



2020 West El Camino Avenue, Suite 800  
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hcai.ca.gov



**HOSPITAL BUILDING SAFETY BOARD  
Full Board Meeting and Leadership  
Training for Board Members**

**Thursday, April 20, 2023  
10:00 a.m. – 4:00 p.m.**

**Teleconference Meeting Access:  
[HBSB Teams SNRS Committee](#)**

**Appointed Members Present**

Louise Belair, Chair  
Scott Jackson, Vice Chair  
Cody Bartley  
David Bliss  
Bruce Clark  
Deepak Dandekar  
Gary Dunger  
Michael Foulkes  
John Griffiths  
David Khorram  
Michele Lampshire  
Marshall Lew  
Scott Mackey  
Jim Malley  
Farzad Naeim

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

Bert Hurlbut  
Michael O'Connor

**Ex-Officio Members Present**

Elizabeth Landsberg, HCAI Director  
Chris Tokas, FDD Deputy Director  
Nathaniel Gilmore, Department of Public  
Health (Delegate)  
Mia Mavelli, BSC Executive Director  
Jennifer Thornburg, State Geologist  
(Delegate)

**HCAI Staff Present**

Richard Tannahill  
Arash Altoontash  
Mike Hooper  
Roy Lobo  
David Neou  
Carl Scheuerman  
Jamie Schnick  
Ali Sumer  
Nanci Timmins  
John Gray, Attorney

**HBSB Staff Present**

Ken Yu, Executive Director  
Evet Torres

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

2 Louise Belair, Board Chair, called the meeting to order on April 20, 2023, at 10:00 a.m.,  
3 and HBSB Executive Director Ken Yu called roll.

4  
5 **2. Roll Call and Meeting Advisories/Expectations**

6 Eight members of the Board present constituted a quorum. There being fifteen present at  
7 the time of roll, a quorum was established.

8  
9 Mr. Yu read the public announcement regarding COVID-19, meeting rules, expectations,  
10 and procedures.

11  
12 **3. Department of Health Care Access and Information (HCAI) Update**

13 **Presenter:** Elizabeth Landsberg, HCAI Director

14  
15 Ms. Landsberg reported that many hospitals are facing financial challenges, especially  
16 some of the smaller and independent non-profits. After meeting with CEOs, a lot of their  
17 concerns centered around inflationary realities such as:

- 18 • Workforce cost
- 19 • Medical supply cost
- 20 • Prescriptions drug costs
- 21 • Seismic safety
- 22 • Medi-Cal rates

23  
24 Ms. Landsberg explained that under AB 412, there is new legislation to create a  
25 distressed hospital loan program, administered between HCAI and California Healthcare  
26 Facilities Financing Authority (CHFFA). The bill would allow HCAI to turn the loan into  
27 loan forgiveness and create more of a grant program, including if the funds were needed  
28 for seismic compliance.

29  
30 Ms. Landsburg stated that she was proud of the team for launching the Small and Rural  
31 Relief Program this week. Ten percent of the proceeds from the new e-vape tax are  
32 coming into HCAI, specifically for the Small and Rural Hospital Relief Program.

33  
34 Ms. Landsburg reported that HCAI has entered a contract with Civica RX for three  
35 biosimilar insulin products at a transparent, affordable price. This was negotiated by  
36 HCAI staff.

37  
38 Ms. Landsburg also reported that the Office of Healthcare Affordability had launched,  
39 and the first board meeting was on March 25th. The second board meeting would be  
40 next week. They are very active with members of the public and with their eight board  
41 members.

1 Ms. Landsburg commented on the budget, stating that in January, the Department of  
2 Finance was projecting a \$22 billion dollar deficit with proposed cuts. Impacting HCAI are  
3 proposed delays with some workforce investments and there are stakeholder concerns.  
4 The next step is the May revision of the budget.

5  
6 Ms. Landsburg recognized HSBS member Mike Hooper, Hospital Inspector of Record  
7 Representative. Mr. Hooper served:

- 8 • Four years on the Technology and Research Committee
- 9 • Four years on the Energy Conservation and Management Committee
- 10 • Six years on the Structural and Nonstructural Regulations Committee
- 11 • Eight years on the Codes and Processes Committee
- 12 • As the Chair of the Education and Outreach Committee for eight years, he  
13 spearheaded four hugely successful HCAI HBSB seminars and was a subject  
14 matter expert and presenter for the “Building Relationships for a Successful  
15 Project” and the “Remodel Plus” seminars.

16 Mike joined HCAI on March 20, 2023, as a Compliance Officer in OSHPD’s Inspections  
17 Services Unit.

18  
19 **Discussion and input**

- 20 • None

21  
22 **Information and Action item**

- 23 • None

24  
25 **4. Bagley-Keene Open Meeting Act Requirements**

26 **Presenter:** John Gray, HCAI Attorney

27  
28 Mr. Gray declared that prior to the pandemic, Gov. Code 11123 governed in-person  
29 meetings and requires that:

- 30 • The meeting shall be audible to the public at all locations.
- 31 • Each location shall be identified in the meeting notice.
- 32 • An agenda shall be posted at each location.
- 33 • Each location shall be accessible to the public.
- 34 • All votes shall be by roll call.
- 35 • Public report of any action taken and vote, or abstention, for each member.
- 36 • At least one member of the state body shall be present at locations listed on the  
37 meeting notice.
- 38 • The public shall have the opportunity to address the meeting prior or during the  
39 discussion or considerations of an agenda item.
- 40 • Locations that follow the above requirements can be connected via  
41 teleconference.

1 Mr. Gray stated that SB189 established Government Code §11133 which suspended  
2 Section §11123, requiring meeting locations be open to the public. It also suspended  
3 requirements that the agenda be posted at each location, and that each location be  
4 posted on the meeting agenda. This allowed for meetings to be conducted exclusively  
5 via teleconference. This will expire on July 1, 2023.

6  
7 Mr. Gray explained that prior to the pandemic, there was a procedure for hosting  
8 meetings exclusively via teleconference that was governed by §11123.5.

- 9 • This provides requirements for fully remote public meetings after July 1, 2023.
- 10 • It applies only to advisory boards, not the full board.
- 11 • Requires that if at any point the remote connection is lost, the meeting must  
12 adjourn and reconvene later.

13  
14 Mr. Gray commented that the legal office strongly recommends that following the  
15 expiration of §11133, we return to having board members attend in-person only, at the  
16 Sacramento or L.A. location.

17  
18 Mr. Gray disclosed that bill SB 544 is currently being considered by the Legislature. This  
19 would allow for fully teleconferenced public meetings under §11123, but would not go  
20 into effect until 2024, at the earliest.

## 21 22 **Discussion and input**

23 Ms. Belair asked if all board members need to be in one location for the next board  
24 meeting in August. Mr. Gray responded that they don't need to be in one location, they  
25 must be at one of the locations listed on the agenda and those locations must be open to  
26 the public.

