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**HOSPITAL BUILDING SAFETY BOARD
Full Board Meeting**

**Thursday, August 15, 2024
10:00 a.m. – 4:00 p.m.**

Teleconference Meeting Access:

[HBSB Teams Full Board Meeting](#)

Access Code: 161-673-656

Appointed Members Present

Louise Belair, Chair
Jim Malley, Vice Chair
Cody Bartley
David Bliss
Janice Cheung
Michael Davis
Gary Dunger
Teresa Endres
Michael Foulkes
John Griffiths
Martin Hudson
Scott Mackey

HBSB Staff Present

Veronica Yuke, Executive Director
Marcus Palmer
Evetts Torres

Ex-Officio Members Present

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

**Director-Appointed Ex-Officio
Members Present**

Bert Hurlbut
Michael O'Connor

HCAI Staff Present

Joe LaBrie
Roy Lobo
Nanci Timmins

1 **1. Call to order and Welcome**

2 *Facilitator: Louise Belair, PE, LEED AP, Senior Vice President, WSP; Board Chair.*

3 Louise Belair opened the meeting, welcoming everyone and outlining the day's agenda.
4 The meeting was officially called to order, and she expressed anticipation for the
5 discussions ahead.
6

7 **2. Roll Call and Meeting Advisories/Expectations**

8 *Facilitator: Veronica M. Yuke, Manager, HCAI; Executive Director.*

9 Veronica Yuke conducted the roll call, confirming the attendance of the members and
10 verifying the presence of a quorum. The quorum was confirmed, allowing the meeting to
11 proceed. Veronica then went over the meeting's rules of engagement, emphasizing the
12 importance of muting microphones when not speaking and holding comments until the
13 end of each presentation.
14

15 **3. Department of Health Care Access and Information (HCAI) Update**

16 *Presenter: Elizabeth Landsberg, Director, HCAI*

17 Carl Newth was sworn in as the new Local Building Official Member Representative.
18 Carl introduced himself and shared his background as a Certified Building Official at
19 UCLA, expressing enthusiasm for contributing to the Board.

20 David Bliss, the outgoing Public Member Representative, was acknowledged for his
21 transition to a director-appointed Ex-Officio Member role.

22 James Malley was recognized for his second-term appointment as the Structural
23 Engineer Member Representative.

24 **Department Updates:**

25 *Budget and Legislative Updates:*

- 26 • Elizabeth Landsberg discussed the significant budget cuts California faced,
27 particularly a \$746 million reduction in funding for Health Workforce Development
28 Programs. She also highlighted the delay of the health worker minimum wage
29 increase and ongoing legislative actions related to seismic safety standards.

30 *Healthcare Affordability Board Meeting:*

- 31 • Elizabeth Landsberg previewed the upcoming Office of Health Care Affordability
32 (OHCA) Board meeting, which would focus on regional variations in healthcare
33 prices, with a particular focus on Monterey County.
34
35

1 **Discussion and Input**

- 2 • Teresa Endres inquired about potential collaboration between the Hospital
3 Building Safety Board and OHCA to improve healthcare access, especially in
4 rural areas.
- 5 • David Bliss provided insights into regional healthcare cost disparities,
6 emphasizing the complexities of cost-shifting within healthcare systems.

7 **Informational and Action item**

8 Explore collaboration opportunities between the Hospital Building Safety Board and the
9 OHCA.

10

11 **4. Nominations for HBSB Chair and Vice-Chair Kick Off**

12 *Facilitators: Michael Foulkes, Director, State and Local Government Affairs, Apple Inc.;*
13 *and Michael O'Connor, Principal, Nichols, Melburg & Rossetto; Nominating Committee*

- 14 • The Nominating Committee recommended Jim Malley for Chair and
15 Scott Mackey for Vice Chair. No additional nominations were made from the
16 floor.

17 **Informational and Action item**

18 Voting for the Chair and Vice-Chair was scheduled for later in the day.

19

20 **5. Overview and approval of the April 18, 2024, Full Board draft Meeting**
21 **Report/Minutes**

22 *Facilitator: Louise Belair*

23 **Introduction and Corrections**

24 Louise Belair began the presentation by noting that the meeting minutes from the April
25 18, 2024, Full Board meeting required some corrections. Specifically, she pointed out
26 errors in the report regarding the Instrumentation Committee and the Structural and
27 Nonstructural Regulations Committee:

- 28 ○ **Page 21 of the Binder, Page 11 of 24 of the Meeting Minutes:**
- 29 ■ **Farzad Naeim** was incorrectly listed as the presenter; **Jim Malley**
30 actually presented. This correction was applied to lines 14, 18, and
31 22, where Jim Malley should be recognized as the presenter.

32

33 **Review of the April 18, 2024, Meeting**

34 Louise Belair provided an overview of the April 18, 2024, meeting, noting that the

1 agenda included 18 items and that a quorum was established at the beginning of the
2 meeting. Key points from the April 18 meeting were summarized:

3 **Informational and Action Items:**

4 • **Informational Items:**

5 ○ The report included significant updates across multiple committees and
6 HCAI initiatives, providing a comprehensive overview of ongoing activities
7 and upcoming challenges.

8 • **Action Items:**

- 9 ○ **Motion to Approve:** The corrected minutes required a formal motion to be
10 approved.
- 11 ▪ Scott Mackey seconded the motion to approve the minutes as
12 corrected.

13

14 **6. Offsite Fabrication/Preassembled Components Webinar Development**
15 **Subcommittee**

16 *Facilitator: Cody Bartley, DPR Construction; Subcommittee Chair*

17 Cody Bartley provided a comprehensive report on the activities and outcomes of the
18 Offsite Fabrication/Preassembled Components Webinar Development Subcommittee.
19 The subcommittee had a series of meetings leading up to the successful presentation of
20 a webinar on June 25, 2024. This webinar focused on the intricacies of offsite
21 fabrication and preassembled components within the context of hospital construction
22 and safety regulations.

23 **Meeting Reports**

24 • **March 26, 2024:**

- 25 ○ The meeting started with the approval of the minutes from the previous
26 meeting held on February 28, 2024.
- 27 ○ Nanci Timmins presented new content for the webinar, specifically
28 focusing on Fire and Life Safety Officer (FLSO) considerations.
- 29 ○ Cody pointed out necessary editorial revisions and discussed the need to
30 reduce text on slides for better clarity and engagement during the webinar.
- 31 ○ The subcommittee reviewed and finalized speaking roles for the webinar.
32 The timeline for the slide deck's completion was also established, with the
33 agenda for the April 24, 2024, meeting set.

