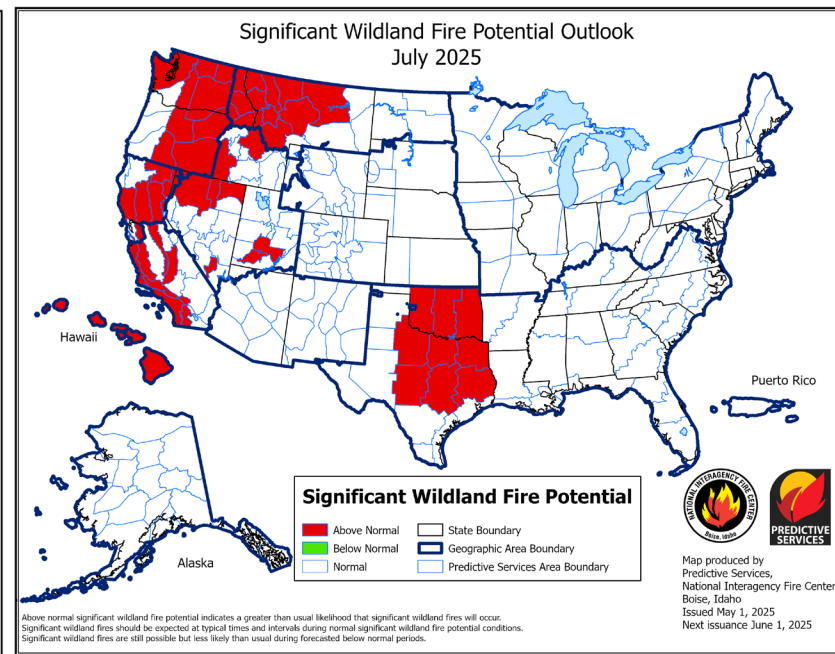
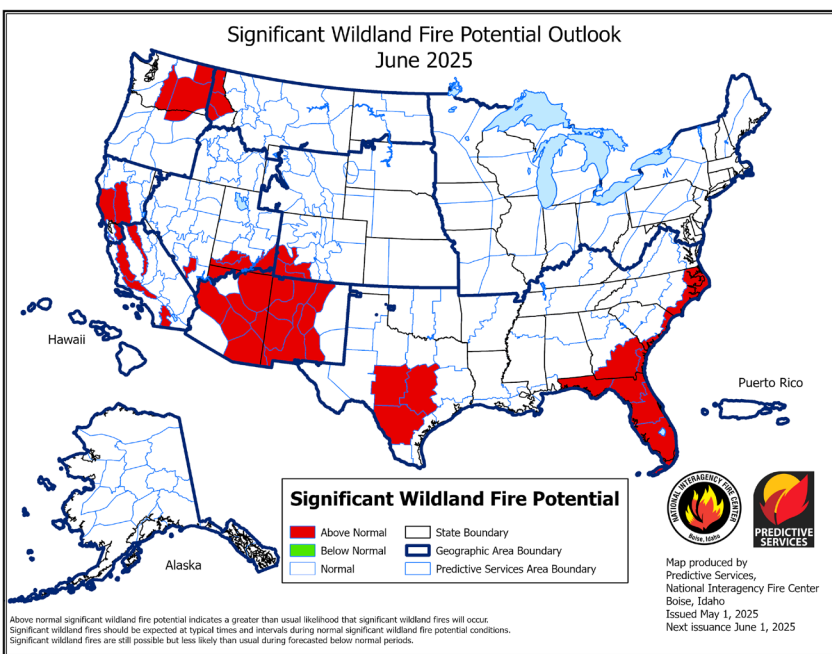
- **EMERGENCY REPAIR [OSHPD 1, 2, 3 & 5]**
Repair to, or replacement of, an element of a building, structure, utility system, or equipment that is essential to the continued safe occupation and operation of a facility. May include repairs needed after a disaster.

ARTICLE 20 REPAIR OF DAMAGE AFTER AN EMERGENCY 7-300. Plan review and approval.

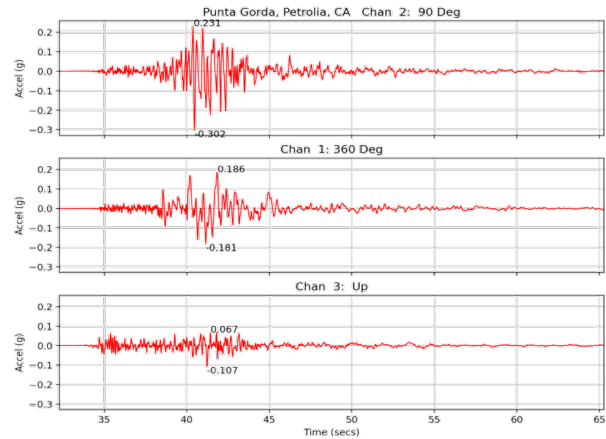
(a) All repair projects are subject to prior plan review, plan approval and construction permit by the Office except as noted in subsection (b).

(b) For emergency repairs carried out without the Office plan review and permit the aftermath of an emergency, an application for plan review must be submitted with construction documents, fees and a letter of transmittal stating the reasons for emergency repairs. Photographs, if available, and reports of damage and repairs should also be submitted with the application. Additional repairs may be required if the emergency repairs do not comply with the code. For alternate fee payment methodology, see Section 129787 of the Health and Safety Code.

Fire Season 2025



HCAI Website – Viewers for earthquake free-field ground motion and instrumented buildings



Orbit Plots

☐ Create Orbit Plots

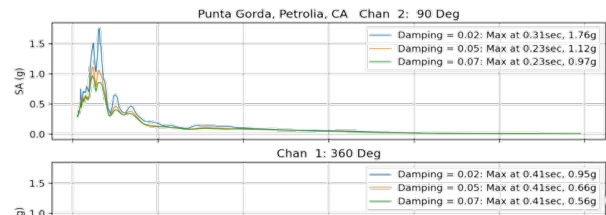
Response Spectra

Type of Spectra Damping End Period

Type of Spectra

Accel

☒ Create Response Spectra



<https://hcai.ca.gov/facilities/building-safety/facility-detail/>

Facility Info Building Services Instrumented Buildings AB2190 Report Unavailable Plan Compliance Plan Back to Main

10184 Providence St. Joseph Hospital

2700 Dolbeer St
Eureka, CA 95501

Field Free Instruments: [89781 CSMIP](#)

Instrumented Building List

| Bldg Num | Bldg Name | Station Network |
|-----------|---|-----------------|
| BLD-00537 | Phase III Addition Building | CSMIP |

App to view Free-Field Ground Motions
(Experimental)

App to View Instrumented Building Recordings
(Experimental)

Recorded Values

Read in memory: 20743204-1733524702P.zip

Number of channels read: 11

station: Eureka - 4-story Hospital

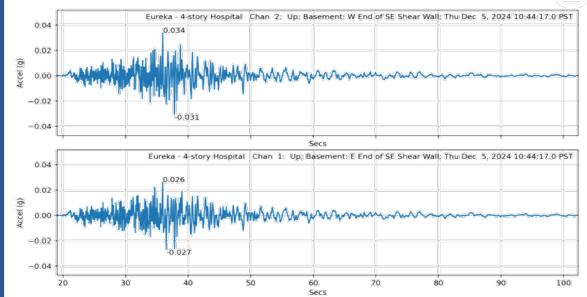
☐ Rearrange channels to change display order?

Plot

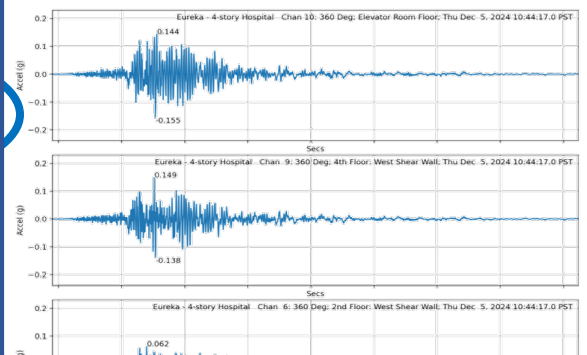
Accel

Plotting Accel for all channels

Vertical Motion Channels



NS Channels



Building Standards Unit

Mia Marvelli, BSU Supervisor



Building Standards Unit Duties

Architectural, Mechanical and Electrical Technical Lead Support for all Regions

Education and Outreach (CANs, PINs, Guides, Webinar)

State Agency coordination (CDPH, DHCS, DSA, SFM)

Industry coordination (CPCA, CAHF, AIA)

Develop Title 24 regulations

Analyze and Implement Legislation

Participate in National Codes and Standards development

BSU Current Priorities & Key Initiatives

- SB 1382 Clinic – Right-size Primary Care Clinics (1226.6) clinic regulations
- Alternative Birthing Clinics - Right-Size ABC (1226.11)
- Empath/Behavioral Health/Crisis Stabilization regulations
- AB 2376 Chem Dependency Recovery Hospitals (CDPH)
- Miscellaneous cleanup items

Recap of stakeholder engagement

4/9/2025: Met with the California Primary Care Association (CPCA) Community Clinic Advisory Committee [17 attendees] [CPCA Home](#)

Discussed prior accomplishments with the committee

Provided them a PCC Title 24, Title 22 comparison table

Asked for feedback by May 31

Discussed a future Guidance document and checklist

Explained the Title 24 cycle and need to complete work by Oct. 2025

PCC Title 24 remaining priorities

- HVAC
- Plumbing material type
- Plumbing fixture count (public, patient and staff)
- Room sizes (existing vs new)
 - Treatment room and exam room
- Clean utility, soiled utility, waste holding
- Corridor widths
- Hot water heating
- Right-size requirements for various types of clinic types (clinics not under a hospital license)

Public meeting information

On the [HCAI](#) homepage under **Facilities** click **Codes and Regulations**

Then click **Title 24 California Building Standards**

[Codes and Regulations - HCAI](#)

2025 Intervening Code Adoption Cycle

The Intervening Supplement (blue pages) will be published January 1, 2027, with an effective date of July 1, 2027.

Pre-cycle Public Meetings

[Alternative Birthing Clinics \(ABC\) Public Meeting](#) – May 1, 2025 from 10am-12pm.

SB 1382 Public Meeting #1 – More information coming soon.

SB 1382 Public Meeting #2 – More information coming soon.



ABC Title 24 Comparison Table

The table compares Title 24, Title 22 and AABC: We met with several ABC representatives to better understand ABC needs, challenges getting licensed, and suggestions. We took their comments and edited the OSHPD comment column.

Table includes:

- CBC (California Building Code)
- CMC (California Mechanical Code)
- CPC (California Plumbing Code)
- CEC (California Electrical Code)

ABC Title 24 Priorities

- HVAC/ventilation
- Plumbing material type
- Plumbing fixture count (public, patient and staff)
- Room sizes
 - Birthing room and exam room
- Nurse call
- Clean utility, soiled utility, waste holding

Empath/Behavioral Health/Crisis Stabilization

Demand for out-patient behavioral health units. State grants encourage these services in hospitals

Behavioral Health Continuum Infrastructure Program by Dept. of Health Care Services

EmPATH by the Mental Health Services Oversight & Accountability Commission

Empath/Behavioral Health/Crisis Stabilization

Physical Space Design Concepts for Crisis Stabilization Units in Hospitals

- Outpatient service outside of any Inpatient Unit and not part of the Emergency Department
- Calming, healing environment that prioritizes safety and freedom
- Large, open space where patients can be together in the same room
- Designed to facilitate socialization, discussion, interaction and therapy
- Patient care stations utilizing a chair model outfitted with recliners, 80 sq. ft. total per patient, which includes 40 sq. ft. patient area around each recliner
- Open staff observation station w/instant access to staff, separate from the patients
- Nourishment area or room for providing food and/or drinks for patients
- Voluntary Calming Rooms – If provided with visual observation for staff

Miscellaneous code changes

| | | | | | | | |
|----|------------------------|---|--------|-----|-------------|--|---|
| 47 | | | | | | | Dirty room cannot open to restricted room (sterile area) |
| 48 | 1224.35 | Update rehab for title 22 requirements in section 70603 rehab, 70521 occupational, 70563 physical therapy | Normal | 0% | Mia | | Title 22 includes requirements and needs to be confirmed |
| 49 | 1224.4.4.5 | Update language to align with the plumbing code. | Normal | | Larry E. | | See 25-02-10 Conflict between building and plumbing code |
| 50 | 1224.28 | Update to reflect interventional being in Class 2 or 3 room | Normal | | | | See 25-02-07 Control room or Area |
| 51 | 1224.18.3.1 | Update language | Normal | | Samantha M. | | See 25-02-08 Language change |
| 52 | 1224.33.2.1 | Editorial change to make one sentence into two sentences | Normal | | Samantha M. | | See 25-02-06 Section 1224.33.2.1 Editorial change |
| 53 | 1224.36.3 | Ancillary services in dialysis and infusion. Clarify if this is for outpatient only and not needed if inpatient only. | Normal | | Clara W. | | See 25-09 Ancillary facilities email |
| 54 | 1224.39.4.3 | Ancillary services in dialysis and infusion. Clarify if this is for outpatient only and not needed if inpatient only. | Normal | | Clara W. | | See 25-02-05 Ancillary facilities |
| 55 | 407.4.1 | Add Exception #3 to Section 407.4.1 Direct access to corridor. | Normal | | Mia M. | | See 25-02-04 Direct access to a corridor |
| 56 | 903.2.6 | Rename section number | Normal | | Samantha M. | | See 25-02-03 CBC 903.2.6 Exception 1 |
| 57 | 1224.33.3.11 | Observation toilet ratio is 1:8 - Table 4-2 and FGI 2.2-3.3 1:6 | | | Mia M. | | |
| 58 | 1224.33.2.2 | counters vs mobile work surface option | Normal | | Clara W. | | See 25-02-26 1224.33.2.2 fast track area (waiting for CDPH response) |
| 59 | Table 1224.4.6.5 | Nurse call requirements for SNF OSHPD 2 | Normal | | Clara W. | | See 25-02-27 Nurse Call Requirements and 25-02-28 Nurse call requirements (2) |
| 60 | 1224.4.11.2.2 | Rooms listed to require coved base - update to 2022 FGI | Normal | | Clara W. | | FGI lists 14 spaces required to have coved wall base. Sterile processing, pharmacy compounding and ED trauma should be added to list see email 25-02-29 |
| 61 | 1224.35.3 | Check the rehab sections PT and OT for grab bar requirements in toilet rooms. See T-22 requirement | Normal | 0% | Mia | | See 25-02-30 |
| 62 | 508.2.4 Exception 3 | Separation of occupancies. Is item 3 necessary and the exception? | Normal | 0% | Mia | | See 25-02-31 508.2.4 Item 3 and Exception |
| 63 | 1224.4.11.1.1 | no change needed, need to verify last section is in the 2025 edition | | | Mia | | See 25-02-32 CBC 1224 |
| 64 | 1226.4.13.2 | Section 1226.4.13.2 needs to match 1224.4.4.2 | | | Mia | | See 25-02-33 1226.4.13.2 needs to match 1224.4.4.2 |
| 65 | 422.7 | 422.7 adding item 6 separating areas with cooking facilities from the 2024 cbc changes with the sfm | | | Mia | | See 25-02-34 two emails |
| 66 | 1224.37 | Respiratory Therapy - see FGI 2.2-3.9 for additional requirements. | | | | | Room function in Table 4-A for sputum collection or other cough inducing therapy for potential infected patients. (TB) |
| 67 | 1224 | Empath/Behavioral Health/Crisis Stabilization regulations | High | 60% | Paul C. | | See 25-02-35 Re EmPATH Licensure. See cycle themes abcoe |
| 68 | 1224.42, 1228.44, 1229 | AB 2376 (2024) Chem Dependency Recovery Hospital | High | | Mia M. | | See 25-02-26 AB 2376 CDRH |