27  
28 Mr. Gray commented that there may have previously been some confusion in the legal  
29 office about consolidating into one location. Legal thought that the meeting may have to  
30 adjourn due to an issue with the teleconference, applied to §11123, but it does not. If  
31 there's an issue with the teleconference between the two locations of Sacramento and  
32 the Los Angeles office, the meeting would not have to adjourn in the same way.

33  
34 Mr. Clark asked if this was the case for committee meetings as well. Mr. Gray responded  
35 in the affirmative.

36  
37 Mr. Dandekar asked that if Los Angeles loses connection, would there have to be a  
38 quorum in the Sacramento office in order for the meeting to continue. Mr. Gray  
39 responded in the affirmative but clarified that the difference is that the meeting can  
40 continue if the two locations can be reconnected. Under the other section, if connection  
41 is lost the meeting must be adjourned immediately. That was the reason why the Legal  
42 Office strongly recommended continuing under §11123.

1 Mr. Gray restated that this was how meetings were conducted prior to the pandemic.

2  
3 **Information and Action item**

- 4 • None

5  
6 **5. Overview and approval of the December 7-8, 2022, Full Board draft Meeting**  
7 **Report/Minutes**

8 **Presenter:** Louise Belair, Board Chair

9  
10 Ms. Belair stated the meeting was December 7-8, 2022. The meeting was in  
11 Sacramento, some members were virtual, and some members were in-person.

12  
13 Topic 1: Welcome and introductions

14  
15 Topic 2: Roll Call and Meeting Advisories/Expectations

16  
17 Topic 3: HCAI Update - Presented by Ms. Landsburg, HCAI Director:

- 18 • Swearing in of Gary Dunger, Hospital Facilities Manager Representative  
19 • Recognition of outgoing HBSB member, Bruce Rainey, Hospital Facilities  
20 Manager Representative  
21 • HCAI will be launching the Office of Healthcare Affordability  
22 • HCAI will be overseeing CalRX Biosimilar Insulin Initiative

23  
24 Topic 4: Overview and Approval of August 11, 2022, Full Board draft Meeting  
25 Report/Minutes - Presented by Ms. Belair, Board Chair:

- 26 • Swearing in of two new Board Members: Cody Bartley and John Griffiths  
27 • Recognition of outgoing Board Members: Pete Kreuser and Roy Lopez.  
28 • HBSB Chair and Vice Chair election  
29 • Committees Report Overview and Approval: Instrumentation, Codes and  
30 Processes, Education and Outreach, Energy Conservation and Management, and  
31 Structural and Nonstructural Regulations  
32 • FDD, Inspection Services Unit, Building Standard Unit, Structural Services  
33 Section, and Fire Prevention Unit Updates and highlights were reviewed.

34  
35 Topic 5: Instrumentation Committee - Presented by Marshall Lew, Committee Chair:

- 36 • Overview and approval of July 5, and September 29, 2022, draft Meeting  
37 Report/Minutes:  
38 ○ July 5: Discussion and editing of the White Paper  
39 ○ September 29: Gathering of comments from committee members and public  
40 participants on the draft White Paper to produce final draft  
41 • Overview of October 27, 2022, Meeting:

- 1           ○ Annual update to the Committee regarding California Strong Motion
- 2           Instrumentation Program.
- 3           ○ Review of FY - 2021-22 HCAI/CSIMP Hospital Instrumentation Annual Report.
- 4           ○ Final draft of the White Paper was reviewed and edited.

5

6 Topic 6: Technology and Research Committee - Presented by Michael Foulkes,  
7 Committee Chair:

- 8           ● Overview and Approval of July 27, and November 1, 2022, draft Meeting  
9           Report/Minutes:
  - 10           ○ July 27: Four presentations:
    - 11           ▪ Cyber security protection - CONCEAL
    - 12           ▪ RIB iTwo 4.2 software
    - 13           ▪ NPC-5 water and sewage holding tanks
    - 14           ▪ Electricity - an all-electric campus case study
  - 15           ○ November 1: Four topics were discussed:
    - 16           ▪ Inflation Reduction Act
    - 17           ▪ Decarbonization of power generation transportation
    - 18           ▪ Microsoft HoloLens2
    - 19           ▪ Committee goals for 2023

20

21 Topic 7: Education and Outreach Committee - Presented by Mike Hooper, Committee  
22 Chair:

- 23           ● Overview and Approval of August 17, and October 19, 2022, draft Meeting  
24           Report/Minutes:
  - 25           ○ August 17: Topics discussed:
    - 26           ▪ Eight webinar topics
    - 27           ▪ Discussion and planning 2023 seminar
  - 28           ○ October 19: Topics discussed:
    - 29           ▪ Eight webinar topics
    - 30           ▪ Discussion and planning 2023 seminar
    - 31           ▪ Committee goals for 2023

32

33 Topic 8: Energy Conservation and Management Committee - Presented by  
34 Scott Jackson, Committee Chair:

- 35           ● Overview and Approval of October 4, 2022, draft Meeting Report/Minutes:
  - 36           ○ Seven topics discussed:
    - 37           ▪ Code updates for 2023 AB 2511, CEC 210, CEC 517.30, and CEC 417.42
    - 38           ▪ Microgrid solutions
    - 39           ▪ Opportunities for operational cost saving
    - 40           ▪ Introduction to Innovus Power and Microgrid solution
    - 41           ▪ Introduction to HOMER Energy

- 1           ▪ The unprecedented heatwave experienced in September 2020, at Kaiser
- 2            Permanente
- 3           ▪ Topics for 2023

4  
5 Topic 9: Joint Meeting of the Codes and Processes Committee, Energy Conservation  
6 and Management Committee, and Technology and Research Committee - Presented by  
7 Michael O'Connor, Codes and Processes Committee Chair:

- 8       • Overview and Approval of the November 1, 2022, Joint Committee draft Meeting  
9        Report/Minutes:
  - 10      ○ Topic Discussed:
    - 11          ▪ AB 2511, which requires SNFs (Skilled Nursing Facilities) to have an
    - 12            alternative source of power located on site to provide for at least 96 hours
    - 13            of alternative power to maintain availability of life-saving equipment and
    - 14            maintain oxygen-generating devices in the event of a power outage
    - 15          ▪ Bill requires facilities to comply with the requirements by January 2024

16  
17 Topic 10: Special Presentation: Healthcare Delivery Quadrangle - Presented by  
18 David Bliss, Board Vice Chair:

- 19       • Healthcare quadrangle: clinicians, payors, facilitators/systems, and regulation
- 20       • Without regulators, more preventable errors in hospitals would occur.
- 21       • Payors payment options presented
- 22       • Payment model solutions could help reduce inflated cost of healthcare.
- 23       • Upward pressure on cost, various causes may impact ability for hospitals to
- 24        remain in operation
- 25       • Healthcare work increase/mounting pressure factors

26  
27 Topic 11: Bagley-Keene Open Meeting Act and its Requirements for the Board -  
28 Presented by James Yi, HCAI Attorney:

- 29       • Review of the Bagley-Keene Open Meeting Act.