34

1 • **May 8, 2024:**

- 2 ○ The meeting minutes from March 26, 2024, were reviewed and approved.
- 3 ○ Continued efforts were made to refine the speaking roles and reduce slide
- 4 text. There was a robust discussion on the definitions of "prefabrication"
- 5 and "pre-assembly," ensuring all members had a consistent
- 6 understanding.
- 7 ○ The subcommittee worked on finalizing the slide content, with a focus on
- 8 aligning the messaging across all presentations.
- 9 ○ An interested party requested more detailed information on how offsite
- 10 prefabrication would be inspected. This feedback was incorporated into
- 11 the final webinar content.
- 12 ○ The timeline and duration of the webinar were confirmed, and it was
- 13 decided that an additional subcommittee meeting would be necessary for
- 14 a dry run before the actual event.

15 • **June 11, 2024:**

- 16 ○ This meeting was primarily focused on a dry run of the webinar
- 17 presentation. The subcommittee went through the slide deck in detail,
- 18 ensuring all content was accurate and engaging.
- 19 ○ The subcommittee discussed and agreed on removing specific project
- 20 identifications from the slide images to maintain confidentiality and general
- 21 applicability.
- 22 ○ A summary of motions from previous meetings was presented, with the
- 23 main focus being the approval of minutes from prior meetings.

24 **Webinar Outcomes**

25 The webinar, held on June 25, 2024, saw significant participation:

- 26 ○ Registrations: 632 participants registered for the webinar.
- 27 ○ Attendance: 393 attendees logged in, although this number likely
- 28 underrepresented the total attendance due to multiple participants joining
- 29 from single devices in group settings.
- 30 ○ Format: The webinar consisted of a one-hour presentation followed by a
- 31 30-minute Q&A session, which saw active participation.

32 **Discussions and Input**

- 33 • John Griffiths asked about the main takeaways from the Q&A session. Cody
- 34 responded that many questions focused on the inspection process for offsite

1 prefabrication, indicating a need for further education and possibly a follow-up
2 webinar.

- 3 • Chris Tokas commended the subcommittee’s efforts, highlighting the importance
4 of the webinar in moving the industry toward more efficient and effective
5 construction methods. Chris noted that while there are still some challenges, the
6 shift away from traditional methods is already showing benefits.

7 **Informational and Action Items:**

- 8 • **Informational Items:**

- 9 ○ The webinar was deemed a success with high participation and
10 engagement, reflecting strong industry interest in the topic.
- 11 ○ The subcommittee’s efforts in refining content, clarifying definitions, and
12 conducting a thorough dry run contributed to the webinar’s success.

- 13 • **Action Items:**

- 14 ○ Due to the significant interest in the inspection process for offsite
15 prefabrication, there was discussion about potentially hosting a second
16 webinar focused more specifically on this topic.
- 17 ○ The subcommittee and HCAI staff discussed ways to encourage more
18 industry participation in the Pre-Approved Components and Systems
19 (PCS) program, addressing concerns about public information and
20 industry perceptions.
- 21 ○ The report concluded with a motion to approve the meeting reports from
22 March 26, May 8, and June 11, 2024. Michael Davis seconded the motion.
- 23 ○ The motion to approve the reports was passed unanimously, with no
24 objections or abstentions.

25 Louise Belair and other members echoed the appreciation for the subcommittee’s
26 efforts, acknowledging the importance of the work done and the positive impact it had
27 on the industry. The successful webinar was seen as a significant step forward in
28 modernizing construction practices and enhancing efficiency within the field.

30 **7. Codes and Processes Committee**

31 *Facilitator: Michael O’Connor, Committee Chair*

32 Michael O’Connor opened the report by explaining that the Codes and Processes
33 Committee’s work is closely aligned with the triennial code adoption cycle. The
34 committee's primary role involves reviewing proposed amendments to various building

1 codes to ensure that hospital building safety regulations are up to date and aligned with
2 the latest safety standards and practices.

3

4 **Triennial Code Cycle Updates**

5 Mia Marvelli provided an update on the triennial code cycle, emphasizing the
6 importance of synchronizing committee meeting dates with the timelines for code
7 adoption and presentation to the Building Standards Commission. This coordination
8 ensures that the Board remains on track to implement necessary code changes
9 efficiently.

10 **Discussion:**

11 Michael O'Connor praised the coordination efforts, noting the complexity involved in
12 aligning these activities across different regulatory bodies.

13 **Building Code Part 2 Volume One (Title 24) Amendments**

14 Nanci Timmins presented proposed amendments to the California Building Code Part 2,
15 Volume 1 (Title 24). These amendments, submitted to the Office of the State Fire
16 Marshal, were designed to enhance clarity, consistency, and safety compliance in
17 healthcare facilities.

18 ○ **Key Amendments:**

- 19 ▪ Clarifying Egress Requirements: Particularly for treatment rooms
20 and atriums, ensuring that safe and efficient evacuation routes are
21 well-defined.
- 22 ▪ Reorganization of Suite Design Sections: To improve usability and
23 ensure that design standards meet current safety needs.
- 24 ▪ Reinstating NFPA 99 References: Specific to electrical systems
25 within healthcare facilities, reinstating portions of the NFPA 99
26 standard to ensure compliance with the most recent safety
27 guidelines.
- 28 ▪ Cooking Facilities: Addressing the design and safety requirements
29 for cooking facilities within healthcare settings, ensuring that these
30 areas meet stringent fire safety standards.

31 **Discussion:**

32 The committee acknowledged that these amendments were necessary to align with
33 NFPA 101 and to keep up with evolving safety standards in healthcare environments.

1 **Electronic Test, Inspection, and Observation (eTIO) System Update**

2 Chris Davis provided a detailed update on the development of the Electronic Test,
3 Inspection, and Observation (eTIO) system. This initiative represents a significant move
4 towards digital transformation within the inspection process for healthcare construction
5 projects.

6 ○ **Features of the eTIO System:**

- 7 ▪ **User-Friendly Interface:** Designed to be intuitive, with visual status
8 indicators to easily track progress.
- 9 ▪ **Real-Time Tracking:** The system allows all parties involved to
10 monitor the status of inspections in real-time, reducing delays and
11 improving communication.
- 12 ▪ **Detailed Drill-Down Summaries:** Users can access detailed
13 information at every stage of the inspection process, ensuring that
14 no steps are missed and that all documentation is accurate and
15 complete.