Miscellaneous code changes

- Chapter 3-7 - Possible I-2 related amendments; coordinate with the SFM
- Section 407.4.1 - direct access to corridor may need an exception allowing an intervening room or anteroom – coordinate with SFM
- Chapter 11B – Correct 11B-223-2.3 reference to 11B-805 (medical care and long-term care) instead of 806 (transient lodging) - coordinate with the DSA-AC
- Chapter 11B – clarify sink types listed in 11B-805 for non-patient care areas of medical facilities - coordinate with the DSA-AC
- Section 1202.2 –ventilation for attic spaces - coordinate with DSA-SS

Chapter 12

- Provide direction on how many nurse call stations required in NICU with multiple bassinets and just curtains in between each.
- FGI Table 1.2-4. AHSRAE 170 also developing max noise criteria for building systems. Coordinate with CMC/CPC
- ED Treatment rooms consider mobile work surface option vs counters
- Rehab: PT, OT, ADL OT spaces intend to train patients in real-life scenarios, what are the accessibility requirements? Panic hardware, bathtub access, grab bars - coordinate with CDPH
- Correct 1225 to point to Table 1224.4.6.5 vs the CEC Section 517.123.
- Research ED, OB, and other services that require on-call rooms.

Chapter 12

SECTION 1224 [OSHPD 1] HOSPITALS

- 1224.4.6.5 - Add footnote so nurse call is allowed to be in the MRI control room in lieu of the MRI procedure room.
- 1224.17.3 - Blood collection area or specimen collection toilet should not be required if only inpatient services are provided.
- 1224.22- Update Central Sterile Supply with 2022 FGI 2.1-5.1 language. Soiled work area is named decontamination room - requires handwashing station - match CMC Table 4A and Table 4-2 for function name.
- 1224.36.3 & 1224.39.4.3 - Ancillary services in dialysis and infusion. Clarify if this is for outpatient only and not needed if inpatient only.

AIA Central Valley - AAH

BSU meets bi-monthly

- Provide updates on PINs, CANs, Guides

- Provide updates on T-24

- Receive input and feedback on industry needs

- In-person & virtual 30-40 attendees



AIA-AAH San Diego

May 22, 2025



AIA-AAH San Diego

Tips for better partnering
CANs, PINs, Guides, etc.
Functional Programs & CDPH
SPC/NPC
2025 Title 24 code changes
Future announcements
In-person 80+ attendees



AIA AAH- San Diego Association of Medical Facility Professionals Partnering with HCAI

May 22, 2025



ASSOCIATION
OF MEDICAL FACILITY
PROFESSIONALS



2024 CBSC Triennial Timeline

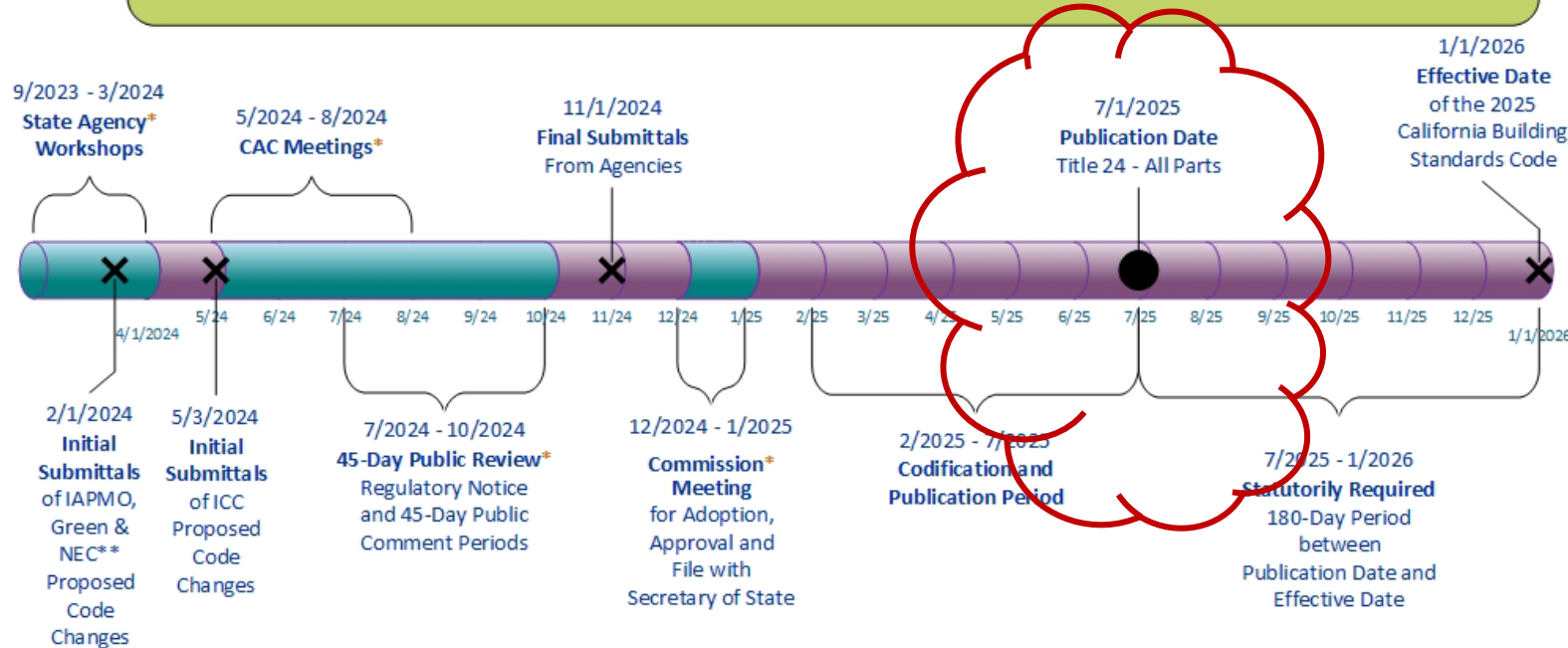


California Building Standards Commission

2025 California Building Standards Code, Title 24

Effective January 1, 2026

2024 Triennial Code Adoption Cycle



Code Advisory Committees (CAC):

ACCESS – Accessibility
BFO – Building, Fire & Other
GREEN – Green Building
HF – Health Facilities
PEME – Plumbing, Electrical, Mechanical & Energy
SDLF – Structural Design/Lateral Forces

Model Code Publishers:

ICC – International Code Council
IAPMO – International Association of Plumbing and Mechanical Officials
NFPA – National Fire Protection Association
**NEC resubmittal if necessary

2025 edition of Title 24

- ✓ Sept. 28, Coordinating Council
- ✓ Initial Submittal early 2024
- ✓ Code Advisory Committee mtgs
- ✓ Public Comment periods Fall 2024
- CBSC Commission meetings Dec. 2024 and Jan. 2025
- Publication July 2025
- Effective Date: Jan. 1, 2026

* Public Participation Opportunity

dgs.ca.gov/BSC
(916) 263-0916

Rev. 02/2022

All dates are subject to change

191

Future Title 24 Timeline

2025 Edition of Title 24 (2025 Intervening Code Cycle - BLUE SUPPLEMENT)

May 2025, CBSC Coordinating Council Meeting

Jan. 2025 - December 2025 STATE AGENCY WORKSHOP PHASE

Jan. – Dec. 2025 meet with HBSB Committees

Dec. 2025 Initial Submittals due to CBSC

During 2025, implement the following Legislation

AB 2376 Chemical Dependency Recovery Hospitals

SB 1382 Clinic Construction Standards

Inspection Services Unit

Hospital Building Safety Board Update

June 3, 2025



Administration of Hospital Inspector Certification FCU Region Assignments / Back-Up
Field Operation Manual & SOP Updates
Enhanced IOR Monitoring with “+Training”
Plan Review Support
HBSB Collaboration
CO Academy
eTIO Development
eTIO Training
IOR Utilization
ISU IOR Supplemental Monitoring
Tip of the Day
Code Change Proposals
Off-Site Construction TIO Requirements
Construction Administration Proficiency (CAP)
Field Staff Meeting
Collaboration w/Colleges for Inspection Services
YouTube Training
HICE Exam Update 2025
IOR Newly Certified Practice Training
IOR Exam Preparation Training

ISU 2025 Goals



HOSPITAL OWNER



HCAi Search ...

Building Safety & Finance Loan Repayments, Scholarships & Grants Workforce Capacity Data & Reports Facility Finder

HCAi Report Center

Office: Trinity Hospital Facility Looking for IORs Go

Displays facilities within a selectable radius from the IORs county.

Facility Name (partial OK) or Facility Number: Facility Number: Select IOR License Type(s): View Report

Miles From Facility:

1 of 1 100% Find | Next

Facility: 11125 - Trinity Hospital

The IORs shown below are in good standing with HCAi and are within the mileage entered. Click the link on the IOR Lic Cert # to view the project workload for the specific IOR.

It is the IORs responsibility to notify HCAi of changes to the presented information.

| IOR License | First Name | Last Name | City | State | Work Phone | Mobile Phone | Email | Number of Projects | Miles from Facility |
|------------------------|------------|-----------|------------|-------|----------------|----------------|--------------------------|--------------------|---------------------|
| A10408 | Chadwick | Magnuson | Redding | CA | (530) 275-8771 | (530) 949-2258 | caltest@aol.com | 0 | 36.3 |
| A20451 | Pern | Laughlin | Anderson | CA | (530) 410-3032 | (530) 410-3032 | per1301@gmail.com | 0 | 37.2 |
| B20068 | Donald | Wampler | Cottonwood | CA | (530) 941-1901 | (530) 941-1901 | donald.wampler@gmail.com | 0 | 38.1 |



Promoting Connection



Search ...

Building Safety & Finance

Loan Repayments, Scholarships & Grants

Workforce Capacity

Data & Reports

Facility Finder

HCAI Report Center

Office of Statewide Hospital Information

IOR Looking for Facilities

G

Displays facilities within a selectable radius from the IORs county.

Enter IOR Name or License # (Wildcard %): %

Select IOR: Gabriel Orick - A20497 - Recertification Processed - Recertification Proce

View Report

Miles to Facility: 10

Show Facilities (Projects Exist or No Projects): Projects Exist

1 of 1

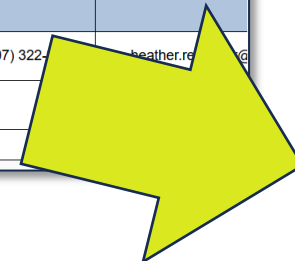
100%

Find | Next

IOR: A20497

The following facilities have projects In Review, Approved and Construction not Started, or In Construction with project count for each. The facility is within the mileage distance shown are the facility representative. To view the current projects at HCAI for a facility, click the link on the Facility ID column.
It is the facilities responsibility to keep HCAI inform of changes in the presented information.

| Facility Number | Facility Name | Facility Contact Name | Title | Business | Work Phone | Mobile Phone | Email |
|-----------------------|--|-----------------------|--|--|----------------|--------------|------------------------------------|
| 15807 | NorthBay VacaValley Hospital | Heather Resseger | SVP, Chief Hospital Operations Officer & CNO | NorthBay Health | (707) 646-5004 | (707) 322- | heather.reseger@northbayhealth.org |
| 18164 | Kaiser Foundation Hospital - Vacaville | | Facility Representative | 18164 - Kaiser Foundation Hospital - Vacaville | (707) 624-4000 | | |
| 21029 | Vacaville Ranch Post Acute | Aaron Edmonds | | | (909) 362-6198 | | |