30  
31 Topic 12: Review and Approve 2023 Committee Assignments, Goals, and Meeting  
32 Calendar - Presented by Louise Belair, Board Chair.

33  
34 Topic 13: OSHPD Update - Presented by Chris Tokas, OSHPD Deputy Director:

- 35       • FDD was elevated to an office with the enactment of the 2021-22 California
- 36        Budget Act.
- 37       • Presented OSHPD top 3 objectives.
- 38       • Recognition of Roy Lobo who was awarded the 2022 Frederick Panhost Award.
- 39       • Small Rural Hospital Relief program (SRHR) update
- 40       • Highlighted AB 2511 HCAI efforts for SNFs to comply successfully

- 1 • OSHPD prepared PIN 75 for AB 1882; the proposed code change would be
- 2 included in the intervening code cycle.
- 3 • Public notices and annual status update report on seismic compliance programs
- 4 • Report on fires and earthquake that occurred in the fall of 2022
- 5 • Blackberry AtHoc software report
- 6 • OSHPD Objectives for 2023: Recruitment/succession, web page redesign,
- 7 develop integrated eTIO in eServices Portal.

8

9 Topic 14: Electronic Services Update - Presented by Rob Fisher, HCAI Compliance  
10 Officer:

- 11 • Report on the eServices accomplishments in 2022

12

13 Topic 15: Inspection Services Unit Update - Presented by Joe LaBrie, HCAI Inspection  
14 Services Unit Supervisor:

- 15 • Review of the Inspection Services Unit activities

16

17 Topic 16: Building Standards Unit Update - Presented by Richard Tannahill, OSHPD  
18 Deputy Division Chief:

- 19 • Updated on Building Standards Unit coordination activities with:
  - 20 ○ CDPH
  - 21 ○ CAC (Clinic Advisory Committee)
  - 22 ○ CAF (California Association of Health Facilities)
- 23 • Update on Building Standards Unit presentations at AIA chapters meeting,  
24 webinars
- 25 • Information about new PINs rolled-out in 2022

26

27 Topic 17: Structural Services Update - Presented by Roy Lobo, HCAI Principal Structural  
28 Engineer:

- 29 • Mr. Sumer gave a report on the Seismic Compliance Program.
- 30 • Update on Structural Service Unit activities
- 31 • PIN 58 update has been published on HCAI's website.

32

33 Topic 18: Fire Prevention Unit Update - Presented by Nanci Timmins, HCAI Chief Fire  
34 Life Safety Officer:

- 35 • 2022 code changes have been submitted and are already in print.
- 36 • Review of Fire Prevention Unit various training activities participation in the  
37 industry
- 38 • Presentation of a list of committees that the unit participates in

39

40 Ms. Belair stated there were no comments from the public/board members not on the  
41 agenda. The meeting was adjourned on December 8, 2022, at approximately 2:42 p.m.

1 Ms. Belair stated there were eight motions as part of the Full Board meeting:

- 2 • Motion 1: The Board unanimously voted to approve the August 11, 2022, Full  
3 Board draft Meeting Report/Minutes with corrections.
- 4 • Motion 2: The Board unanimously voted to approve the July 5, and September 29,  
5 2022, Instrumentation Committee draft Meeting Report/Minutes as presented.
- 6 • Motion 3: The Board unanimously voted to accept the final White Paper on the  
7 Benefits of Strong Motion Instrumentation.
- 8 • Motion 4: The Board unanimously voted to approve the July 27, and November 1,  
9 2022, Technology and Research Committee draft Meeting Report/Minutes as  
10 presented.
- 11 • Motion 5: The Board unanimously voted to approve the August 17, and October  
12 19, 2022, Education and Outreach Committee draft Meeting Report/Minutes with  
13 corrections.
- 14 • Motion 6: The Board unanimously voted to approve the October 4, 2022, Energy  
15 Conservation and Management Committee draft Meeting Report/Minutes as  
16 presented.
- 17 • Motion 7: The Board unanimously voted to approve the November 1, 2022, Joint  
18 Committee draft Meeting Report/Minutes as presented.
- 19 • Motion 8: The Board unanimously voted to adopt and approve the committee  
20 goals, rosters, and meeting dates for 2023 as discussed.

## 21 22 **Discussion and input**

23 Mr. Schnick recommended that topic 9, page 15, line 19 should be corrected to read:  
24 “power to maintain safe temperatures, availability of life-saving equipment.”  
25

## 26 **Information and Action item**

- 27 • None

## 28 29 **MOTION: [Mackey/Naeim]**

30 The Committee voted unanimously to approve the draft Meeting Report/Minutes with  
31 corrections.  
32

## 33 **6. Codes and Processes Committee**

34 **Presenter:** Michael O’Connor, Committee Chair  
35

36 Mr. O’Connor stated the meeting was held October 13, 2022, and there were two topics.  
37 The 2022 Intervening Code Adoption Cycle:

- 38 • Topic 1: Amendments to the code. The code will not become effective until July  
39 2024, however, the publication is January 24, and amendments needed to be  
40 submitted by 12/22 to the Building Standards Commission.

- 1 Focused codes were:
- 2 ○ Part 1, California Administrative Code
- 3 ○ Part 2, California Building Code
- 4 ○ Part 3, California Electrical Code
- 5 ○ Part 4, California Mechanical Code
- 6 ○ Part 5, California Plumbing Code
- 7 ○ Part 10, Existing Building Code
- 8 ● Topic 2: Committee goals for 2023, discussed:
- 9 ○ Update CANs and PINs to code (ongoing).
- 10 ○ Mental health jurisdiction flowchart and guide.
- 11 ○ TIO Program: virtual/offsite inspections.
- 12 ○ Develop standards for a behavioral health observation unit.
- 13 ○ Evaluate and articulate detailed building standards for SNFs.
- 14 ○ Emergency Design Guide.
- 15 ○ Title 24, Part 3, 4, and 5:
- 16     ▪ NPC-5 Water, Sewer storage requirements - addressed by PIN 73
- 17     ▪ Identify code modifications to support Part 6 implementation of energy
- 18         saving measures
- 19     ▪ Revisit MEP systems inspections requirements
- 20     ▪ Revisit Fire Protection drawing stamping requirements per MEOR
- 21     ▪ Ventilation Table Standard Format

22

23 Mr. O'Connor stated there was one motion:

- 24 ● Motion 1: The Board unanimously voted to approve and move forward with the
- 25     proposed Building Standard Code (BSC) revisions for the 2022 intervening cycle
- 26     allowing modifications.