16 **Discussion:**

17 John Griffiths inquired about the expected timeline for the system's full implementation.

18 Michael O'Connor responded that while an exact date was not set during this meeting,
19 further updates were expected in upcoming sessions, with a beta rollout anticipated
20 soon.

21 Richard Tannahill confirmed that more details would be provided later in the afternoon,
22 indicating that the project was progressing well.

23 **Standard Detail Updates**

24 Gary Dunger reported on the progress of standard details, particularly focusing on
25 skilled nursing facilities. This initiative aims to streamline the approval process for
26 construction projects by providing standardized details that can be widely adopted.

27 ○ **Key Points:**

- 28 ▪ The committee is developing detailed standards similar to those
29 used for partitions and metal stud framing in acute care projects.
30 These will be adapted for skilled nursing facilities.

- 1 ▪ The work involves close collaboration with private industry,
2 particularly in developing Revit files that will be used to standardize
3 design details.
- 4 ▪ The first round of standard details is expected to be reviewed and
5 submitted to HCAI for approval soon.

6 **Discussion**

7 Michael O'Connor and the committee expressed enthusiasm for the progress made in
8 this area, recognizing the potential to significantly reduce the time and effort required for
9 project approvals.

10 Louise Belair commended the committee's work, particularly the efforts to streamline
11 processes and adopt new technologies.

12 **Informational and Action Items**

13 • **Informational Items:**

- 14 ○ The committee is actively engaged in updating building codes and
15 processes to reflect the latest safety standards and technological
16 advancements. The work on the eTIO system and standard detail updates
17 highlights the Board's commitment to improving efficiency and safety in
18 healthcare construction projects.

19 • **Action Items:**

- 20 ○ The committee will continue to track the progress of the eTIO system and
21 provide updates in future meetings.
- 22 ○ The first round of standard details for skilled nursing facilities will be
23 reviewed and submitted to HCAI for approval, with further updates
24 expected in subsequent meetings.
- 25 ○ **Motion:** The committee's May 8, 2024, meeting report was formally
26 presented as a motion for approval. The motion was seconded by Michael
27 Foulkes. The motion to approve the Codes and Processes Committee's
28 May 8, 2024, draft meeting report was passed unanimously.

29

30 **8. Education and Outreach Committee**

31 *Facilitator: Scott Mackey, AIA, NCARB, APEC, Design Manager, Hensel Phelps;*
32 *Committee Chair*

1 Scott Mackey opened the discussion by reviewing the 2024 Committee Support
2 Accomplishments:

- 3 • Published Design Guides
- 4 • Pre-Fabricated & Pre-Assembled Webinar

5 **Key Discussions and Input**

- 6 • **Update on the Guide for Working on OSHPD Projects – Tips from the**
7 **Experts**

- 8 ○ Mia Marvelli and Paul Coleman presented the final updates to the Guide
9 and announced the Guide has been published along with an
10 advertisement about its availability.

- 11 • **Update on the Guide for Planning & Preparing for Disasters**

- 12 ○ Mia Marvelli and Paul Coleman presented the final updates to the Guide
13 and announced the Guide has been published along with an
14 advertisement about its availability.

- 15 • **Update on the Policy Intent Notice (PIN) 50 – Integrated Review Webinar**

- 16 ○ Diana Navarro presented specifics regarding the webinar content: a 1-
17 hour webinar focusing on the client’s perspective of the integrated review
18 process.
- 19 ○ Tentative presenters for the webinar would include herself, Gary Dunger
20 and Monica Colosi.
- 21 ○ Event is scheduled for September 25, 2024.

- 22 • **Update on the Preapproved Fabricated Components and Systems Webinar**

- 23 ○ Event was held on June 25, 2024.
- 24 ○ There were 632 registered attendees for the event.
- 25 ○ Cody Bartley has already presented details of the event.

- 26 • **Creation of an “Island Hospital Concept” Facility Example**

- 27 ○ Jamie Schnick, Marc Hoffman, David Bliss, and Duc Bui presented the
28 motivations for exploring an island hospital concept.
- 29 ○ Increased need for hospitals to gain control over their utility services.
- 30 ○ Stressing the advantages of the economic benefits, less reliance on single
31 source service providers, and independence from utility reliance.
- 32 ○ Use of microgrids, fuel cells and battery storage systems towards cost
33 savings.
- 34 ○ Subject matter transferred to the Energy Conservation & Management
35 Committee.

1 • **Report on the creation of a California Administrative Code Training**
2 **Webinar**

- 3 ○ Monica Colosi and Darren Graves presented the creation of a
4 Construction Administration Proficiency (CAP) program created by the
5 office to improve the understanding and application of the California
6 Administrative Code.
7 ○ The Proficiency Certification program would be at no cost to the
8 applicants.
9 ○ Examinations are given in-person at both the Sacramento and Los
10 Angeles offices.
11 ○ Candidates who pass the exam will be certified and will be listed on the
12 website.

13 • **Discussion on approving American Institute of Architects Continuing**
14 **Education Units**

- 15 ○ Explored the idea of becoming an approved AIA CEU educator.
16 ○ Richard Tannahill explained the experience in trying to apply.
17 ○ Due to requirements to meet AIA requirements, it was agreed to pass on
18 the pursuit and simply provide certification of attendance for an event.
19 ○ Resulted in directing those interested in securing AIA CEU credits to self-
20 report.

21 • **Discussion on New Opportunities for Educational Content, Events or**
22 **Programs for 2024**

- 23 ○ Classification of imaging procedures into Class 1, 2 and 3.
24 ○ Revisiting the “Inspect to Pass” approach to Field Inspections.
25 ○ Formal rollout of OSHPD 6: Chemical Dependency Recovery Hospitals
26 (CDRH)
27 ○ New program on “Tips for Working with OSHPD in the Field.”
28 ○ Working with photovoltaics, microgrids, and battery systems associated
29 with utility independence from the electrical grid and utility companies.
30 ○ How to write a Functional Program & Operational Program webinar
31 opportunity.
32 ○ Creation of a Design Professional Mentorship Program through HCAI.
33 ○ Exploration of how to expand the distribution of materials and
34 announcements to a greater audience = possible creation of a bulletin
35 board on the OSHPD website highlighting the confirmed events in the
36 future.