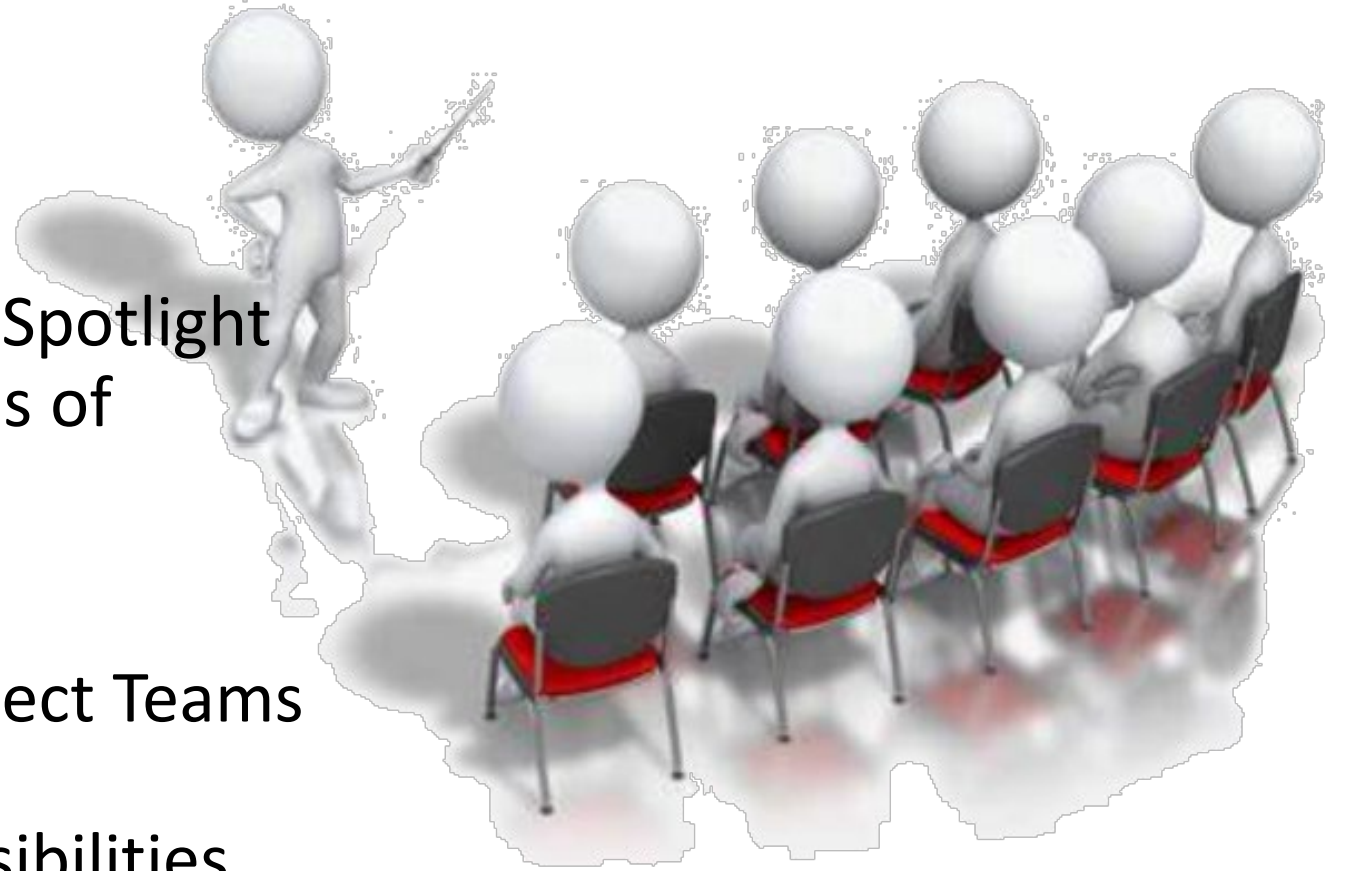


HOSPITAL OWNER

Promoting Connection

Training Programs in the Works

- Statewide Field Staff Meetings to Spotlight Responsibilities and Competencies of HCAI/OSHPD Field Staff
- CAP Certification to Spotlight Project Teams Understanding of Construction Administration Roles and Responsibilities



Construction Administration Proficiency (CAP)





INSPECTION SERVICES UNIT
Office of Statewide Hospital Planning & Development



HCAI Field TIP OF THE DAY

Subject: CAP Exam Result

Authored By: Monica Colosi
HCAI ISU CO

Construction Matters:

The OSHPD voluntary Construction Administration Proficiency (CAP) exams were held on July 23rd in Los Angeles, and on July 24th in Sacramento. HCAI and the Inspection Services Unit (ISU) would like to congratulate the candidates that passed the exam.



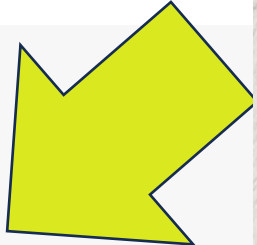
< Building Safety

Voluntary Construction Administration Proficiency (CAP) Certified List and Updates

LIST OF SUCCESSFUL EXAM CANDIDATES

TABLE OF CONTENTS

- 1. [Update](#)
 - A. [2024 List of Successful Exam Candidates](#)
 - B. [2025 List of Successful Exam Candidates](#)



The Big Idea:

The candidates that passed the voluntary CAP exam received their Certification, and their names are listed on the [HCAI website](#). ISU will continue the CAP training Part 1 webinar in November, Part 2 webinar in December, and the voluntary CAP exam in January. Stay tuned for the Tip of the Day with registration for Part 1 and Part 2 webinars.

Construction Administration Proficiency (CAP)

2025 LIST OF SUCCESSFUL EXAM CANDIDATES

- Rosa Alvarado
- Jose Barajas
- Daniel Bise
- Timothy Casey
- Brian Chaparro
- Cyle Coles
- Myron Curlee
- Joseph De Luca
- Suchithra Dhanaveerapandian
- Amanda Donecho
- Gary Dunger
- Eric Dunlavey
- Jessica Edwardson

- Tachen Lee
- Wayne Lee
- Barrett Lipomi
- Carol Liu
- Sara McKey
- Michael Miller
- Sujendra Mishra
- Michael Moores
- Alejandra Nadal
- Jorge Navarro
- Kelsey Navarro
- Michael Nelson
- Anh Nguyen

- Ron Evans
- David Flanagan
- Victor Fong
- Mark Froemsdorf
- Bryant Fulton
- Deborah Georges
- Melissa Gorman
- Andrzej Gwizdala
- Brian Holck
- Nehal Jain
- Theodore Kirton
- Tae Yun Ku
- Michelle Lang

52

- Leo Oh
- Bryan Rayburn
- Mandi Rice
- Craig Sapp
- Arlie Schrantz
- Robert Schulze
- Laudan Siahpolo
- Nikhil Singhanian
- Lee Sun
- Charles Thrash
- Heriberto Torres
- David Vanderhook
- David Villela

eTIO BENEFITS



EFFICIENCY

Quicker approvals and signoffs
Streamlines processing
for testing and inspections
Reduces processing time



QUALITY

Real-time updates
for all stakeholders
Ensures accuracy and
transparency
Provides better access
to tests and inspections



TRANSPARENCY

Centralized document
repository
Supports quality assurance
Promotes responsible
knowledge acquisition



COLLABORATION

Access, contribute and
edit online documents
Facilitates collaboration
among stakeholders
Improves construction
sequencing

Next Step: Project Level Beta Testing



Discussion / Questions

isu@hcai.ca.gov



Structural Services Unit Program

Roy Lobo, Principal Structural Engineer

Ali Sumer, Supervisor Seismic Compliance Unit



SPC Compliance



ASCE Changes



OSHPPD WEBINARS



Seismic Grants



NPC Compliance



Water Rationing

2025 OSHPD WEBINARS

- February 20, 2025 - Seismic Grant: Small and Rural Hospital Relief Program
- March 4, 2025 - Seismic Compliance Plan and Delays Beyond 2030 Deadline
- March 18, 2025 - NPC Compliance
- March 27, 2025 - Water Rationing Plan
- April 2, 2025 - SPC Compliance
- April 9, 2025 - 2025 CBC Changes to HCAI Preapprovals

2025 OSHPD WEBINARS

Seismic Compliance Webinar Series For Compliance Beyond 2030

2025 OSHPD WEBINARS

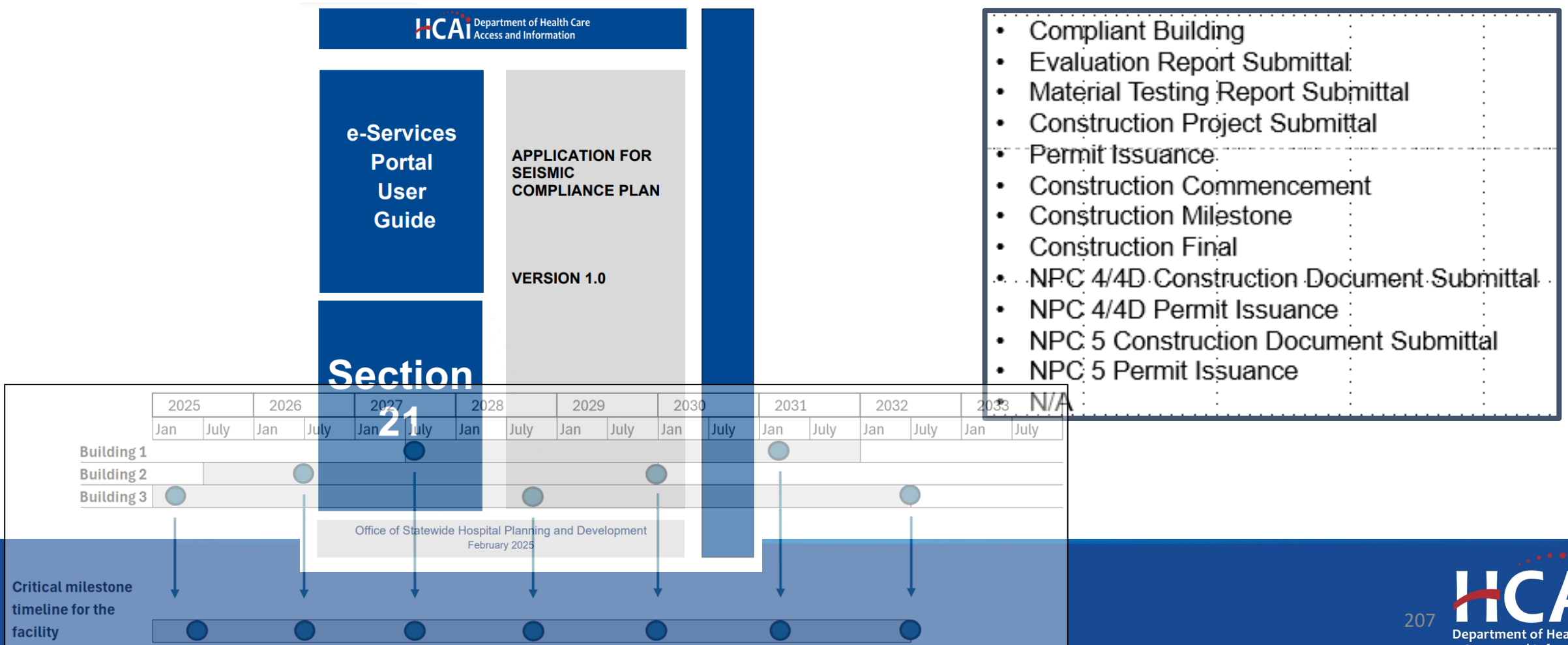
- **February 20, 2025** - **Seismic Grant: Small and Rural Hospital Relief Program**



- “The mission of the Small and Rural Hospital Relief Program (SRHRP) is to support and enhance the effort of small, rural and Critical Access hospitals to preserve access to general acute care for the communities they serve through provision of state grant funding and technical assistance to advance building seismic safety and resiliency. “

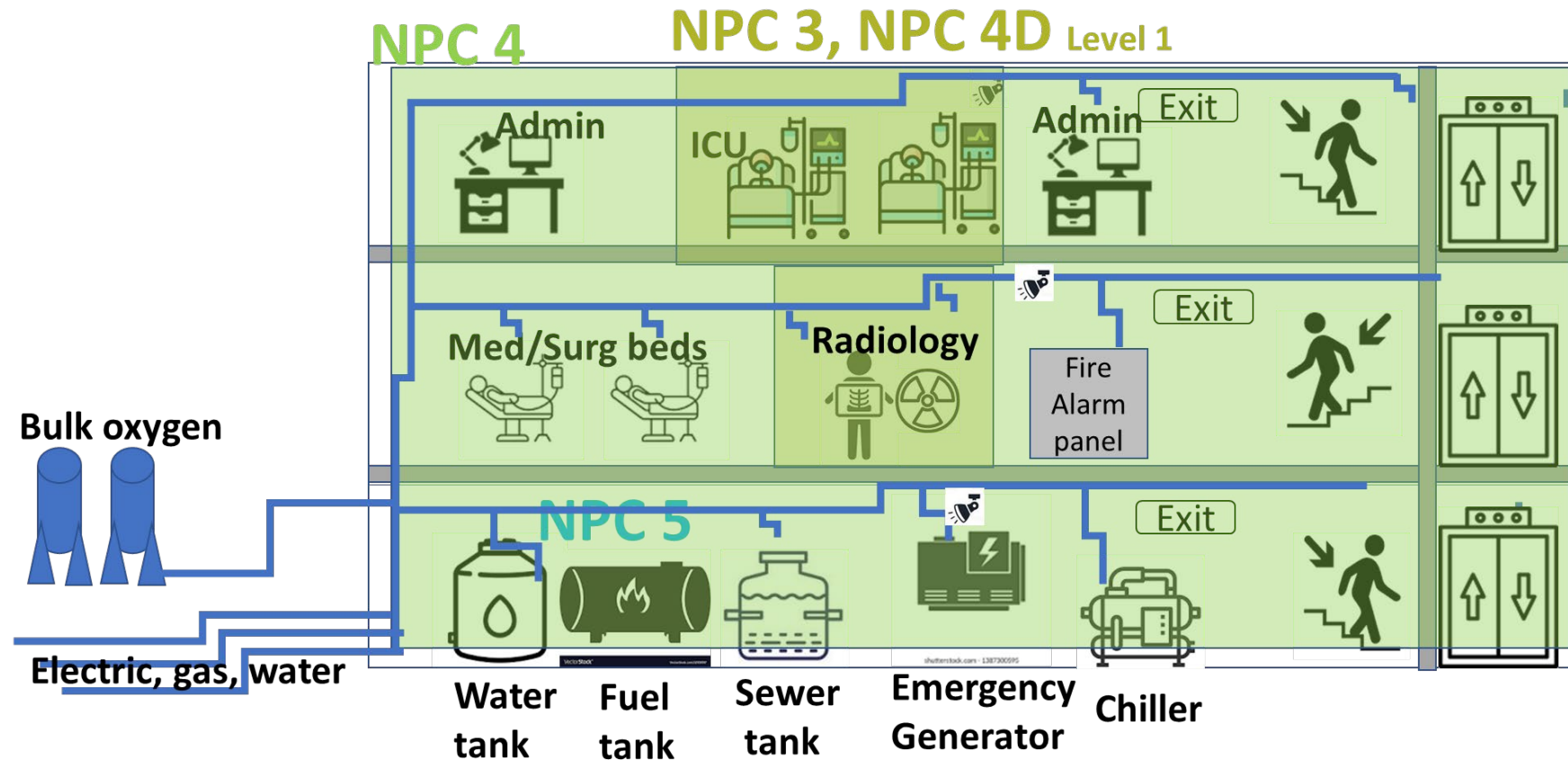
2025 OSHPD WEBINARS

- **March 4, 2025** - **Seismic Compliance Plan and Delays Beyond 2030 Deadline**