27

28 **Discussion and input**

- 29 ● None

30

31 **Information and Action item**

- 32 ● None

33

34 **MOTION: [O'Connor/Khorram]**

35 The Committee voted unanimously to approve the draft Meeting Report/Minutes as

36 presented.

37

38 **7. Instrumentation Committee**

39 **Presenter:** Marshall Lew, Committee Chair

40

41 Mr. Lew stated the meeting was held on October 27, 2022. There was not a meeting

42 report at the time, however, a summary of the meeting was given. Topics discussed:

- 1       • Annual update to the Committee on HCAI Hospital Instrumentation in  
2 collaboration with the California Strong Motion Instrumentation Program (CSIMP):  
3       ○ Review of Hospital Instrumentation for FY20-FY22 (not FY20-FY24 as stated  
4 in the binder):  
5       ▪ Owner-Paid Required Instrumentation:  
6           □ New Buildings. Specific requirements due to different technologies used  
7 that are experimental, not in the code, or need more instrumentation to  
8 understand the behaviors.  
9           □ Upgrades to existing builds using certain Alternate Means of  
10 Compliance (AMC).  
11       ▪ HCAI-funded Instrumentation (Kaiser Downey Hospital Tower, Marin  
12 General Hospital, and St. Bernardine Hospital).  
13       ▪ Completed - three, In progress - nine, Newly Approved - four  
14       ▪ Instrumentation upgrades needed for some older installations (recorders  
15 and sensors). Many hospitals were instrumented in the past, but the  
16 equipment is becoming obsolete and hard to repair/replace.
- 17       • Discussion and editing of the draft white paper, “The Benefits of Strong-Motion  
18 Instrumentation in Hospital Facilities”, facilitated by Marshall Lew, Committee  
19 Chair.  
20       ○ Review of Draft of White Paper  
21       ○ Modifications of Draft White Paper  
22       ○ Dr. Naeim and Mr. Lew to complete changes agreed to in the committee  
23 meeting for the finalized draft of the White Paper in collaboration with HCAI  
24 staff review prior to submission to HBSB in the December 2022 meeting.

25  
26 Mr. Lew stated there was 1 motion:

- 27       • Motion 1: The Board unanimously voted to accept the final White Paper on the  
28 Benefits of Strong Motion Instrumentation in the December 7, 2022, meeting.

29  
30  
31 **Discussion and input**

32 Mr. Lew mentioned that the White Paper had not been distributed yet but would be soon  
33 to various target audiences. From then will be seen what the next steps are for follow up  
34 to provide more information or education.

35  
36 Ms. Belair commended the Committee for their hard work on the paper and asked if  
37 there were any additional steps required.

38  
39 Mr. Tokas commented, it is a paper much needed in the community. It illustrates the  
40 need for instrumentation and the benefit to the society.

41  
42

1 **Information and Action item**

- 2 • None

3  
4 **MOTION: [Lew/Mackey]**

5 The Committee unanimously voted to accept the Instrumentation Committee draft  
6 Meeting Report/Minutes dated October 27, 2022, as presented.

7  
8 **8. Structural and Nonstructural Regulations Committee**

9 **Presenter:** Jim Malley, Committee Chair

10  
11 Mr. Malley stated the meeting was held on November 7, 2022. Topics discussed:

- 12 • Topic 1: Discussion on HCAI PIN AB 1882, Hospitals: Seismic Safety:
- 13 ○ AB 1882 requires that on 1/1/2024 and annually thereafter, hospital owners
  - 14 submit an annual status update on the Structural Performance Category
  - 15 ratings of the buildings. Acute care hospitals that do not meet the seismic
  - 16 safety standard by July 2023, are required to put a public notice in the lobby or
  - 17 waiting area to notify the public. They must report to the following:
    - 18 ▪ The county board of supervisors in whose jurisdiction the building was
    - 19 located.
    - 20 ▪ The city council.
    - 21 ▪ Any labor union representing workers who work in the building that does
    - 22 not comply with seismic safety regulation.
    - 23 ▪ The board of directors of a district or joint power agency that provides fire
    - 24 and emergency medical services in the hospital building’s jurisdiction.
    - 25 ▪ HCAI department.
    - 26 ▪ The board of directors of the hospital.
    - 27 ▪ The local office of emergency services or equivalent agency.
    - 28 ▪ The Office of Emergency Services.
    - 29 ▪ The medical health operational area coordination.
- 30 ○ The law requires SPC-2 and NPC-5 buildings to include the following
- 31 identification:
- 32 ▪ On the title sheets of construction drawings and specifications, the
  - 33 following documents and/or forms were excluded:
    - 34  Amended construction documents (ACD)
    - 35  Request for information (RFI)
    - 36  Calculations and Testing, Inspection and Observation (TIO)
- 37 ○ There was discussion and input by the Committee. HCAI staff will consider the
- 38 suggestions made by the Committee Members.
- 39 ○ The PIN will be published in early December 2022.
- 40 • Topic 2: Proposed Amendments to the 2022 California Administrative Code, Title
- 41 24, Part 1, Chapter 6 on Small and Rural Hospital Relief Program:

- 1           ○ The program was a grant program administered by the Office of Health Facility
- 2           Loan Insurance (OHFLI) for qualified hospitals to seek funding for seismic
- 3           safety compliance projects.
- 4           ○ 11 hospitals had initiated application for program admission. Three had
- 5           revised compliance plans, which had been approved. Eight were pending
- 6           compliance plan submission status.
- 7           ○ Title 24 proposed language:
- 8           ▪ Define “Integrated Review” as applied to retrofit scheme development.
- 9           ▪ Bring revised compliance plan requirements into code, applicable to all
- 10          facilities.
- 11          ▪ Create provision in code for SRHRP and any subsequent funding program.
- 12          ○ PIN 71 added enabling language on State Grant Programs to state that the
- 13          State of California may establish programs that provide grant funding for
- 14          general acute care hospitals to advance seismic safety.
- 15          ○ The OHFLI determined that for a hospital to be eligible for the State Grant
- 16          Program, it has to be:
- 17          ▪ Small Hospitals.
- 18          ▪ Rural Hospitals.
- 19          ▪ Critical Access Hospitals.
- 20          ▪ Compliance imposes a financial burden on the applicant that may result in
- 21          hospital closures.
- 22          ▪ The hospital closures would impact health care access in the communities
- 23          surrounding the hospitals.
- 24          ○ Another enabling language was integrated review for seismic compliance. The
- 25          purpose was to provide technical assistance to a hospital project team to
- 26          develop a cost-efficient structural or nonstructural seismic retrofit program.
- 27          ○ Discussion and input were provided by the Committee.
- 28          ● Topic 3: Committee Goals for 2023:
- 29          ○ Progress on the 2022 Committee Goals:
- 30          ▪ Support HCAI with review of code changes (ongoing).
- 31          ▪ Support HCAI with review of new/revised PINs, CANs, and OPDs
- 32          (ongoing).
- 33          ▪ Implementation of SPC-4D and NPC-4D (goal was removed).
- 34          ▪ Issues regarding repurposing hospital buildings (ongoing).
- 35          ▪ Develop pre-approved details (moved to 2023 goal).
- 36          ▪ Revisit NPC-5 requirements (goal was removed).
- 37          ○ Potential Committee Goals for 2023:
- 38          ▪ Seismic compliance issues related to NPC-3, NPC-4D, and NPC-5.
- 39          Streamlining the process for compliance to meet the statutory and
- 40          regulatory deadline.
- 41          ▪ Review of Code amendments that are not obsolete as those issues have
- 42          been addressed in the model code.