37 **Action Items**

- 38 • **Motion:** The committee's May 22, 2024, meeting report was formally presented
39 as a motion for approval. The motion was seconded by Farzad Naeim. The

1 motion to approve the Education and Outreach Committee's May 22, 2024, draft
2 meeting report was passed unanimously.

3 Scott Mackey concluded the session by thanking committee members and participants
4 for their dedication to improving the industry's knowledge and application of the
5 California Administrative Code.

6

7 **9. Technology and Research Committee**

8 *Facilitator: Gary Dunger, Executive Director, Design and Construction, Cedars-Sinai*
9 *Health System; Committee Chair*

10 **Overview of the June 20, 2024, Meeting**

11 Gary Dunger began the session by acknowledging that this was the first meeting of the
12 Technology and Research Committee in quite some time. The focus of the meeting was
13 to review past activities and set a course for future initiatives. Gary emphasized the
14 need to assess the Committee's previous work and establish clear goals moving
15 forward.

16 **Key Discussions and Input**

17 **1. Cedars-Sinai Marina Del Rey Replacement Hospital Project Presentation:**

- 18 ○ The highlight of the meeting was a presentation by the Project Director of
19 the Cedars-Sinai Marina Del Rey Replacement Hospital. This presentation
20 detailed the efforts to design and implement a comprehensive technology
21 program for the new facility.
- 22 ○ **Key Takeaways:**
 - 23 ▪ The project emphasized leveraging existing technology systems
24 across the entire health system to ensure consistency and
25 compatibility.
 - 26 ▪ There was a strong focus on including peers, vendor partners, and
27 key decision-makers in the design process to create a "future-
28 proof" technology infrastructure.
 - 29 ▪ Technologies discussed included virtual nursing, centralized patient
30 flow command centers, smart beds, and real-time locating systems
31 (RTLS) for tracking assets and personnel.

32

33

1 **2. Challenges and Considerations:**

- 2 ○ The Committee explored several challenges, such as ensuring that room
3 identifiers on patient rooms balance informativeness with patient privacy.
- 4 ○ Gary Dunger and other members discussed the integration of RTLS,
5 which can track staff, patient locations, and critical activities such as hand
6 hygiene. The goal is to enhance both efficiency and safety within the
7 hospital environment.

8 **3. Discussion on Emerging Technologies:**

- 9 ○ Telemedicine and Robotics: The Committee reviewed the impact of
10 telemedicine, particularly its expansion during the COVID-19 pandemic,
11 and discussed the potential for dedicated telemedicine spaces within
12 healthcare facilities.
- 13 ○ Healthcare Equity and Technology: The Committee deliberated on how
14 technology could address healthcare disparities, particularly in
15 underserved communities. They discussed the need to identify gaps in
16 healthcare access through data analysis and to focus efforts on these
17 areas.
- 18 ○ All-Electric Hospitals and Carbon Footprint: The Committee discussed
19 emerging technologies aimed at reducing the carbon footprint of
20 healthcare facilities. The Cedars-Sinai new tower and UC Irvine’s all-
21 electric campus were cited as examples.
- 22 ○ Artificial Intelligence (AI): AI was highlighted as a critical area of focus,
23 with the establishment of an AI Committee at Cedars-Sinai. The
24 Committee recognized the profound impact AI will have on healthcare
25 delivery and proposed incorporating AI into their future agendas.
- 26 ○ Cybersecurity and Medical Records: The Committee addressed the
27 growing importance of cybersecurity, particularly in the context of recent
28 digital system failures at healthcare facilities. They discussed the definition
29 of medical records in the digital age and the implications of storing these
30 records in the cloud versus onsite.

31 **4. Healthcare Microgrids Presentation Postponed:**

- 32 ○ A scheduled presentation on healthcare microgrids by Senior Electrical
33 Engineer Jamie Schnick was postponed due to conflict.

1 **5. Committee Goals and Future Direction:**

- 2 ○ The Committee reviewed its current goals, with an emphasis on redefining
3 and updating them to reflect the latest technological advancements and
4 challenges. There was a particular focus on removing barriers in building
5 codes that hinder the adoption of modern technologies.

6 **Informational Items**

7 The Committee’s discussions underscored the importance of integrating advanced
8 technologies such as telemedicine, AI, and RTLS into healthcare facilities to enhance
9 patient care and operational efficiency.

10 The Committee acknowledged the role of technology in addressing healthcare
11 disparities, particularly through the use of telemedicine and data analysis.

12 The discussion on all-electric hospitals and carbon footprint reduction highlighted the
13 Committee's commitment to sustainability in healthcare infrastructure.

14 **Action Items**

- 15 • **Develop a White Paper:** The Committee agreed to develop a white paper that
16 consolidates discussions on telemedicine, healthcare equity, AI, and carbon
17 footprint reduction. This document will serve as a guide for future Committee
18 efforts.
- 19 • **Reschedule the Microgrids Presentation:** The Committee will reschedule the
20 presentation on healthcare microgrids to ensure this critical topic is thoroughly
21 explored.
- 22 • **Explore AI and Robotics:** The Committee will further investigate the potential of
23 AI and robotics in healthcare and consider these technologies in their future
24 goals.
- 25 • **Cybersecurity Focus:** The Committee will continue to address cybersecurity
26 issues, particularly the protection of digital medical records and the implications
27 of storing data offsite.
- 28 • **Correction to meeting report:** Gary Dunger noted that on page 67, line 12, the
29 word “ambulance” should be “ambient.”
- 30 • **Motion:** The committee's June 20, 2024, meeting report was formally presented
31 as a motion for approval as corrected. The motion was seconded by
32 Marty Hudson. The motion to approve the Technology Committee’s June 20,
33 2024, draft meeting report with corrections, was passed unanimously.

34 Gary Dunger closed the session by thanking the Committee members for their
35 contributions and reiterating the importance of their work in advancing healthcare
36 technology. He noted that the Committee’s focus on integrating cutting-edge

1 technologies and addressing emerging challenges will be critical in shaping the future of
2 healthcare delivery.

3 **10. Office of Statewide Hospital Planning and Development (OSHPD) Update**

4 *Facilitator: Chris Tokas, SE, F.SEAOC, CBO, Deputy Director, HCAI*

5 Chris Tokas began by providing an update on OSHPD's current workload and
6 performance metrics. He highlighted that the office continues to manage a substantial
7 volume of projects, maintaining a steady pace of reviews and approvals. Despite some
8 challenges, OSHPD has kept up with its commitments, ensuring that healthcare
9 facilities across the state meet safety and regulatory standards.