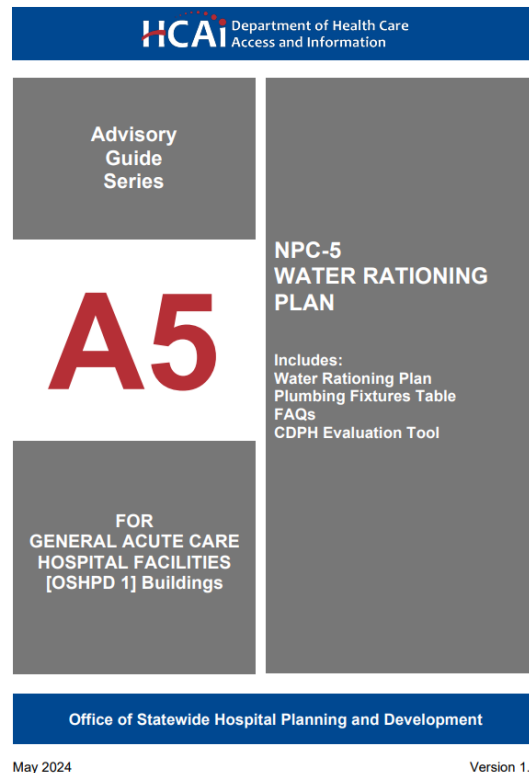
2025 OSHPD WEBINARS

- March 18, 2025 - NPC Compliance

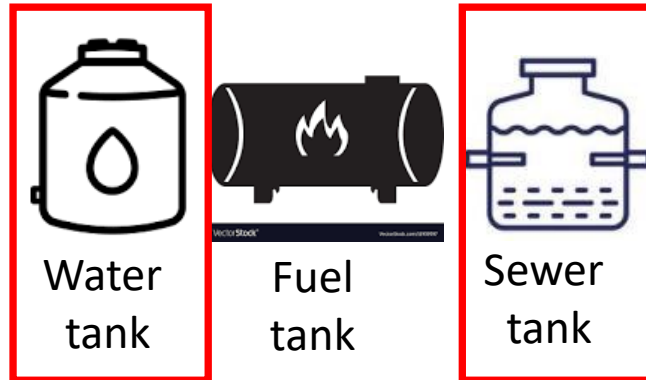


2025 OSHPD WEBINARS

- March 27, 2025 - [Water Rationing Plan](#)

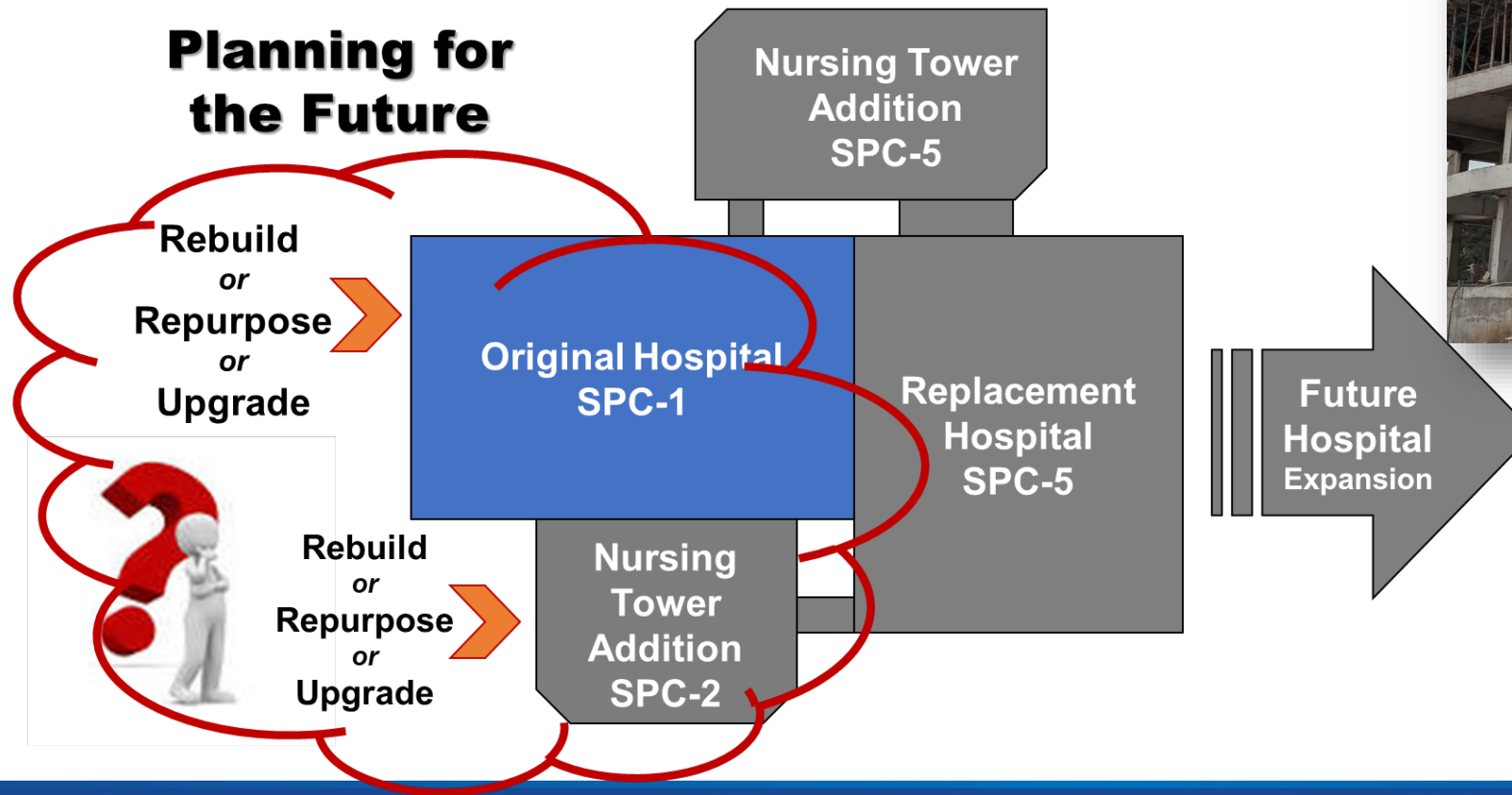


NPC 5 Requirements



2025 OSHPD WEBINARS

- April 2, 2025 - SPC Compliance



Annual Reporting* of Services Provided in Each Hospital Building on the Hospital Campus (AB 1882, Stats 2022)

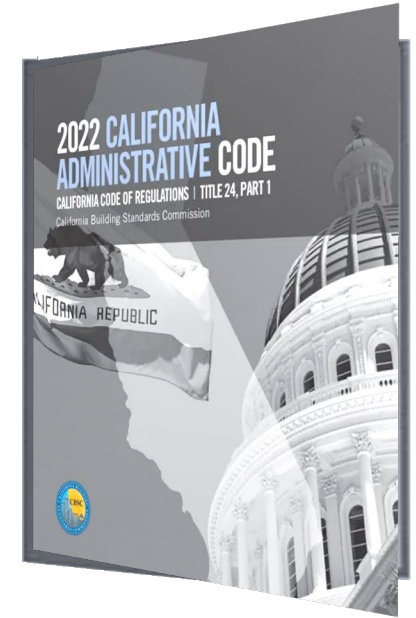
- 2024 Reporting Deadline 1/1/2025
- Hospital services reporting applications received
 - 1/1/2025 **127 facilities missing (274 facilities applied)**
 - 1/2/2025 **letters** sent to facilities who did not submit, giving them additional 15 days. Portal closed on January 16th.
 - 1/16/2025 **83 facilities missing (44 facilities applied)**
 - 4/1/2025 2nd Chance Given, April 1st, 2025 - Sent **letters** to 76 facilities
 - 4/15/2025 **70 facilities missing (13 facilities applied)**
 - **Called** 63 facilities one-by-one on mid April.
 - 4/29/2025 **45 facilities missing (25 facilities applied)**
 - The portal closed on May 1st.



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NPC Seismic Compliance Timeframe

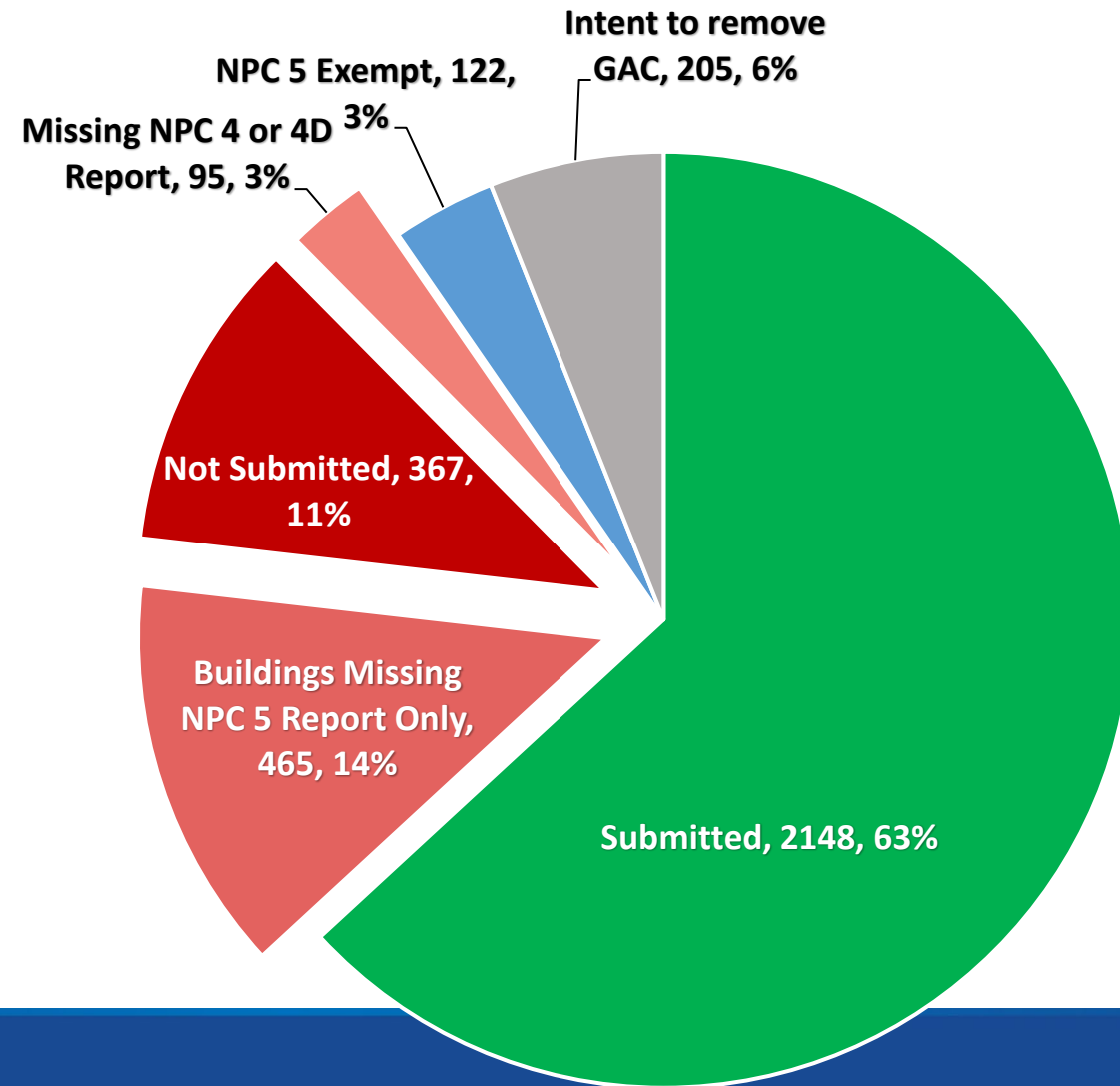
- For any General Acute Care Hospital in use as a GAC hospital building after January 1, 2030:
 - **By January 1, 2024**, submit to the Office a complete nonstructural evaluation for each building.
 - **By March 1, 2026**, submit to the Office construction documents ready for review by the Office.
 - **By March 1, 2028**, obtain a building permit to begin construction.
 - **By January 1, 2030**, the GAC building shall achieve NPC-5 rating



NPC Seismic Compliance Required Submittals

Non-Structural Performance (NPC) evaluations

- 3402 Hospital **Buildings** (407 Facilities) required to submit evaluations





Search ...

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Loan Repayments, Scholarships & Grants

Health Workforce

Building Safety & Finance

- Building & Construction Projects
- eServices Portal (eSP)
- Forms, Training, and Resources
- Facility Detail
- Preapproval Programs
- Codes and Regulations
- Seismic Compliance and Safety
- Hospital Inspection Services



of Health Care Access and Infor

ewide Health Planning and Development. HCAI is committed t



Search ...



Building Safety & Finance

Loan Repayments, Scholarships & Grants

Health Workforce

Data & Reports

Facility Finder

[← Back to Building Safety and Finance](#)

Facility Detail

Click on the **Facility List Drop-down** below and scroll to find and select a facility. Or click the drop-down and begin typing a facility name or number to filter the list. Data is updated every 2 weeks.

New: AB 2190 Quarterly Reports are now available.

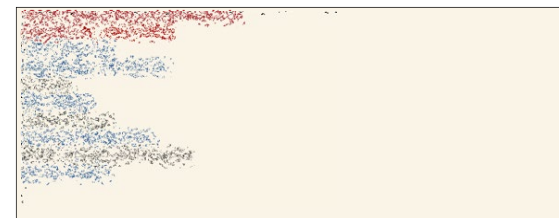
For accessible copies of facility site plans [email Seismic Compliance Unit](#).