- 1           ▪ Develop and implement procedures and enforceable building standards to
- 2           ensure safe and sustainable healthcare facilities.
- 3           ▪ New products, materials, and methods that would benefit the public by
- 4           early adoption rather than wait for their incorporation in the building code.
- 5           ▪ Increase IOR competency.
- 6           ▪ Implementation of the Small and Rural Hospital Relief Program, increase
- 7           technical assistance and awareness.
- 8           ▪ Implementation of AB 1882 requirements. Reach out to stakeholders via
- 9           seminars and webinars to raise awareness.
- 10          ▪ Training and outreach to industry, code changes and tips for working with
- 11          HCAI. In-person training meetings was highly suggested.

12

13 Mr. Malley stated there were two motions:

- 14          • Motion 1: Unanimous vote to approve the draft PIN related to AB 1882.
- 15          • Motion 2: Unanimous vote by the Committee to endorse the action for the
- 16          adoption of proposed regulation as it related to SB 395.

17

### 18 **Discussion and input**

19 Mr. Griffiths asked if there would be any changes in seismic performance resulting from  
20 the state going from historic drought to historic rainfall. And if so, was this something that  
21 the board should consider. Mr. Tokas replied that subsidence was being monitored in  
22 various parts of the state, but that there was no direct correlation between drought and  
23 earthquakes. Mr. Tokas added that when it came to changes in the substrate or  
24 geological conditions, those changes were constantly being monitoring for activity.

25

26 Ms. Thornburg commented that the significant rainfall causes flooding and landslides.  
27 Landslides were expected to increase through the summer months, but that a significant  
28 correlation with seismicity had not been seen.

29

30 Mr. Sumer commented that regarding drought, hospitals are required to have water  
31 storage, and that those requirements would not be changing.

32

33 Ms. Belair commented that page 51 of the meeting binder, line 32, topic 4, should read  
34 that Mr. Scheuerman was the presenter, not Mr. Sumer.

35

36

### 37 **Information and Action item**

- 38          • None

39

### 40 **MOTION: [Malley/Dandekar]**

41 The Committee unanimously voted to accept the Meeting Report/Minutes from the  
42 Structural/Nonstructural Regulations Committee on November 7, 2022, with corrections.

1 **9. Ad HOC Board Procedures Committee**

2 **Presenter:** Michael Foulkes, Committee Chair

3  
4 Mr. Foulkes stated the meeting was held on November 18, 2022. Topics discussed:

- 5
- 6 • Joint Committee meetings:
    - 7 ○ The Committee helped with a topic last year that needed an immediate
    - 8 resolution. There was a legal comment regarding Bagley-Keene related to the
    - 9 Joint Committee meeting, and fact that there was a majority of the Board
    - 10 present between those two committees. There was a discussion with HCAI
    - 11 Legal and with Board Members on how we treat those going forward:
      - 12 ▪ When most of the Board will be present at a meeting, those meetings will
      - 13 constitute a full board meeting.
  - 14 • HBSB Leadership training for Committee Chairs/Vice Chairs:
    - 15 ○ With COVID there has not been as much training as in the past.
    - 16 ○ The discussion was if it be a standalone meeting or something that is
    - 17 incorporated into a board meetings
    - 18 ○ Because members are still allowed to meet remotely while still having two
    - 19 meeting locations, it was decided to add it to the full board meeting.
    - 20 ○ Training would be a refresher for all chairs and vice-chairs, not just the new
    - 21 ones.
    - 22 ○ Being able to run a quality meeting, have a quality agenda, and make sure the
    - 23 goals are clearly stated are important.

24 Mr. Foulkes stated there were no motions made at this meeting.

25  
26 Mr. Foulkes communicated the next steps for the Ad HOC Committee:

- 27
- 28 • Monitoring of SB 544 by Senator Laird from Santa Cruz:
    - 29 ○ This would permanently allow remote meetings to happen in California,
    - 30 making sure the public still has adequate access. If the bill passes and is
    - 31 signed, an Ad HOC Committee meeting will be held in the fall to adjust the
    - 32 internal policies and procedures to meet the requirement.

33 **Discussion and input**

- 34
- 35 • None

36 **Information and Action item**

- 37
- 38 • None

39 **MOTION: [Foulkes/Mackey]**

40 The Committee unanimously voted to approve the Meeting Report/Minutes from  
41 November 18, 2022, Ad HOC Board Procedures Committee.

1 **10. Education and Outreach Committee**

2 Presenter: Scott Mackey, Committee Chair

3  
4 Mr. Mackey commented that he had taken the role of Committee Chair, so the Vice Chair  
5 position was currently vacant.

6  
7 Mr. Mackey stated two meetings were held on January 18, 2023, and March 8, 2023.

8 Topics discussed:

- 9 • Webinar topics:
  - 10 ○ Offsite fabrication/pre-assembled components:
    - 11 ▪ This is an ever advancing and increasing popular method of construction
    - 12 assembly that is being done offsite, with preassembled components. There
    - 13 are challenges associated with reviewing that process and those materials
    - 14 prior to arriving on the jobsite and being incorporated into construction
    - 15 projects.
  - 16 ○ California Administration Code
  - 17 ○ Policy Intent Notice (PIN) 50: Integrated Review
  - 18 ○ Emergency Process Design Guidelines
  - 19 ○ OSHPD 3 Clinics presentation:
    - 20 ▪ This will help answer questions and clarify issues and concerns by public
    - 21 members about how that process is handled.
  - 22 ○ Testing, Inspection and Observation Program (TIO):
    - 23 ▪ This was completed in November 2022, on the electronic version of the
    - 24 TIO program. It was well received and it was recommended that it be
    - 25 repeated this year.
  - 26 ○ PINs and CANs (CAN 2-508): In the works.
  - 27 ○ Planning and development of the 2023 seminar:
    - 28 ▪ Guide for working on HCAI projects, Tips From the Experts.
  - 29 ○ Continue to establish curriculum and calendar dates for 2023 events.

30  
31 Mr. Mackey stated there were no motions made at the January 18, 2023, meeting.