10 He discussed the ongoing seismic compliance efforts, noting that 80% of buildings now
11 conform to the structural requirements. However, 20% remain in SPC-1 and SPC-2
12 categories, with particular attention on those that are considered higher-risk. He
13 emphasized the urgency in addressing these facilities before the deadline approaches.

14 Chris Tokas also addressed the upcoming CMS requirements for fully sprinklered
15 buildings, which are set to be enforced by July 5, 2028. He noted that OSHPD has been
16 communicating this requirement to healthcare facilities but observed a lack of progress
17 in some cases. This could lead to significant issues as the deadline draws nearer,
18 especially for facilities that might not meet the 2028 deadline.

19

20 **Personnel Changes**

21 Chris acknowledged that OSHPD has experienced some personnel changes, but
22 assured the Board that the Office is working to fill any gaps to maintain its high level of
23 service. He mentioned ongoing recruitment efforts and the importance of retaining
24 experienced staff to handle the technical demands of the job.

25 **Key Discussions and Input**

26 **1. Sprinkler System Compliance:**

27 ○ Nanci Timmins elaborated on CMS's adoption of the 2012 edition of NFPA
28 101, which mandates that high-rise healthcare facilities be fully sprinklered
29 by 2028. She emphasized that this requirement is not only for OSHPD-
30 regulated facilities but also for any healthcare building participating in
31 CMS programs. The Board discussed the implications of this requirement
32 and the challenges facilities may face in meeting the deadline.

33 **2. Emergency Preparedness:**

34 ○ David Bliss raised concerns about how OSHPD reaches out to facilities
35 after emergencies like earthquakes. Chris Tokas responded by explaining
36 OSHPD's proactive approach, which includes immediate outreach to

1 assess damage and provide assistance, such as issuing emergency
2 permits or coordinating with agencies like the Army Corps of Engineers for
3 necessary resources.

4 **3. Healthcare Microgrids and Sustainability:**

- 5 ○ Chris Tokas also provided an update on healthcare microgrid initiatives,
6 particularly the publication of CAN 3-517, which outlines the guidelines for
7 these systems. He underscored the importance of these systems in
8 enhancing the resilience of healthcare facilities during emergencies.

9 **Informational Items**

10 The ongoing efforts to bring all facilities into compliance with seismic standards were a
11 key focus. The Board was informed that communication efforts would continue,
12 particularly concerning the upcoming deadlines.

13 The Board was reminded of the critical deadline for installing sprinkler systems in high-
14 rise healthcare facilities, with OSHPD continuing to push for compliance.

15 **Action Items**

- 16 • **Increased Outreach for CMS Compliance:** OSHPD will continue its outreach
17 efforts to ensure that all facilities are aware of the CMS sprinkler system
18 requirements and the approaching 2028 deadline.
- 19 • **Ongoing Recruitment and Staffing:** Efforts to fill staffing gaps and retain
20 experienced personnel will continue, ensuring that OSHPD maintains its capacity
21 to meet the demands of its workload.
- 22 • **Monitoring Seismic Compliance:** OSHPD will continue to monitor the progress
23 of facilities in meeting seismic compliance standards, focusing particularly on
24 those in SPC-1 and SPC-2 categories.

25 Chris Tokas concluded the update by reiterating OSHPD's commitment to maintaining
26 the safety and compliance of California's healthcare facilities. He thanked the Board for
27 their ongoing support and acknowledged the challenges ahead, particularly with the
28 upcoming deadlines and the need for continued vigilance in compliance efforts.

30 **11. Building Standards Unit (BSU) Update**

31 *Facilitator: Mia Marvelli, Architect, Supervisor, HCAI*

32 Mia Marvelli provided an update on the current activities and workload of the BSU. She
33 reported that the BSU continues to manage a substantial volume of work, particularly in
34 the areas of code development, seismic compliance, and pre-approvals for various
35 building components and systems. The unit is also heavily involved in the ongoing

1 review and update of the California Building Code, which plays a critical role in ensuring
2 the safety and resilience of healthcare facilities throughout the state.

3 **Key Discussions and Input**

4 **1. Seismic Compliance and Non-Structural Components:**

- 5 ○ Seismic Compliance: The discussion emphasized the importance of
6 ensuring that both structural and non-structural components of healthcare
7 facilities are in compliance with the latest seismic safety standards. It was
8 noted that while significant progress has been made in bringing SPC-1
9 and SPC-2 buildings up to higher standards, challenges remain in
10 ensuring all facilities meet the required deadlines.
- 11 ○ Non-Structural Components (NPC): The focus was also placed on non-
12 structural components, which are critical to the continued operation of
13 healthcare facilities during and after a seismic event. The BSU has been
14 actively working on evaluating and updating the requirements for non-
15 structural components to ensure they can withstand seismic forces.

16 **2. Pre-Approval Programs and Code Changes:**

- 17 ○ Pre-Approvals (OSP, OPM, PCS, OPA): Mia Marvelli discussed the
18 ongoing efforts to manage and streamline the pre-approval process for
19 various building components and systems. This includes OSPs (OSHPD
20 Special Seismic Certification Pre-Approval), OPMs (OSHPD Pre-Approval
21 of Manufacturer's Certification), PCSs (Pre-Check Structural), and OPAs
22 (OSHPD Project Assessment). She highlighted that BSU is keeping up
23 with the demand for these approvals, which are essential for ensuring that
24 equipment and systems used in healthcare facilities are compliant with the
25 latest safety standards.
- 26 ○ Code Changes: BSU is also actively involved in the adoption of the ASCE
27 7-22 standards, which introduces more complex equations for calculating
28 the forces on non-structural components. These changes have significant
29 implications for the design and approval of building systems, and BSU is
30 working to minimize the impact on existing pre-approvals by providing
31 clear guidelines for compliance.

32 **3. Seismic Instrumentation Program:**

- 33 ○ Instrumentation of Healthcare Facilities: Mia Marvelli updated the Board
34 on the progress of the seismic instrumentation program, which involves
35 placing sensors in healthcare facilities to monitor their performance during
36 seismic events. The data collected from these sensors is invaluable for
37 understanding how different building types and construction methods
38 respond to earthquakes, and for improving future building designs.