Facility Info | Building List/Seismic Info | **Building Services** | Instrumented Buildings | AB2190 Report | Unauthorized Construction | Building Operational Plan

Show facilities:

- ☒ (All)
- ☐ Do not have AB 2190 Extensions
- ☐ Have AB 2190 Extensions

Facility List Drop-down

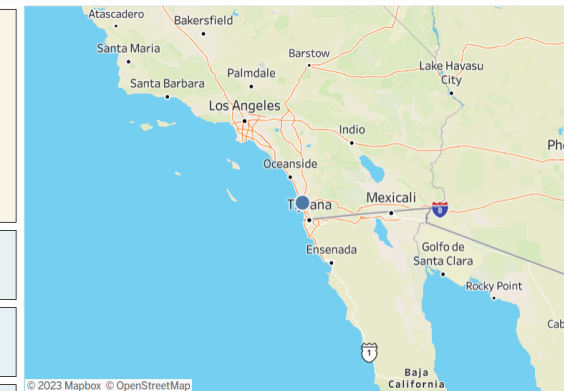


Plan Review Supervisor:
Diana Navarro (213) 620-6506
Diana.Navarro@hcai.ca.gov

Regional Compliance Officer:
Michael Marrs (916) 284-2672
Michael.Marrs@hcai.ca.gov

Compliance Officer:
Thomas Shanks (818) 470-6934
Thomas.Shanks@hcai.ca.gov

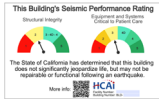
District Structural Engineer Name:



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*Click on the dot to view in Google Maps.

NPC Reporting Compliance Status – HCAI Web Page


Seismic Performance Rating Signage

| Bldg Num | Bldg Name | Classification & Status | RACs Date | NPC Status | Building Code | Year Built | Stories | Height in Feet | Instrumented | Construction Type | Sprinklered | AB1882 Signage | |
|---------------------------|--|-------------------------|-----------|--|-------------------------------------|------------|---------|----------------|--------------|-------------------|-------------|----------------|---|
| BLD-01918 | Original Hospital Building / Additions | OSHPD 1, In Service | 1/1/2030 | 1/1/2030 * NPC 4/4D Rpt: Submitted 12/26/2023 NPC 5 Rpt: Submitted 12/30/2023 | 1943 Uniform Building Code (UBC) | 1947 | 1 | 15 | No | | | Pending | SPC: 2 NPC: 2 This building does not significantly jeopardize life, but may not be repairable or functional following an earthquake |
| BLD-01919 | Building Block No. 2 | OSHPD 1, In Service | 1/1/2030 | 1/1/2030 * NPC 4/4D Rpt: Submitted 12/26/2023 NPC 5 Rpt: Submitted 12/30/2023 | 1946 Uniform Building Code (UBC) | 1947 | 1 | 15 | No | | | Pending | SPC: 2 NPC: 2 This building does not significantly jeopardize life, but may not be repairable or functional following an earthquake |
| BLD-01920 | 1976 Alterations & Additions | OSHPD 1, In Service | | 1/1/2030 * NPC 4/4D Rpt: Submitted 12/26/2023 NPC 5 Rpt: Submitted 12/30/2023 | 1973 California Building Code (CBC) | 1979 | 2 | Unknown | No | | | Compliant | SPC: 4 NPC: 2 |
| BLD-01921 | Two Story Addition West | OSHPD 1, In Service | | 1/1/2030 * NPC 4/4D Rpt: Submitted 12/26/2023 NPC 5 Rpt: Submitted 12/30/2023 | 1985 California Building Code (CBC) | 1996 | 2 | Unknown | No | | | Pending | SPC: 4 NPC: 2 |

Back to Main

Applicable Year
2023

Hospital

| Bldg Num | Bldg Name | Applicable Year | Nursing Med Surg | Surgical | Anesthesia PACU | Clinical Lab | Imaging Radiological Diagnostic Imagin | Pharmacy | Dietetic | Administrative | Sterile Processing | General Storage | Morgue | Employee Dressing | Housekeeping EVS | Laundry Linen | Special Procedures | ICU CCU PICU | Burn Unit | Neonatal Intensive Care Unit | Pediatric Adolescent Nursing Unit | Psychiatric Nursing | Obstetrics Perinatal Unit | Emergency | Nuclear Medicine | Rehabilitation Therapy | Physical Rehabilitation Nursing Unit | Renal Dialysis | Respiratory | Intermediate Care | Outpatient Services | Skilled Nursing Unit | Central Plant Utility Bldg | Canopies Corridor Buildings Tunnels | Non GAC Uses |
|----------|-----------|-----------------|------------------|----------|-----------------|--------------|--|----------|----------|----------------|--------------------|-----------------|--------|-------------------|------------------|---------------|--------------------|--------------|-----------|------------------------------|-----------------------------------|---------------------|---------------------------|-----------|------------------|------------------------|--------------------------------------|----------------|-------------|-------------------|---------------------|----------------------|----------------------------|-------------------------------------|--------------|
|----------|-----------|-----------------|------------------|----------|-----------------|--------------|--|----------|----------|----------------|--------------------|-----------------|--------|-------------------|------------------|---------------|--------------------|--------------|-----------|------------------------------|-----------------------------------|---------------------|---------------------------|-----------|------------------|------------------------|--------------------------------------|----------------|-------------|-------------------|---------------------|----------------------|----------------------------|-------------------------------------|--------------|

Applicable Year

2023

Null

2023

2024

N/A

Applicable Year

2023

Null

2023

2024

N/A

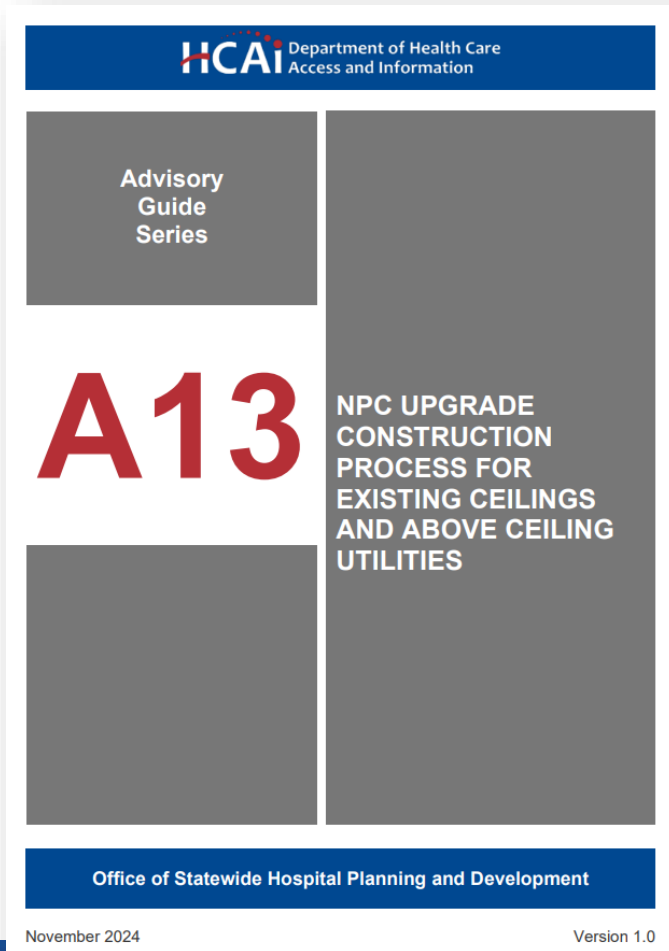
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SPC = Structural Performance Category
NPC = Nonstructural Performance Category
SPC and NPC are applicable to Hospital Buildings only
3s, 4s and 5s indicate SPC/NPC rating self-reported by the hospital and not verified by OSHPD

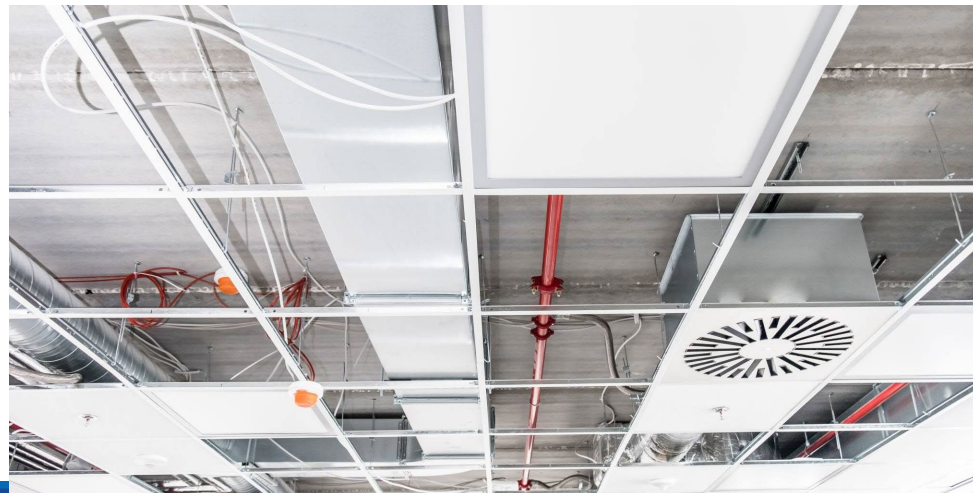
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| BLD-01136 | Emergency Radiology | 2023 | | | | X | X | | X | | | | | | | | | | | | | | | X | X | | | | | | | | | | This building does not significantly jeopardize life, but may not be repairable or functional following an earthqu... |
|-----------|---------------------|------|--|--|--|---|---|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|--|--|--|--|--|--|--|--|--|---|

NPC Upgrade Construction Process For Existing Ceilings And Above Ceiling Utilities



- For Non-Conforming buildings
 - Information regarding the layout and bracing conditions of utilities above ceilings is limited or incorrect
 - Surveying these utilities disrupts hospital operations
 - A 13 is to minimize disruption and expedite NPC upgrade construction for components at or above ceilings.

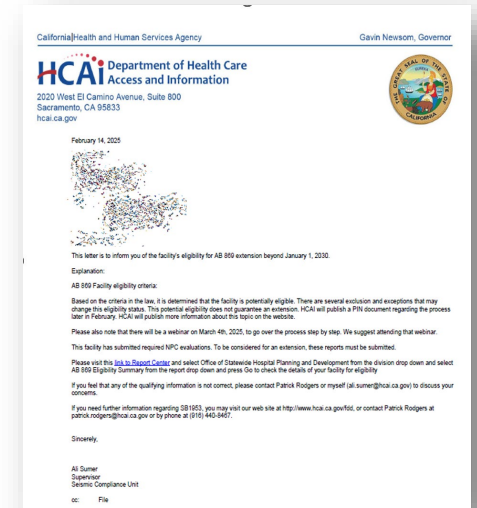


Seismic Compliance - AB 869 Chapter 801, Stats 2024

- Authorizes up to 3-year delay of the 2030 seismic compliance deadline
 - Distressed Hospital Loan Program Recipient, a small hospital, a rural hospital, a critical access hospital or a health care district hospital.
- Required:
 - **NPC-5 evaluation report** no later than January 1, 2025, for each noncompliant building.
 - **Seismic compliance plan** no later than to achieve compliance at the earliest reasonable date, but no later than 1/1/33.
 - **Milestones** determining whether the hospital is making adequate progress toward the compliance deadline.
- HCAI has the **discretion for additional 2-years** delay in compliance (1/1/2035)
 - Eligible hospitals that continue to experience financial distress or for circumstances beyond their control.
- Missing a milestone or the deadline = fines and delay issuing permits for non-seismic related construction.

HCAI's Efforts to Implement AB 869

- Letters to potential eligible facilities for awareness
 - 130± facilities
- Conducted Seminars and Outreach
 - Continued to prepare our stakeholders for success
- Meeting with individual facilities to prepare for success
- HCAI PIN 80 published March 4, 2025, outlining implementation
- Code changes in 2025 California Administrative Code
 - Reviewed during the December Hospital Building Safety Board meeting.
 - Effective March 29, 2025



HCAI Report Center

Office of Statewide Hospital ▾

AB 869 Eligibility Summary ▾

Go

Display AB 869 Eligibility Summary

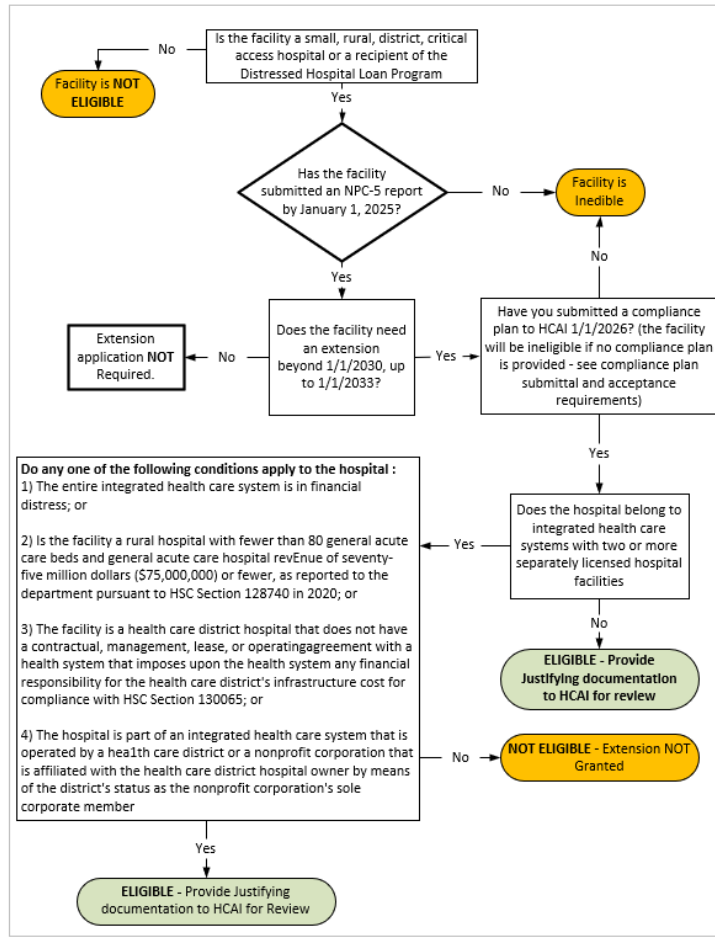
Select Facility(s) 10006 - Orchard Hospital, 10009 - ▾