32  
33 Mr. Mackey stated that there was one motion made at the March 8, 2023, meeting:

- 34 • Motion 1: Unanimous vote to approve the January 8, 2023, meeting  
35 Report/Minutes.

36  
37 **Discussion and input**

- 38 • None

39  
40 **Information and Action item**

- 41 • None

1 **MOTION: [Mackey/Jackson]**

2 The Committee unanimously voted to approve the meeting Report/Minutes from January  
3 18, 2023, and March 8, 2023, Education and Outreach Committee.

4  
5 **11. OSHPD Update**

6 **Presenters:** Chris Tokas, OSHPD Deputy Director, and Ali Sumer, OSHPD Seismic  
7 Compliance Unit Supervisor

8  
9 Mr. Tokas cited HCAI's mission statement and commented on the values and  
10 achievements of the organization. He remarked that it takes the entire HCAI organization  
11 with all their components to collaborate and deliver to the people of the State of  
12 California, the level of health care they expect.

13  
14 Mr. Tokas commented that the operative word in risk management communities was  
15 'resilience.' HCAI has been a leader in earthquake safety along with its Seismic Safety  
16 Program. He said it is an organization that is always looking to expand experience and  
17 knowledge to fuel its growth.

18  
19 Mr. Tokas noted that Judy LaMarsh, a trailblazer for women's rights, who helped  
20 establish programs such as Medicare in Canada, once said, "Out of disaster, comes real  
21 progress". Using the worldwide laboratory created by earthquakes, HCAI's action has  
22 been to gain knowledge from earthquake disasters that occur annually around the world  
23 and adapt and implement policies that will facilitate its own disaster resilience.

24  
25 Mr. Tokas stated that California had a history of strong earthquakes and that the most  
26 prone areas are also the most heavily populated. Building design and construction has  
27 evolved because of lessons learned in damaging earthquakes. He noted that the Field  
28 Act was created after the 1933 Long Beach earthquake, and the Hospital Seismic Safety  
29 Act was created after the 1971 San Fernando earthquake.

30  
31 Mr. Tokas mentioned that earthquake engineers and building codes in California are very  
32 good, but that no earthquake is the same as the previous or the next. No building is the  
33 same as its neighboring building even though they may look the same. Engineering  
34 knowledge is constantly expanding from lessons learned and what we call the worldwide  
35 earthquake laboratory.

36  
37 Mr. Tokas stressed that the engineering experience gained by the reconnaissance team  
38 in Turkey, provided a unique opportunity to bring observations and lessons learned back  
39 to California. The reason is to make the necessary changes to building codes and  
40 ensuring the much-needed resilience in California communities.

1 Mr. Sumer remarked how valuable HBSB is, and how having this board in a healthcare  
2 environment is unique and a treasure. He thanked the team for coming together and  
3 HCAI for supporting him on this trip.

4  
5 Mr. Sumer mentioned that the size of Turkey is a little bigger than California, but similar  
6 in shape as well as fault line. There are two fault lines, the large one is the North  
7 Anatolian Fault, and the smaller one is the East Anatolian Fault. The East Anatolian  
8 Fault is where the earthquake occurred.

9  
10 Mr. Sumer stated the earthquake in Turkey on February 6, 2023, caused 50,000 plus  
11 deaths as of February 23, 2023. The first earthquake to strike was a Max. PGA: 1.23g  
12 and the second earthquake was .65g (METU).

- 13 • The first earthquake was a 7.8 magnitude event occurring at 4:17 a.m. on  
14 February 6, 2023. It shook almost 1/3 of the country, affected Syria, and was felt  
15 in Lebanon.
  - 16 ○ Roughly the size of L.A., including San Diego, or the Bay Area.
- 17 • There was an aftershock event eleven minutes later, and it was a 6.7 event, and a  
18 total of almost 6 more aftershock events followed.
  - 19 ○ The Northridge earthquake was a 6.7 magnitude event.
- 20 • Nine hours later, the second earthquake took place. It was a 7.5 magnitude event.
  - 21 ○ Almost perpendicular to the original earthquake. Ridgecrest, CA had the same  
22 type of event happen.
- 23 • Two weeks later, another 6.3 magnitude event happened south of the fault line.

24  
25 Mr. Sumer stated that one active organization was the EERI (Earthquake Engineering  
26 Research Institute) that brings teams together for communication and research. The  
27 purpose of the reconnaissance effort was:

- 28 • Observe structural and nonstructural performance of affected hospitals.
- 29 • Identify impediments to functional recovery.
- 30 • Provide recommendations for policy, building code, engineering practice, and  
31 construction (future work).

32  
33 Mr. Sumer stated that when reviewing data, the number of beds per 10,000 people in  
34 California is about 19, and Turkey is about 17. They are very comparable in terms of the  
35 number of hospitals.

36  
37 Mr. Sumer mentioned that their base was in Adana. They found that many stayed in  
38 tents. Even outside of the impact zone, the concerns with hotels were: 1) is it damaged?  
39 2) is there was water? 3) is there electricity? and 4) is there availability? Especially when  
40 taking into consideration the victims who were displaced and needed to flee to find  
41 shelter elsewhere.

1 Mr. Sumer stated they gathered information from thirty-three hospitals:

- 2 • Different sizes
- 3 • Private/government/universities
- 4 • Fixed base vs. base isolated
- 5 • Various construction years
- 6 • Ground motion record station
- 7 • Correlating record vs. surrounding damage

8 They gathered information by way of:

- 9 • Internet searches
- 10 • Drive-by
- 11 • Walk-by
- 12 • Inside visits
- 13 • Interviews

14

15 Mr. Sumer commented on the building performance:

- 16 • Structural systems remained largely intact (Life Safety Performance or better) in  
17 newer hospitals.
- 18 • Nonstructural damage often resulted in closure.
- 19 • Structural and nonstructural systems remained intact for base isolated and well-  
20 anchored/braced hospitals.
- 21 • Seismically isolated buildings provided operational performance.
- 22 • Isolation system displacements were much smaller than bearing capacities.
- 23 • Detailing at isolation plane may impede full displacement and/or result in  
24 nonstructural damage.

25

26 Ms. Phipps commented on the nonstructural performance of the buildings:

- 27 • Cladding: consisted of unreinforced masonry, covered in plaster. Initially resisted  
28 some load but cracked-up and dislodged; it was very brittle and very common.
- 29 • Marble/stone: mechanically anchored, but then started to spall and fell apart.
- 30 • Curtainwall: light system (common in the U.S.), performed well.
- 31 • Partitions: nearly all partitions were unreinforced masonry infill, it was brittle and  
32 sustained a lot of damage.
- 33 • Ceilings: suspended gypsum board ceilings and acoustic tiles (similar to the U.S.)  
34 but no bracing was observed. The ceiling grid, lights, etc. came down.
- 35 • Egress: stairs that were not properly reinforced, crumbled. The elevators had  
36 seismic switches that shut off automatically and required an elevator technician to  
37 turn them back on. Some damage was noted to the elevators.
- 38 • Equipment: in older hospitals, almost nothing was anchored inside, it shifted, and  
39 was damaged. The newer hospitals' equipment was anchored and little to no  
40 damage to anchored equipment was observed. Bulk oxygen storage tanks were  
41 unmoved, and it was noted that long, deep anchored systems worked the best.