1 **4. Small and Rural Hospital Seismic Relief:**

- 2 ○ Grant Program: BSU is managing a grant program aimed at helping small
3 and rural hospitals achieve seismic compliance. Funded by a tax on
4 tobacco sales, this program provides financial assistance to hospitals that
5 need to upgrade their facilities to meet seismic safety standards. BSU is
6 working to ensure that grant money is used effectively, focusing on
7 essential upgrades that directly contribute to seismic safety.

8 **Informational Items**

9 BSU reminded the Board of the critical deadlines for seismic compliance, particularly
10 the requirement for facilities to upgrade from SPC-1 and SPC-2 categories to higher
11 safety standards by 2030.

12 The ongoing efforts to ensure that non-structural components meet seismic standards
13 were highlighted, with BSU actively working on new guidelines and evaluations.

14 **Action Items**

- 15 • **Finalization of NPC Guidelines:** BSU is tasked with finalizing and issuing
16 guidelines for the compliance of non-structural components in healthcare
17 facilities.
- 18 • **Streamlining Pre-Approval Processes:** Efforts to streamline the pre-approval
19 processes for building components will continue, with a focus on minimizing the
20 impact of new code changes.
- 21 • **Expansion of the Seismic Instrumentation Program:** BSU will continue to
22 expand the seismic instrumentation program to gather more data on the
23 performance of healthcare facilities during earthquakes.

24 Mia Marvelli concluded the update by emphasizing the importance of BSU's work in
25 maintaining the safety and resilience of California's healthcare facilities. She noted that
26 while progress has been made, ongoing efforts are needed to ensure that all facilities
27 meet the required safety standards in a timely manner.

28

29 **12. Inspection Services Unit (ISU) Update**

30 *Facilitator: Joe LaBrie, SE, Regional Compliance Officer, HCAI; Monica Colosi,*
31 *Compliance Officer, HCAI; Darren Graves, Compliance Officer, HCAI; and Chris Davis,*
32 *District Structural Engineer, HCAI*

33

34 Joe LaBrie began the update by discussing the overarching theme of "Breaking Ground
35 on Groundbreaking Change," highlighting that ISU is on the verge of significant
36 improvements in productivity and efficiency within the construction inspection

1 processes. He emphasized that these changes address longstanding issues that have
2 historically hindered construction projects.

3 **Key Challenges Addressed:**

4 ○ Test, Inspection, and Observation (TIO) Process: Joe LaBrie discussed
5 the complexities of the traditional TIO process, which has often been
6 misunderstood and misused. The introduction of the electronic TIO (eTIO)
7 aims to streamline and clarify the process, making it easier for designers
8 and inspectors to engage effectively.

9 ○ Accountability and Consistency: ISU is focusing on improving
10 accountability among all stakeholders, including design professionals,
11 contractors, and inspectors. There is also a concerted effort to ensure
12 consistency in how regulations are enforced across different projects and
13 regions.

14 **HBSB Full Board** ○ Information Dissemination: Another priority is the regular distribution of
15 useful information to the industry, ensuring that all stakeholders have
16 access to the latest updates and best practices. **20 December 11 - 12, 2024**

17 **Discussions on Specific Programs and Initiatives**

18 **1. Inspection Certification Exam:**

19 ○ Joe LaBrie provided an update on the inspection certification exams
20 conducted in Los Angeles and Sacramento. The results showed a pass
21 rate of 36% in Los Angeles and 37% in Sacramento, which is
22 approximately 20% lower than in previous years. He expressed concern
23 over these results and mentioned that ISU is investigating the reasons
24 behind the decline in pass rates.

25 **2. Compliance Officer Academy:**

26 ○ A new training program, the Compliance Officer (CO) Academy, has been
27 launched to improve the training and consistency of service among
28 OSHPD's field staff. This program is scheduled to start on September 4,
29 2024, and is expected to be completed by the end of the fourth quarter of
30 2024. The goal is to enhance the efficiency and consistency of inspections
31 across the state.

32 ○ John Schreck was recognized for his leadership in organizing the
33 curriculum for this academy.

34 **3. ISU IOR Supplemental Monitoring:**

35 ○ ISU has implemented a program for supplemental monitoring of
36 Inspectors of Record (IORs) in the field. This involves monthly visits to
37 construction sites to monitor and support IORs, ensuring they meet the

1 required standards of inspection. The program aims to improve inspection
2 services and accountability among inspectors.

3 **4. IOR Utilization Program:**

- 4 ○ This new initiative is designed to connect the supply of projects needing
5 inspection with the demand for IOR services across the state. The
6 program is still in its early stages but aims to enhance transparency and
7 better utilize available resources.

8 9 **5. eTIO System:**

- 10 ○ Chris Davis (via a recorded presentation) provided a detailed walkthrough
11 of the current status of the eTIO application. He highlighted the new
12 features, including user access controls, milestone tracking, and digital
13 signatures, all designed to streamline the inspection and compliance
14 process.
- 15 ○ Internal beta testing of the eTIO system is set to begin with the ISU group,
16 with plans to expand testing to select industry users before the end of the
17 year.

18 **Informational Items**

19 The eTIO system represents a significant advancement in how inspections are
20 conducted, aiming to address the complexities of the traditional process.

21 The CO Academy and the supplemental monitoring program are key initiatives aimed at
22 improving the consistency and accountability of inspections across the state.

23 **Action Items**

- 24 • Investigate Certification Exam Results: ISU will investigate the reasons behind
25 the decline in pass rates for the inspection certification exams and take
26 necessary actions to address the issue.
- 27 • Continue Development of the CO Academy: ISU will proceed with the CO
28 Academy's training schedule, aiming for completion by the end of 2024.
- 29 • Expand eTIO System Testing: ISU will continue internal testing of the eTIO
30 system, with plans to involve external users before the end of the year.

31 Joe LaBrie concluded the update by emphasizing the importance of these initiatives in
32 enhancing the overall effectiveness and consistency of the inspection process within
33 OSHPD. He acknowledged the challenges ahead but expressed confidence in ISU's
34 ability to implement these changes successfully.

1 **13. Fire Prevention Unit (FPU) Update**

2 *Facilitator: Nanci Timmins, Chief Fire and Life Safety Officer, HCAI*

3 **Overview of Current Work and Priorities**

4 Nanci Timmins provided an update on the current initiatives and priorities of the Fire
5 Prevention Unit (FPU). She emphasized that the unit is actively engaged in several
6 critical areas, including training programs, building standards updates, stakeholder
7 education, and various committee involvements.