Select One From Below: All ▾

⏪ ⏴ 1 of 1 ⏵ ⏩ ↺ ⏴ 100% ▾ 📄 🖨

Find | Next

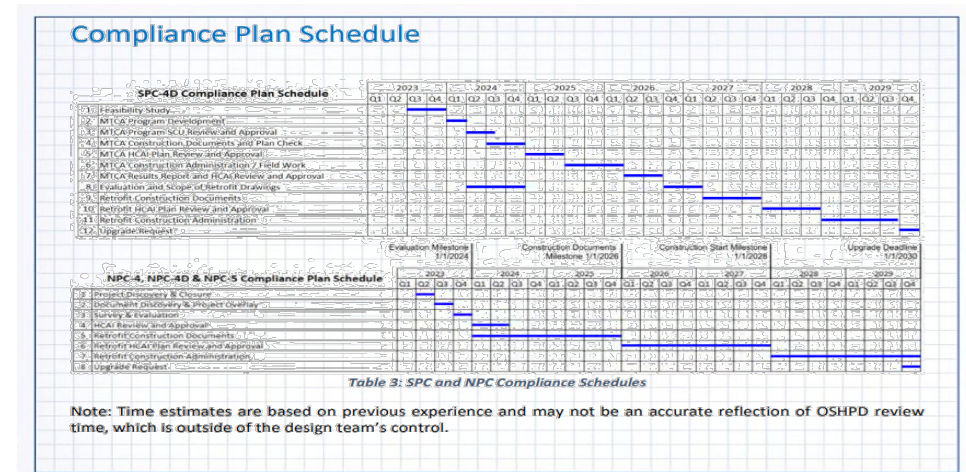
| AB 869 Eligibility Summary | | | | | | | | | |
|---|----------------|---------------------|--------------------------------|-----------------|----------------|------|----------------|---------------|----------|
| HSC - Health & Safety Code MSSA - Medical Service Study Areas DHLP - Distressed Hospital Loan Program | | | | | | | | | |
| Facility | County Code | MSSA Rural Frontier | Rural 80 Beds under 75 Million | Beds 50 or Less | HSC 1250 Rural | DHLP | Compliant 2030 | NPC Submittal | District |
| 10006 - Orchard Hospital | 04 - Butte | Yes | Yes | Small | Yes | | | Not Submitted | |
| 10009 - Enloe Medical Center - Cohasset | 04 - Butte | | | Small | | | | Not Submitted | |
| 10019 - Oroville Hospital | 04 - Butte | Yes | | | | | | Submitted | |
| 10029 - Mark Twain Medical Center | 05 - Calaveras | Yes | Yes | Small | Yes | | | Submitted | District |
| 10032 - Colusa Medical Center | 06 - Colusa | Yes | Yes | Small | Yes | | | Not Submitted | |
| 10109 - Barton Memorial Hospital | 09 - El Dorado | Yes | | | Yes | | | Submitted | |
| 10112 - Marshall Medical Center | 09 - El Dorado | Yes | | | Yes | | | Submitted | |
| 10122 - Coalinga Regional Medical Center | 10 - Fresno | Yes | | Small | Yes | | | Not Submitted | |
| 10160 - Adventist Health Selma | 10 - Fresno | Yes | | | Yes | | | Submitted | |
| 10162 - Adventist Health Reedley | 10 - Fresno | Yes | | Small | Yes | | | Submitted | District |



Seismic Compliance Plan

- Deadline to submit – 1/1/2026
- Automated portal is open.
- Letter sent to all
 - ~400 facilities to submit compliance plans.
- OSHPD is hosting multitude of meetings.
- 4 facilities already submitted

No AB869 extension applications received.
– OSHPD is meeting w/ a No of Facilities.



Seismic Compliance Plan

- First submittals were due 2001.
- The required info is still the same, just different submittal process.
- 2001 → paper submittal → pdf submittal
- The required info is still the same, just different submittal process.

1.4.4.4 Compliance plan schedule. Provide a bar graph schedule which describes the schedule for compliance with the SPC and NPC seismic performance categories, indicating the schedule of the following major phases of the plan:

1. Obtain a geotechnical report (if necessary);
2. Architecture and engineering design/construction document preparation;
3. Local approvals;
4. Office review, approval and permitting;

| BUILDING NAME/ DESIGNATION | BUILDING TYPE (per Section 2.2.3) | SPC existing | SPC planned | NPC existing | NPC planned |
|----------------------------|-----------------------------------|--------------|-------------|--------------|-------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

5. Approval of Department of Health Services Licensing and Certification, and any other required licensing;
6. Permanent relocation of acute care services to other buildings or facilities (identify services affected);
7. Temporary/interim relocation of acute care services to other buildings including the duration of the approved program flexibility plan pursuant to Health and Safety Code Section 1276.05;
8. Construction period; and
9. Post-Fire Assessment

2030 Building Matrix

| Bldg Num | Bldg Name | SPC | NPC | Code | Permit | Bldg Type | Stories |
|-----------|---|-----|-------|----------|----------|--|---------|
| BLD-00513 | Main Hospital Building | 4D | 4D, 5 | 1961 UBC | UNKNOWN | 01 - Wood, Light Frame | 1 |
| BLD-00514 | Mechanical Building | 4D | 4D, 5 | 1961 UBC | UNKNOWN | 01 - Wood, Light Frame | 1 |
| BLD-00515 | Rec. Room & Office Addition | 4D | 4D, 5 | 1967 UBC | UNKNOWN | 01 - Wood, Light Frame | 1 |
| BLD-05681 | Generator Shed | 4D | 4D, 5 | 1961 UBC | UNKNOWN | 23 - Inverted pendulum - Steel Moment Resisting Frame | 1 |
| BLD-00516 | Lab & Storage Addition | 4 | 4D, 5 | 1979 UBC | H1151 | 01 - Wood, Light Frame | 1 |
| BLD-00517 | Canopy Addition | 4 | 4, 5 | 1979 UBC | SS880101 | 08 - Concrete Moment Resisting Frame | 1 |
| BLD-00518 | Birthing Center | 5 | 4, 5 | 1995 CBC | HS971863 | 04 - Steel Braced Frame | 1 |
| BLD-02949 | LDR Addition | 5 | 4, 5 | 2007 CBC | HS071499 | 03 - Steel Moment Resisting Frame | 1 |
| BLD-05522 | ER / Radiology / Clinic Addition | 5 | 4, 5 | 2001 CBC | HS031721 | 03 - Steel Moment Resisting Frame | 1 |
| BLD-06036 | Lobby Remodel & Addition | 5 | 4, 5 | 2001 CBC | HS031721 | 03 - Steel Moment Resisting Frame | 1 |
| BLD-06037 | Corridor Addition | 5 | 4, 5 | 2001 CBC | HS031721 | 03 - Steel Moment Resisting Frame | 1 |
| BLD-06038 | Mechanical & Electrical Building Addition | 5 | 4, 5 | 2001 CBC | HS031721 | 14 - Reinforced Masonry Bearing Walls-Concrete Diaphragm | 1 |
| BLD-06039 | Main Entrance Canopy Addition | 5 | 4, 5 | 2001 CBC | HS031721 | 03 - Steel Moment Resisting Frame | 1 |
| BLD-06040 | ER Canopy Addition | 5 | 4, 5 | 2001 CBC | HS031721 | 03 - Steel Moment Resisting Frame | 1 |

Table 2: 2030 Building Construction Matrix

Compliance Plan Schedule

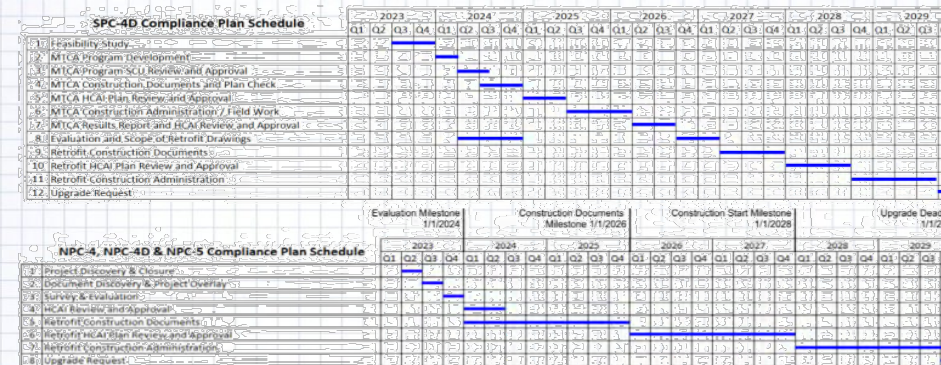


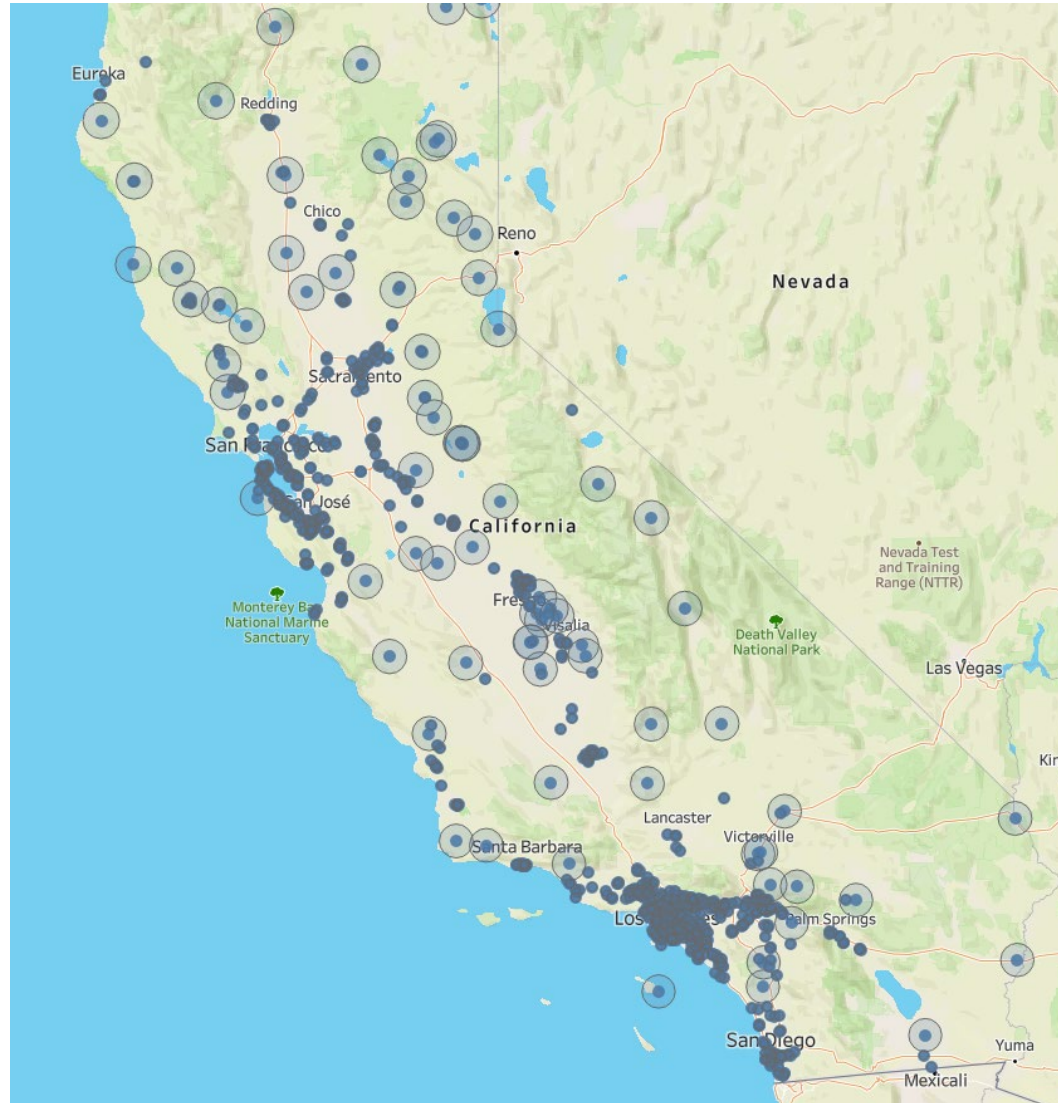
Table 3: SPC and NPC Compliance Schedules

Note: Time estimates are based on previous experience and may not be an accurate reflection of OSHPD review time, which is outside of the design team's control.

Seismic Compliance Plan

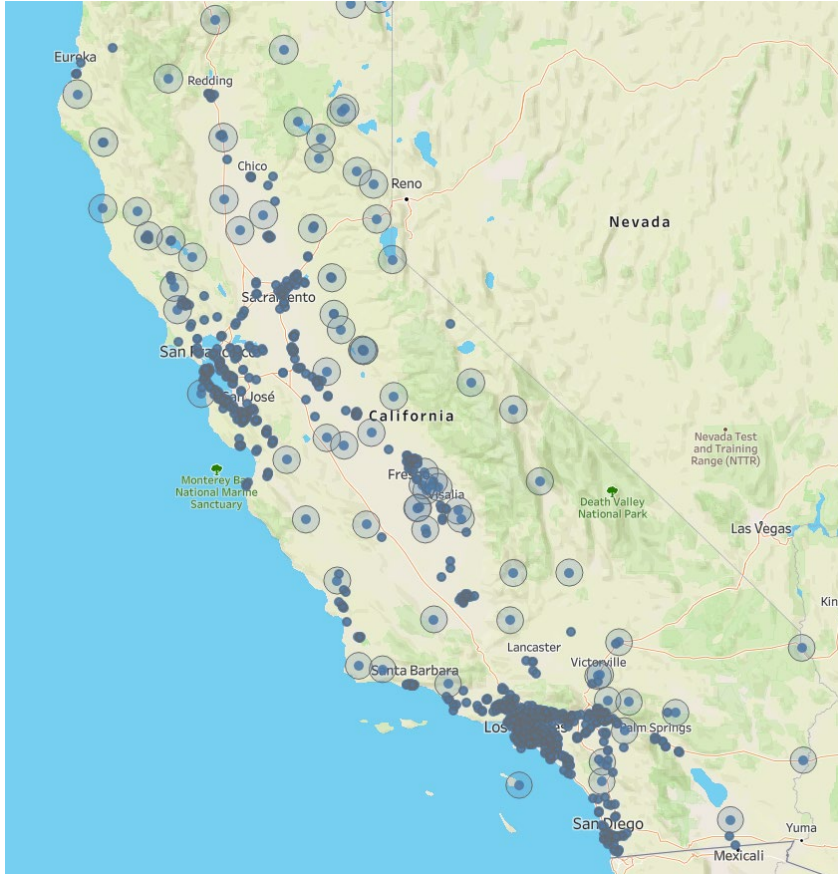
- Seismic Compliance Plan Application (new interface, old requirement)
 - Two brief tables that identifies seismic scope and schedule to achieve compliance
 - Required for ALL hospitals, deadline to submit 1/1/2026.
 - See March 4th 2025 webinar for step-by-step application process.