- 1 • Distribution systems: piping systems did not appear to be braced, but not a lot of  
2 visual damage was noted (the water systems were turned off at the time). Flex  
3 lines were noted and seemed to hold up well.
- 4 • Medical equipment: most things anchored did not move. Whether it was useable  
5 after the earthquake, however, was still under review. Many things will need to be  
6 recalibrated by a specialized technician. Suspended monitors, hung but not  
7 laterally braced, performed well. OR booms, anchored for gravity loads but not  
8 braced for lateral loads, performed well. A sterilizer that was unanchored shifted  
9 and broke water and electrical connections. In the IVF clinic, incubators fell off the  
10 counter, bio safety cabinet hood fell off, microscopes fell off tables, and the  
11 incubators did not work.
- 12 • Furnishings and contents: lockers and blood samples fell over. However, data  
13 cabinets, though lightly restrained, remained in place.
- 14 • Lifelines:
  - 15 ○ Electricity was out but restored within 1-7 days to the most heavily affected  
16 areas.
  - 17 ○ Water was out and restored after a few weeks, depending on the location  
18 affected. Many hospitals had water tanks or wells onsite.
  - 19 ○ Gas was not restored at the time of their visit.
  - 20 ○ Communications were restored quickly.

21

22 Ms. Phipps mentioned the takeaways from their visit:

- 23 • Many seismically deficient older hospital buildings collapsed or partially collapsed.
- 24 • Although many newer hospitals performed structurally adequate, failure of  
25 nonstructural components resulted in evacuations.
- 26 • Hospital closures required patients to be transferred long distances, overwhelming  
27 surrounding hospitals.
- 28 • Outage of communications, electricity, gas, and water affected several hospitals.
- 29 • Emergency generators were critical to continued operations.
- 30 • Base isolated hospitals performed and functioned well.
- 31 • Timely, appropriate safety assessments are critical for preventing unnecessary  
32 evacuations. Owners were afraid of the liability of having people in the buildings  
33 without approval from the evaluators.

34

35 The EERI team is currently analyzing collected data, writing a detailed report, and  
36 keeping contact with partners in Turkey.

37

38 Ms. Phipps commented on what this means for California.

- 39 • For new hospitals - Code + Plan Review + Construction Oversight
- 40 • For existing hospitals - SB 1953 SPC and NPC requirements

1 Ms. Phipps stressed that we are on the right track and addressing known vulnerabilities  
2 in an appropriate way.

#### 3 4 **Discussion and input**

5 Mr. Schnick commented that there appeared to be a lot of nonstructural damage and  
6 asked if Turkey follows some of the same strict guidelines and requirements that  
7 California does. Mr. Sumer responded that non-structurally, they are not following the  
8 same regulations or guidelines. He noted that although a lot of equipment, type, and  
9 hardware are similar, how it is put together, who inspects it, and to what extent, are not  
10 the same.

11  
12 Ms. Phipps confirmed that Turkey does have the code requirement. The Turkish  
13 nonstructural code equations look just like California's. However, there is little to no  
14 enforcement, especially in the older hospitals.

15  
16 Mr. Dandekar commented that the physiological impact on clinicians and other hospital  
17 workers is one aspect people do not think about. They get scared when the damage is  
18 visual, even if it is not dangerous. He also noted that equipment is not easy to replace  
19 and wondered if that meant securing everything like a ship. Mr. Dandekar suggested that  
20 perhaps more attention should be paid to anchoring essential equipment.

21  
22 Ms. Phipps agreed with Mr. Dandekar. Mr. Sumer was the primary author of PIN 68,  
23 which describes what nonstructural components are required to be braced or anchored  
24 in a hospital. She expressed that the "line" is already drawn but can always be revisited.  
25 Not every piece of equipment can be anchored, but we will try and get most of it.

26  
27 Mr. Sumer commented that every country is different and has different needs. We look at  
28 what is on the ground and how it functioned. Every nation has a path to viable solutions  
29 and sometimes it deviates.

30  
31 Mr. Naeim commented that leading Turkish engineers had suggested to him that using  
32 drift limit on design was one solution for nonstructural damage. Mr. Naeim didn't believe  
33 that made sense, since an easy resolution was providing proper anchoring, and asked if  
34 anyone had insight on that. Mr. Tokas agreed with Mr. Naeim's assertion.

35  
36 Ms. Phipps also agreed with Mr. Naeim, adding that a primary reason for evacuation was  
37 the partitions. She said the common thinking is to just make them stiffer so they are less  
38 prone to cracking, but she believed that the answer was to stop building partitions that  
39 way. Ms. Phipps acknowledged that is not a minor suggestion; if industry was told it  
40 could not use certain materials anymore, it would cause a panic. But she affirmed the  
41 need and willingness to confront the basic materials of construction as an alternative to

1 making the building stiffer. Ms. Phipps stressed that she did not think a solution could be  
2 found until those issues were addressed.

3  
4 Mr. Sumer communicated that in all hospitals, there are a lot of visible cracks on gyp  
5 walls after an earthquake, and as Mr. Dandekar mentioned, that scares the staff because  
6 they are not engineers. He explained that although it looked horrible inside the buildings  
7 they entered, the team knew there was no possibility of collapse. He revealed that one  
8 hospital figured out that it needed to patch and paint those cracks, because although it  
9 was not structurally necessary, it was important for staff and patient psychology.

10  
11 Mr. Sumer stated that if 100,000 buildings have elevator issues that need to be reset,  
12 they could not expect vendors to be available immediately available after the earthquake.  
13 He revealed that there were two hospitals trained to do a manual reset. Staff did a  
14 couple of runs up and down, put “stuff” in the elevator, then removed it, but their fear still  
15 kept them from using the elevators in-person. Mr. Sumer summarized that elevators are  
16 very important, and training hospital staff how to reset them after an event should be an  
17 ongoing conversation.

18  
19 Dr. Catherine Sullivan, a member of the public, commented that she had been in  
20 healthcare in California for 40 years, including as the Director of Rehabilitation Services  
21 in major trauma centers. She agreed with Mr. Sumer, stating that because patients are  
22 solely dependent on staff, and staff must tend to patients’ needs despite their own fear,  
23 she believed that hanging inexpensive curtains over cracks in the wall could help.