8
9 **Key Discussions and Input**

10 **1. Fire Life Safety Training Program:**

- 11 ○ Nanci Timmins highlighted the Fire Life Safety Training Program as one of
12 the unit's highest priorities. This program, which was formally established
13 by SB 1838 in 2006 and implemented in 2007, aims to develop the skills
14 and knowledge required for Fire Life Safety Officers (FLSOs).
- 15 ○ The program was initially designed as a two-year training course but has
16 been condensed to one year due to advancements in technology. The
17 training includes classroom instruction, plan review, field observation, and
18 mentorship. Participants must complete approximately 40 modules,
19 including exercises and quizzes, before undergoing a final assessment
20 and promotional interview.
- 21 ○ Nanci Timmins mentioned that the program has been highly successful,
22 with a 95% pass rate among participants. Additionally, 60% of the current
23 FLSSO staff are graduates of this program, reflecting its importance in
24 building a skilled workforce.

25 **2. Staffing and Recruitment Challenges:**

- 26 ○ FPU currently has 22 FLSSO staff members, with a significant number
27 potentially eligible for retirement in the next five years. This looming gap
28 highlights the need for continuous recruitment and training efforts to
29 maintain sufficient staffing levels to meet OSHPD mandates.
- 30 ○ Nanci Timmins discussed the historical challenges of recruiting qualified
31 candidates due to the strict requirements for FLSSO positions, which
32 include two years of full time plan review or field observation experience in
33 healthcare. The training program was created to help bridge this gap by
34 providing the necessary healthcare experience to candidates who are
35 otherwise qualified.

36

1 **3. Building Standards and Code Updates:**

- 2 ○ FPU is actively involved in updating building standards and codes,
3 particularly in response to the mid-cycle code updates that take effect
4 July 1, 2025. These updates include significant changes in areas such as
5 fire retardant-treated wood, technology equipment rooms, and landscape
6 roofs.
- 7 ○ Nanci Timmins mentioned that FPU works closely with the State Fire
8 Marshal (SFM) and other stakeholders to ensure these updates are
9 implemented effectively. The unit is also involved in stakeholder training to
10 ensure that all relevant parties are aware of, and understand the new
11 standards.

12 **4. Training for New Technologies:**

- 13 ○ FPU has been conducting training on several emerging technologies,
14 including energy storage systems, robotics, and very early smoke
15 detection systems. These trainings are essential for ensuring that new
16 technologies are integrated safely and effectively into healthcare facilities.
- 17 ○ FPU also provides training on specific issues that have arisen due to
18 changes in available products, such as fire pump bypass isolation
19 switches and the removal of hazardous fire suppression agents like AFFF
20 (Aqueous Film-Forming Foam).

21 **5. Committee Involvement:**

- 22 ○ Nanci Timmins detailed her involvement in several key committees,
23 including the ICC Healthcare Committee, the ICC 1100 Committee on
24 spray-applied polyurethane foam plastics, and various SFM committees.
25 These committees are crucial for addressing cross-cutting issues that
26 affect both fire safety and broader building standards.

27 **Informational Items**

28 FPU is committed to continuing and enhancing its training programs to ensure that
29 FLSOs are well prepared to meet the demands of their roles. The unit is also exploring
30 ways to further reduce the training duration using new technologies.

31 FPU is actively working on implementing mid-cycle code updates and providing the
32 necessary training to stakeholders.

33 FPU is focusing on integrating new technologies into healthcare facilities safely, with
34 ongoing training and updates to standards.

1 **Action Items**

- 2 • Enhance Training Programs: FPU will continue to update and refine its training
3 programs, including incorporating feedback from participants and exploring new
4 technologies to improve the training experience.
- 5 • Address Staffing Challenges: FPU will focus on recruiting and training new staff
6 to ensure that the unit can meet future demands, particularly in light of potential
7 retirements.
- 8 • Implement Code Updates: FPU will work closely with the SFM and other
9 stakeholders to implement the mid-cycle code updates and provide the
10 necessary training to ensure compliance.
- 11 • Monitor and Train on New Technologies: FPU will continue to monitor the
12 integration of new technologies into healthcare facilities and provide training to
13 ensure these technologies are used safely and effectively.

14 Nanci Timmins concluded the update by acknowledging the ongoing challenges and
15 opportunities within FPU. She emphasized the unit's commitment to maintaining high
16 standards of fire prevention and safety in California's healthcare facilities and thanked
17 the Board for their continued support.

18

19 **14. Structural Services Section Update**

20 *Facilitator: Roy Lobo, PhD, SE, Principal Structural Engineer, HCAI*

21 **Overview of Seismic Compliance and Structural Support**

22 Roy Lobo presented the update for the Structural Services Section, which includes the
23 Seismic Compliance Unit and the Structural Support Unit. The primary focus was on the
24 progress and challenges related to seismic compliance for healthcare facilities across
25 California.

26 **Key Discussions and Input**

27 **1. Seismic Compliance for SPC-1 and SPC-2 Buildings:**

- 28 ○ Roy Lobo reiterated the ongoing challenge with SPC-1 buildings, which
29 are at the highest risk during seismic events. As of the meeting, there
30 were still 39 SPC-1 buildings that had not been upgraded to a higher
31 structural performance category. Despite several extensions, the most
32 recent being under AB 2190, progress has been slow, and some facilities
33 are now facing fines for non-compliance.
- 34 ○ SPC-2 Compliance: The update also covered SPC-2 buildings, particularly
35 SPC-2H (high-risk) and SPC-2S (standard). Approximately 700 buildings
36 in these categories are non-conforming and need to be upgraded to SPC-

1 4D or removed from service by the January 1, 2030, deadline. Efforts are
2 ongoing to encourage and assist these facilities in meeting the required
3 compliance milestones.

4 **2. Non-Structural Performance Compliance (NPC):**

- 5 ○ Roy Lobo emphasized the critical nature of non-structural components in
6 ensuring that hospitals remain operational after an earthquake. Although
7 there has been significant progress, with no buildings remaining in NPC-1,
8 about 50% of facilities are still in NPC-2. These facilities need to upgrade
9 to NPC-3 or NPC-4 by 2030 to continue providing services.
- 10 ○ AB 1882 Submissions: The discussion highlighted that a significant portion
11 of facilities did not meet the January 1, 2024, deadline for submitting NPC
12 compliance evaluation reports. About 32% of facilities failed to submit the
13 required documentation for NPC-4D or NPC-5, which includes a water
14 rationing plan.