Small and Rural Hospital Relief Program



- \$4-\$6 million totaling grants are being prepared

Small and Rural Hospital Relief Program



| Facility | Award amount | Status |
|---------------------------------|--------------------|---------|
| George L Mee Memorial Hospital | \$280,000 | awarded |
| Kern Valley Healthcare District | \$180,000 | awarded |
| Mad River Community Hospital | \$625,000 | awarded |
| Oak Valley Hospital District | \$65,000 | awarded |
| Plumas District Hospital | \$25,000 | awarded |
| Mountains community hospital | \$325,000 | awarded |
| Mad River Community Hospital | \$220,000 | awarded |
| Plumas District Hospital | \$2,800,000 | awarded |
| George L Mee Memorial Hospital | \$500,000 | awarded |
| Total | \$5,020,000 | |

| Facility | Award amount | Status |
|---|--------------|------------|
| Hazel Hawkins memorial hospital | ~\$200,000 | In process |
| Marshall Medical center | ~\$650,000 | In process |
| Bear Valley Community Health District | TBD | In process |
| Community Memorial Hospital - Ojai | TBD | In process |
| Mad River Community Hospital | TBD | In process |
| Adventist Reedley (Sierra Kings District) | TBD | In process |
| Mammoth Hospital | ~\$50,000 | In process |

2025 OSHPD WEBINARS

2025 CBC Changes to OSHPD Preapprovals

2025 OSHPD WEBINARS

• April 9, 2025

- Application of ASCE 7-22 Updates to OSHPD Preapprovals

$$F_p = 0.4S_{DS}I_pW_p \left[\frac{H_f}{R_\mu} \right] \left[\frac{C_{AR}}{R_{po}} \right]$$

$$R_\mu = [1.1R(I_e\Omega_0)]^{1/2} \geq 1.3 \quad (13.3-6)$$

R_μ = Structure **ductility** reduction factor, based upon the SFRS

R = Response modification coefficient, **SFRS** in Table 12.2-1, 15.4-1, or 15.4-2

I_e = Importance Factor

Ω_0 = Overstrength factor as defined in Table 12.2-1, 15.4-1, or 15.4-2



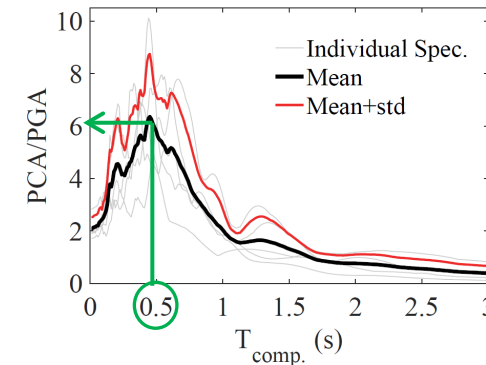
Concrete Shear wall



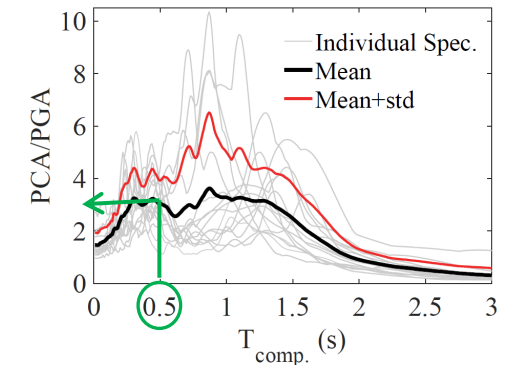
Moment Frame



Steel Braced Frame



(a) normalized roof spectra for relatively stiff five-to-seven story buildings (a sample size of seven)



(b) normalized roof spectra for relatively flexible five-to-seven story buildings (a sample size of 24)

Effect of building stiffness on PCA/PGA from instrumental recording.

Source: NIST GCR 18-917-43

OSHDP Preapprovals

Preapproval Programs

HCAI Office of Statewide Hospital Planning and Development (OSHDP) has five distinct preapproval programs that operate under the Structural Support Unit (SSU) and Inspection Services Unit (ISU).

OSHDP Preapproved Agency (OPAA)

Preapproval of Agencies that provide Structural Tests and Special Inspection services used in California healthcare facility construction.

[LEARN MORE](#)[VIEW PIN 58](#)

OSHDP Preapproved Details (OPD)

Preapproved standard architectural and engineering details developed by HCAI/OSHDP for use in California healthcare facility construction.

[LEARN MORE](#)[VIEW PIN 51](#)

OSHDP Preapproval of Manufacturer's Certification (OPM)

Preapproval of seismic design of supports and attachments for nonstructural components used in California healthcare facility construction.

[LEARN MORE](#)[VIEW PIN 62](#)

OSHDP Special Seismic Certification Preapproval (OSP)

Preapproval of special seismic certification of non-structural components used in California healthcare facility construction.

[LEARN MORE](#)[VIEW PIN 55](#)

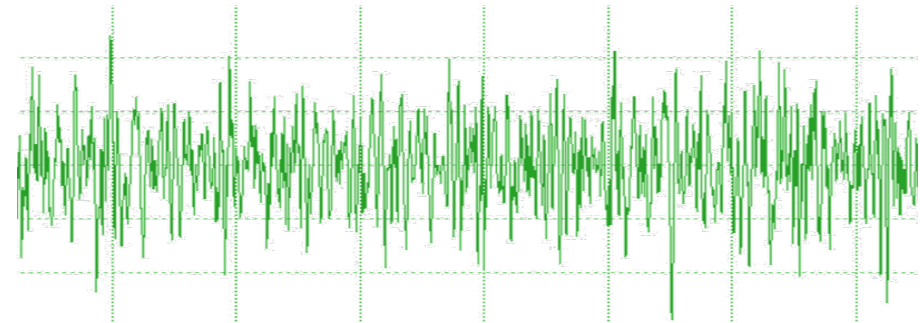
OSHDP Preapproved Prefabricated Components and Systems (PCS)

Preapproval of prefabricated components and systems used in California healthcare facility construction.

[LEARN MORE](#)

OSP – Special Seismic Certification Preapproval

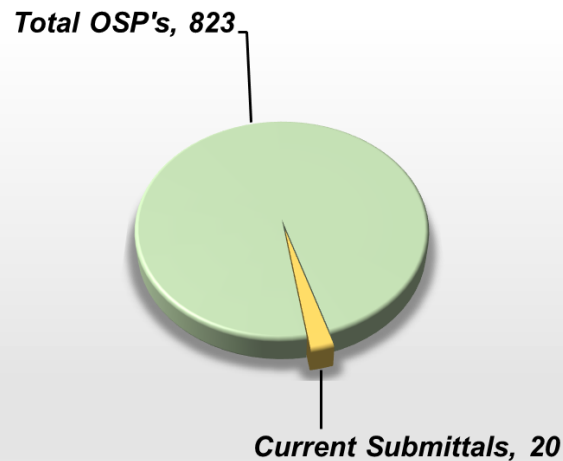
Preapproved
Mechanical/Electrical Equipment
by Shake Table Testing



OSP Status

- Zero backlog
- Reduced review periods
- MS TEAM meetings with Manufacturers to minimize number of tests

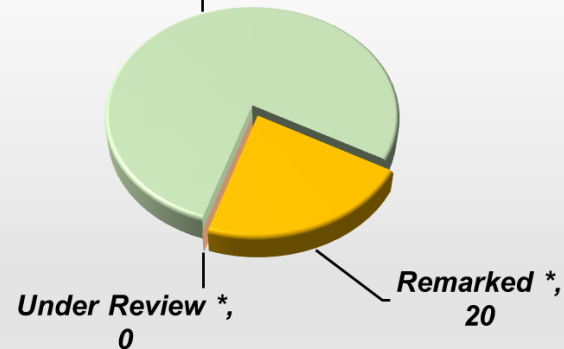
Current OSP Status*



*As of end of last biannual period.

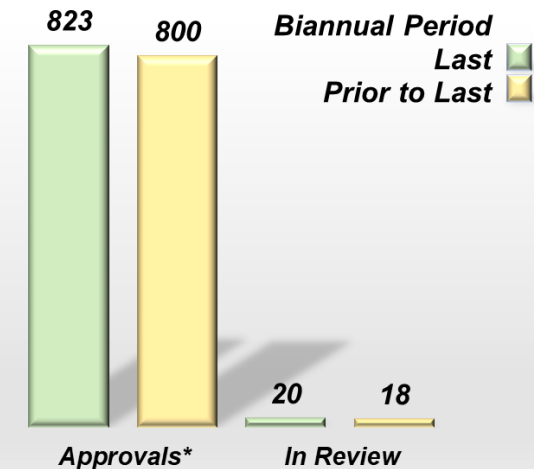
Current OSP Submittal Status

Total Approvals Over Last Period, 71



*As of end of last biannual period.

OSP Status per Biannual Period



*Most OSP submittals are renewals, resulting in only a slight increase in the cumulative total.

OPM – Manufacturer's Certification Preapproval

Preapproved
Nonstructural Component
Supports and Attachments

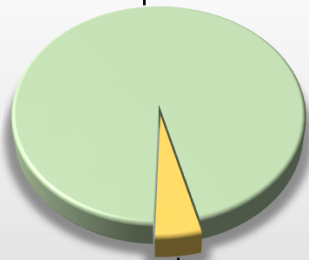


OPM Status

- Expanding to supports and attachments of systems
- Expanded use of cyclic tests - FM 1950, ASHRAE 171, FEMA 461, and OSHPD hybrid test
- OPM submittals for vibration isolators

Current OPM Status*

Total OPM's, 652

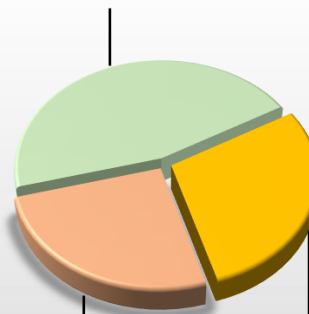


Current Submittals, 32

**As of end of last biannual period.*

Current OPM Submittal Status

Total Approvals Over Last Period, 27

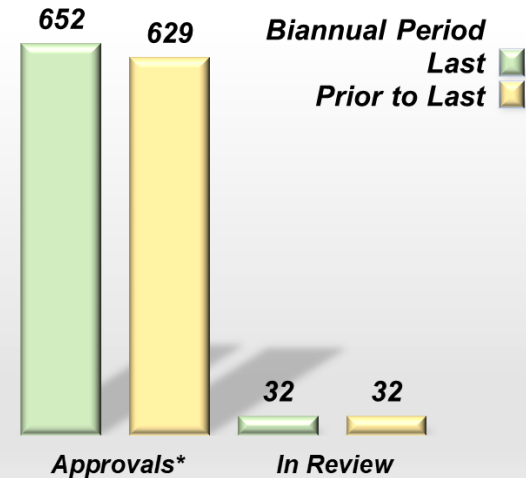


Under Review *,
15

Remarked *,
17

**As of end of last biannual period.*

OPM Status per Biannual Period



**Most OPM submittals are renewals, resulting in only a slight increase in the cumulative total.*

OPAA – Preapproval Agency

Preapproved Agencies
Providing Test and
Special Inspection Services

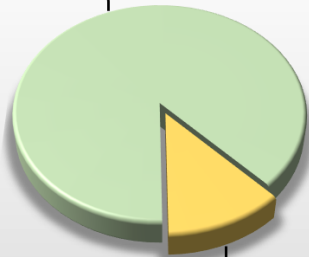


OPAA Status

- Zero backlog
- 60% increased in Preapproved Agency listings
- Listed OPAA certified personnel continually updated

Current OPAA Status*

Total OPAA's, 95

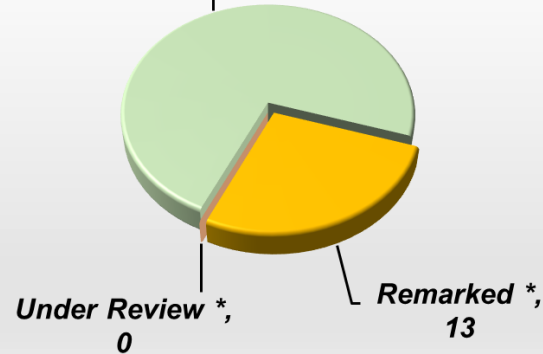


Current Submittals, 13

**As of end of last biannual period.*

Current OPAA Submittal Status

Total Approvals Over Last Period, 35

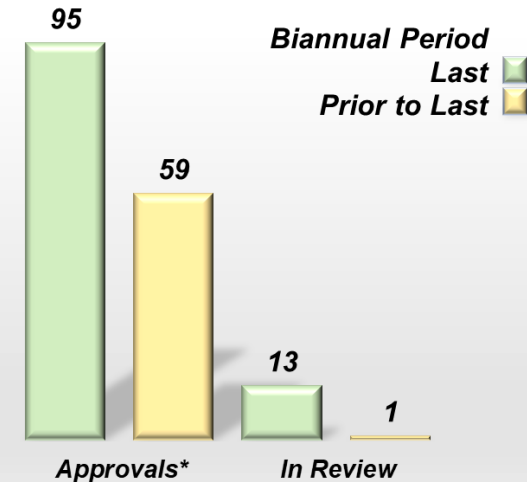


Under Review *,
0

Remarked *,
13

**As of end of last biannual period.*

OPAA Status per Biannual Period



**Most OPAA submittals are renewals, resulting in only a slight increase in the cumulative total.*



2025 CBC Changes to OSHPPD Preapprovals



Adaptation of the ASCE 7-22 Nonstructural Components to the Preapproval Programs



Affected HCAI Preapproval Programs:

- OPD-0001 Standard Partition Wall Details*
- OPD-0002 Standard Suspended Ceiling Details*
- OPD-0003 Standard Gypsum Board Ceiling Details*
- OPM – OSHPD Preapproval of Manufacturer's Certification**
- OSP – OSHPD Special Seismic Certification Preapproval**

*Updates to inhouse OPDs are currently underway.



DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION
FACILITIES DEVELOPMENT DIVISION

| | |
|---|--|
| APPLICATION FOR HCAI PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM) | OFFICE USE ONLY |
| | APPLICATION #: OPM-0669 |
| | HCAI Preapproval of Manufacturer's Certification (OPM) |



OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
FACILITIES DEVELOPMENT DIVISION

| | |
|--|---|
| APPLICATION FOR OSHPD SPECIAL SEISMIC CERTIFICATION PREAPPROVAL (OSP) | OFFICE USE ONLY |
| | APPLICATION #: OSP-0699 |
| | OSHPD Special Seismic Certification Preapproval (OSP) |

Changes to the OPM & OSP Preapproval Programs

OVERVIEW



New ASCE 7-22 Seismic Design Force Equation, F_p :

$$F_p = 0.4S_{DS}I_pW_p \left[\frac{H_f}{R_\mu} \right] \left[\frac{C_{AR}}{R_{po}} \right] \quad (13.3-1)$$

- New **force amplification** factor, as a function of height (H_f),
- New **structure ductility reduction** factor (R_μ),
- Changes to **component resonance and strength** factors: $a_p / R_p \rightarrow C_{AR} / R_{PO}$

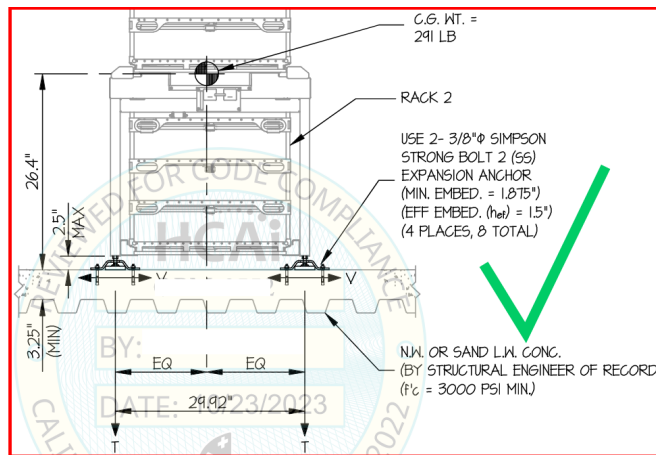
HCAI simplified approach lists all variables, as a new single coefficient to the mass, C_p .

- OPMs: Component design force coefficient, $C_{pm} = 0.4S_{DS}I_p \left[\frac{H_f}{R_\mu} \right] \left[\frac{C_{AR}}{R_{po}} \right]$
- OSPs: Tested component design force coefficient, $C_{ps} = (A_{FLX-H}, A_{RIG-H}, A_{FLX-V}, A_{RIG-V})$

Renewal or New OPM Preapprovals to 2025 CBC

Updated **OPM drawings** will now list:

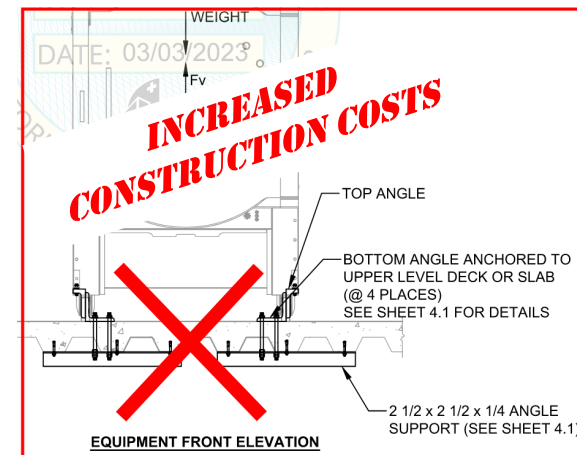
- *Component design force coefficient (C_{pm}),*
- *New component specific variables C_{AR} , R_{PO} , Ω_0 , H_f , R_μ ,*
- *Maximum seismic design force levels: S_{DS} , I_p , updated anchor forces (T_U & V_U),*
- *Additional **top-sided only** post-installed anchor configurations & drawings*



Top Sided
Post-Installed Anchor



Floor Mounted
Components



Through-bolt
Post-Installed Anchor

Renewal or New OSP Preapprovals to 2025 CBC

New **OSP Application** will now list:

- *Tested component design force coefficient* (C_{ps}),
- $F_{ph \text{ (Tested)}} = C_{ps} W_p = \text{RRS Accelerations } (A_{FLX-H} \text{ \& } A_{RIG-H}) * W_p$
- $F_{pv \text{ (Tested)}} = C_{ps} W_p = \text{RRS Accelerations } (A_{FLX-V} \text{ \& } A_{RIG-V}) * W_p$
- Revised equipment (UUT) sheets:

RRS Accelerations
listed on UUT Sheets

New variable listings (R_{μ} , H_f),
and revised A_{RIG-H}

| UNIT UNDER TEST (UUT) SUMMARY SHEET | | | | | | | | | | |
|---|----------------|-------|---------------|-------------------------------|-----------|----------|--------------|-------------|-------------|-------------|
| Manufacturer: Model Line: Model Number: Serial Number: | | | | | | | UUT 1 | | | |
| | | | | | | | Test Report: | | | |
| UUT Properties | | | | | | | | | | |
| Weight (lbs.) | Dimension (in) | | | Lowest Natural Frequency (Hz) | | | | | | |
| | Depth | Width | Tested Height | Front-Back | Side-Side | Vertical | | | | |
| 1,411 | 36.7 | 94.5 | 31.0 | 4.7 | 14.0 | 6.7 | | | | |
| UUT Highest Passed Seismic Run Information | | | | | | | | | | |
| Building Code | Test Criteria | | S_{DS} | R | H_u | I_p | A_{FLX-H} | A_{RIG-H} | A_{FLX-V} | A_{RIG-V} |
| | ICC-ES AC156 | | 2.0 | | | 1.5 | 3.20 | | 1.67 | 0.67 |
| | | | 2.5 | | | | | | | |



Shake Table Tested
Components

New ASCE 7-22 - F_p Calculator on the HCAI Website

F_p calculator accessed via the [Building List/Seismic Information](#) Tab on the Facility Detail page:



SPC = Structural Performance Category
NPC = Nonstructural Performance Category
SPC and NPC are applicable to Hospital Buildings only
3s, 4s and 5s indicate SPC/NPC rating self-reported by the hospital and not verified by OSHPD
GAC = General Acute Care
RACs = Removal Acute Care Services

* For NPC Deadlines California Administrative Code, Chapter 6, Section 1.5.2
NPC Status: This column shows NPC 4, 4D, 5 evaluation report submittal status.

Intent to Remove GAC – means HCAI received a signed letter that the facility intends to remove this building's GAC services by 2030 and therefore NPC evaluation report is not required.
Rpt: Submitted – means HCAI has received an NPC evaluation report. Submittal date is noted.
Rpt: Not Submitted – means HCAI has not received an NPC evaluation report.
Rpt: Unacceptable Submittal – means HCAI has received a document but was missing major required NPC evaluation report content. Submittal date is noted. These submittals did not comply with the NPC evaluation 1/1/2024 submittal deadline

ASCE7-22 Fp Calculation

USING THE DEFAULT OPTIONS WILL LEAD TO CONSERVATIVE RESULTS

Title for report

12127 Ronald Reagan UCLA Medical Center

S_{DS}, as obtained in previous page, can modify here

1.620

Select Nonstructural item (ASCE 7-22 Tables 13.5-1 and 13.6-1)

Interior nonstructural walls and partitions; Light frame > 9 ft (2.74 m) in height

I_p, Component Importance Factor

1.5

Z, height above base (multiple ok,separate with commas) H, Average roof height of structure in ft

0, 15, 30, 45, 60, 75, 90, 100

100.00

Labels corresponding to Z values (Separate with commas,Optional)

Grnd Level, Level 2, Level 3, Level 4, Level 5, Level 6, Mech Level, Roof

☒ Structural System Selection (Unknown system assumed if not enabled)

Select Structural System of the Building (ASCE 7-22 Table 12.2-1):

C. Moment-resisting Frame Systems 1. Steel special moment frames

I_e, Importance Factor for Building

1.5

Selected Structural System: C. Moment-resisting Frame Systems 1. Steel special moment frames

R, Response modification Value = 8.0

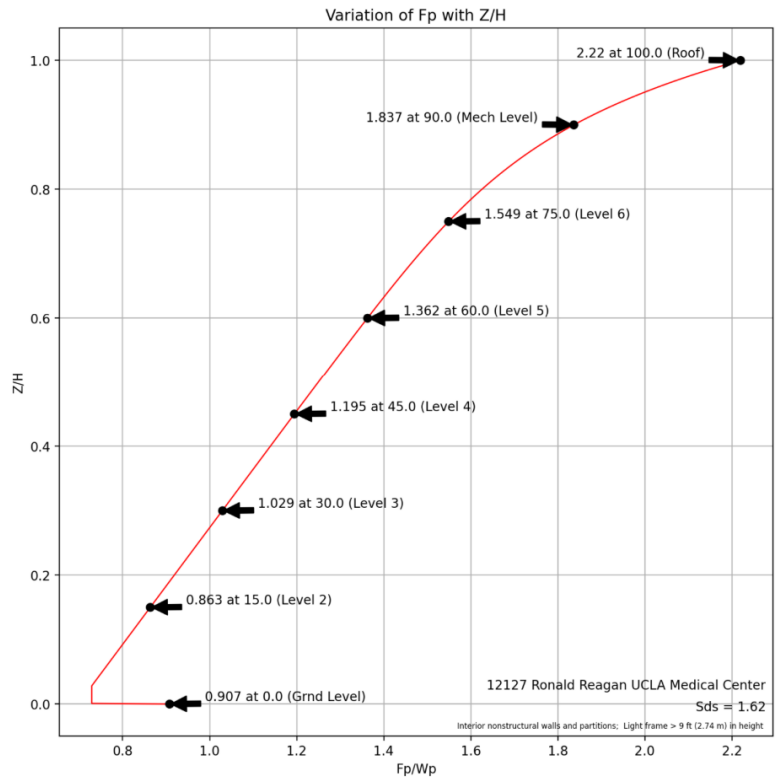
Ω_o = 3.0

ASCE 7-22 Equation 13.3-6:

$$R_{\mu} = \left[\frac{1.1R}{I_e \Omega_o} \right]^{1/2} \geq 1.3$$

Governing F_p:

| Location | Z | Z/H | H _f | F _p /W _p |
|------------|-----|------|----------------|--------------------------------|
| Grnd Level | 0 | 0 | 1 | 0.9072 |
| Level 2 | 15 | 0.15 | 1.2372 | 0.8634 |
| Level 3 | 30 | 0.3 | 1.4743 | 1.0289 |
| Level 4 | 45 | 0.45 | 1.7117 | 1.1945 |
| Level 5 | 60 | 0.6 | 1.9523 | 1.3624 |
| Level 6 | 75 | 0.75 | 2.2196 | 1.549 |
| Mech Level | 90 | 0.9 | 2.6322 | 1.8369 |
| Roof | 100 | 1 | 3.1811 | 2.2199 |



Can Submittals using the 2025 CBC use the Existing Preapprovals?

Existing Preapprovals

- OPM/OSP preapprovals are valid for use on any project (including 2025 CBC if project specific demands are less than what the OPM/OSP was approved for)
- Existing shake table tests are valid on any project (including 2025 CBC)

What's Coming?

Changes to PIN 55 and PIN 62

- PINs will reflect required changes to OPM drawings and OSP Applications
- Update to 2025 CBC

New OPDs are being developed

– Expected to be completed within - two months

Potential Structural Code Amendments?

- Revisions to design of transfer diaphragms with Type 4 horizontal irregularities using the two-stage analysis procedure
- Reduced lower limit for design of nonstructural components in base isolated buildings using nonlinear time history analysis

Other Activities

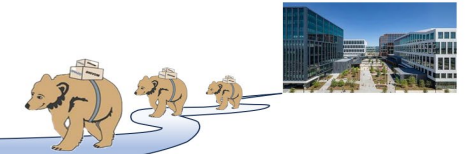
- Participation in national codes and standards committees
 - BSSC
 - 2026 NEHRP (PUC)
 - IT-1 & IT-4
 - Functional Recovery Task Committee (FRTC)
 - ASCE 7-28
 - Main Committee
 - Seismic subcommittee
 - Future conditions subcommittee
- Research and Development
- Presentations to Stakeholders



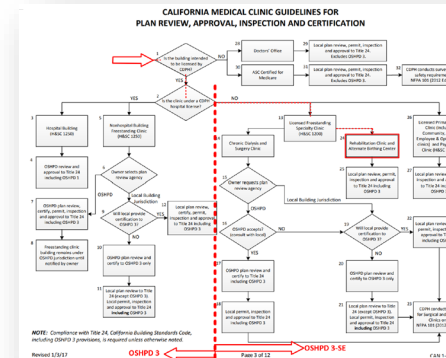
Looking Ahead

OSHPD's Top 3 Objectives for 2025

1. HCAI Office ~~relocation and~~ Smooth Transition to the ~~New~~ HCAI Headquarters Building



2. “Right-sizing” the T-24 OSHPD 3 building standards and related regulations



3. Escalate Collaboration w/ Hospitals to get them successfully into compliance w/ the 2030 HSSA seismic mandates.





Item #13

Building Standards Unit Update

- Proposed Functional Program Advisory Guide
- Discussion and public input

*Facilitator: Richard Tannahill, Architect, Deputy Division Chief, HCAI
(or designee)*

- Item #14 Special Presentation: Kaiser Permanente Ontario Medical Center -
Renewable Energy Microgrid System
- Discussion and public input
- Facilitators: Chris Tokas and Kaiser Permanente
Representative/Speaker (or designees)*

Item #15

Comments from the Public/Board Members on Issues not on this Agenda

The Board will receive comments from the Public/Board Members. Matters raised at this time may be taken under consideration for placement on a subsequent agenda.

Facilitator: Jim Malley (or designee)

Item #16 Adjournment