15 **3. Small and Rural Hospital Seismic Relief Program:**

- 16 ○ Roy Lobo provided an update on the grant program aimed at small and
17 rural hospitals, which is funded by a tax on tobacco sales. The program
18 has seen 38 applications, with 26 approved and 12 pending finalizations.
19 The grant money is specifically targeted at helping these facilities achieve
20 seismic compliance, which will allow them to continue operating beyond
21 2030.

22 **4. Pre-Approval Programs and Code Updates:**

- 23 ○ OSP and OPM Reviews: The Structural Support Unit has made significant
24 progress in processing pre-approvals for various building components.
25 The number of outstanding reviews has decreased, and the unit is
26 keeping pace with new submissions. However, recent changes to the
27 ASCE 7-22 standards have introduced more complex equations for
28 calculating forces on non-structural components, affecting existing pre-
29 approvals.
- 30 ○ Geotechnical Reports: The unit is also responsible for evaluating
31 geotechnical reports, with an average of one new or revised report being
32 submitted each week. This ensures that building foundations and other
33 critical aspects are adequately designed to withstand seismic forces.
- 34 ○ Seismic Instrumentation Program: The update included progress on the
35 seismic instrumentation program, which involves installing sensors in
36 healthcare facilities to monitor their performance during earthquakes. The
37 data collected is vital for improving future building designs.

5. Emerging Issues and Future Work:

- Embodied Carbon in Building Materials: The discussion briefly touched on the emerging focus on reducing the carbon footprint of building materials, such as cement and steel, used in healthcare facility construction. This is part of a broader industry trend towards sustainability, with the aim of achieving net-zero carbon emissions by 2050.

Informational Items

Facilities still face significant challenges in meeting seismic compliance deadlines, particularly those in SPC-1 and SPC-2 categories.

Continued efforts are needed to ensure that facilities upgrade their non-structural components to meet the 2030 deadline.

These programs are critical in supporting facilities that might otherwise struggle to achieve seismic compliance.

Action Items

- Monitor SPC and NPC Compliance: The unit will continue to monitor and assist facilities in meeting the seismic and non-structural compliance deadlines.
- Advance Pre-Approval Processes: The Structural Support Unit will work to streamline the pre-approval process, particularly in light of new code requirements.
- Expand Seismic Instrumentation: The unit will continue to expand the seismic instrumentation program, focusing on high-risk areas.

Dr. Lobo Roy concluded the update by acknowledging the ongoing challenges in seismic compliance but expressed confidence that with continued effort and support, more facilities will meet the required standards. The Structural Services Section remains committed to ensuring the safety and resilience of California's healthcare infrastructure.

15. HBSB Chair and Vice-Chair Election

Facilitator: Louise Belair, Board Chair

Louise Belair initiated the election process for the HBSB Chair and Vice-Chair positions, noting that the Board was prepared to move forward with the election after a brief break in the meeting. She handed over the facilitation of the election process to Michael Foulkes, who oversaw the proceedings.

1. Nominations:

- Michael Foulkes formally moved to nominate Jim Malley as the incoming Chair of the Board and Scott Mackey as the incoming Vice-Chair. This

1 nomination was made as a slate, meaning both individuals were proposed
2 and voted on together as a package.

- 3 ○ Teresa Endres, a Board member, seconded the motion, officially placing it
4 before the Board for discussion and a vote.

5 **Discussion:**

6 After the nominations were made, Louise Belair opened the floor for any comments or
7 discussions from the Board members or the public. However, there were no additional
8 comments or objections raised during this period.

9 Louise Belair reiterated that the motion was to elect Jim Malley as Chair and
10 Scott Mackey as Vice-Chair, with their terms set to begin on January 1, 2025.

11 **2. Voting:**

- 12 ○ The motion was put to a vote, with Louise Belair asking all those in favor
13 to say "aye." The motion was passed with unanimous approval from those
14 present, except for Scott Mackey, who abstained from voting due to his
15 involvement in the election.

16 **3. Result Announcement:**

- 17 ○ Following the successful vote, Louise Belair congratulated Jim Malley and
18 Scott Mackey on their upcoming roles as Chair and Vice-Chair,
19 respectively. She noted that their terms would last for two years, beginning
20 in January 2025. Louise Belair expressed confidence in their leadership
21 and thanked the committee responsible for overseeing the nominations
22 and election process.

23 24 **Informational and Action Items**

25 **• Informational Items:**

- 26 ○ The new leadership for the Board will officially begin their roles on January
27 1, 2025. The current Chair, Louise Belair, noted that she was pleased to
28 hand over the responsibilities to Jim Malley and Scott Mackey, expressing
29 trust in their capabilities to lead the Board.
- 30 ○ The election process was straightforward, with clear support from the
31 Board members and no public objections or concerns raised during the
32 meeting.

33 **• Action Items:**

- 34 ○ The transition to the new Chair and Vice-Chair will be prepared over the
35 coming months to ensure a smooth handover of responsibilities.

- The Board will likely hold a subsequent meeting closer to the end of the year to finalize any remaining details regarding the transition of leadership.

16. Comments from the Public/Board Members on issues not on this agenda

Facilitator: Louise Belair, Board Chair

Louise Belair opened the floor for any final comments or questions from both the public and board members regarding issues not specifically listed on the agenda. She acknowledged that it had been a long day but emphasized the importance of addressing any additional concerns or observations before the meeting adjourned.

9 Comments and Input

10 1. Acknowledgment of Staff Efforts:

- Louise Belair took the opportunity to thank the staff, particularly Evett Torres and Marcus Palmer, for their efforts in preparing and facilitating the meeting. She praised them for ensuring that the meeting ran smoothly and for arranging lunch for the attendees, which she noted as a thoughtful gesture that contributed to the positive atmosphere of the meeting.

17 2. Additional Public Comments:

- There were no further comments or questions from the public.

19 3. Board Members' Comments:

- There were no further comments or questions from the board members.

21 Informational Items

The recognition of the staff's contributions highlighted the importance of their behind-the-scenes work in ensuring the success of the meeting. This serves as a reminder of the critical role that support staff play in the functioning of such meetings.

25 Action Items

- None.

Louise Belair expressed her gratitude to everyone for their participation and contributions throughout the day, ensuring a productive and efficient meeting.

29

30 Comments from the public/board members not on this agenda

31 *Facilitator: Louise Belair, Board Chair*

- None.

32

1

2 **17. Adjournment**