24  
25 Dr. Sullivan also brought up the matter of training, egress, etc.; staff must know what to  
26 do when they cannot roll a gurney out of the hospital. She explained the issue is how to  
27 leave the hospital if the building is unsafe; it may be better to leave the patient there if  
28 that section of hospital is okay. Dr. Sullivan stressed that the best source of information  
29 is usually asking the staff for their thoughts.

30  
31 Mr. Sumer agreed with Dr. Sullivan, stating that unlike the Turkish system, HCAI  
32 Emergency Operations Center sends HCAI staff to hospitals as soon as possible after an  
33 earthquake. But that although HCAI staff collaborates with the engineers who are  
34 present or will arrive before HCAI can, evacuation decisions are finalized generally within  
35 the first 15 minutes.

36  
37 Dr. Catherine Sullivan disclosed that the Freeman Hospital in South Los Angeles was  
38 closed due to earthquake insecurity and that the 15 minutes Mr. Sumer mentioned, were  
39 exactly the point. Everyone is relieved once engineers arrive on the scene, but hospital  
40 staff needs to know what to do during those first minutes and be prepared. Hospitals  
41 must have very experienced managers on staff who can help keep everyone calm until  
42 the engineers arrive.

1 Ms. Phipps thanked Dr. Catherine Sullivan for her insight and input at the meeting.

2

3 Mr. Lew mentioned that regarding what hospitals can do in the first 15 minutes after an  
4 event, re-emphasized the importance of seismic instrumentation and what that could  
5 enable for those hospitals. Without having their structural engineer there, hospitals might  
6 have some guidance on what their options are, what the behavior of the building is, and  
7 what the risks are in terms of possible damage. Mr. Lew said that it showed the  
8 importance of the White Paper on the Benefits of Strong Motion Instrumentation.

9

10 Ms. Belair commented that perhaps some further discussion about how that can be  
11 practiced or applied to a situation like this is needed in the Instrumentation Committee.

12

13 Ms. Belair noted there was a lot of interest in this topic and in learning how to move  
14 forward as a group. She remarked that the input was great, which indicated a need for  
15 more discussion, but that time was short, and the board needed to keep moving forward  
16 with the agenda. Ms. Belair thanked the team for going to Turkey and for presenting their  
17 findings to the Board.

18

19 Ms. Phipps remarked that Mr. Sumer did a great job with leading the team in Turkey.

20

## 21 **Information and Action item**

- 22 • None

23

## 24 **12. Healthcare Microgrids Update**

25 **Presenters:** Jamie Schnick, HCAI Senior Electrical Engineer

26

27 Mr. Schnick explained that the day's discussion was about Healthcare Microgrids:

- 28 • Microgrids as EPS for hospitals and SNFs added to 2022 Intervening Code Cycle:
  - 29 ○ National codes are now allowing this, so it has been brought into California
  - 30 codes early.
- 31 • CMS Categorical Waiver for Healthcare Microgrid Systems to be used as EPS for
- 32 hospitals and SNFs.
  - 33 ○ Generators versus other solutions for power.
- 34 • Remaining barriers to realizing healthcare microgrids and EPSs.

35

36 Mr. Schnick mentioned proposed language to be added to code 517.30 Sources of  
37 Power (Hospitals) in (B.1) [OSHPD 1, 3, 4 & 5] Power Sources for the EES. It is in the  
38 process of being evaluated and possibly adopted. If it is passed, the code will be legal as  
39 of July 1, 2024. It lists the following as acceptable powering sources:

- 40 • Generating units
- 41 • Fuel cell systems
- 42 • Battery systems

- 1 • Health care microgrid

2

3 Mr. Schnick confirmed the same language had been added for SNFs as well. 517.41  
4 Required Power Sources (SNFs) in (B.1) [OSHPD 1, 3, 4, & 5] Power Sources for the  
5 EES.

6

7 Mr. Schnick mentioned the Categorical Waiver issued by the Federal Government.  
8 Previously, the Federal Government would not reimburse for Medicare or Medicaid  
9 services, but that was no longer a deterrent to using microgrids in place of emergency  
10 generators.

11

12 Mr. Schnick discussed the next barriers to realizing health care microgrids as EPSs.  
13 Replacing emergency generators with other sources that are not as reliable is not being  
14 proposed. Some of the issues still needing to be resolved are:

- 15 • Special Seismic Certification of product(s):
  - 16 ○ All our generators have Special Seismic Certifications, they are tested and
  - 17 proven to be able to operate in the event of an earthquake and function in an
  - 18 adequate manner to backup hospitals.
- 19 • Onsite fuel storage:
  - 20 ○ The typical gold standard of diesel generators. Diesel fuel is non-flammable,
  - 21 and easily stored. There are unground tanks at hospitals today that backup the
  - 22 facility for 96 hours. That solution for more sustainable sources is yet to be
  - 23 resolved.
- 24 • Proof of concept:
  - 25 ○ There are currently no hospitals in California that have their electrical system
  - 26 operating solely on microgrids.

27

28 Mr. Schnick mentioned AB2511 Updates:

- 29 • PIN 74:
  - 30 ○ Issued on December 12, 2022, which codified the new law.
- 31 • Webinars:
  - 32 ○ HCAI held seminars and participated in seminars to get the word out about the
  - 33 new requirement.
- 34 • A6-SNF backup power:
  - 35 ○ Development of A6 Advisory Guide which supplements the new PIN and goes
  - 36 into more detail on the requirements and offers potential solutions.
- 37 • Assessments:
  - 38 ○ Development of assessment applications which allows SNFs to assess their
  - 39 existing systems and identify deficiencies in respect to the new law.
- 40 • Collaboration:
  - 41 ○ HCAI has been working with CAHF - "How to" webinar scheduled.

- HCAI has been working with CDPH - Aligning on what will demonstrate compliance.

Mr. Schnick mentioned that HCAI started off with the microgrid taskforce, and then AB2511 came. One of the solutions in AB2511 was a microgrid, so the two things went well together.

- Five SNFs in Northern California:
  - There were five projects in Northern California that were implementing microgrids to back up the entire facility.
- Kaiser Ontario Microgrid:
  - A larger demonstration project with a large-scale microgrid under construction. It will provide interesting data on how microgrids can back up a hospital.

Mr. Schnick discussed the OSHPD-2 (Microgrid parallel with utility), saying that this is the solution that we have seen in design for the five microgrids that are under construction to back up the SNFs in Northern California. A microgrid, in terms of a single microturbine, backs up the entire facility and the existing generator remains in place. If the microturbine is seismically certified and the design team works out the fuel storage issues, this solution would meet the requirement of AB2511.

Mr. Schnick discussed the Microgrid as Supplemental Normal and Emergency Power Source (EPS). EPSS = Microgrid, EDB and ATs. Reviewing the graph of the project at Kaiser Ontario, the microgrid installed is a supplementary power source that backs up the power side and the emergency side. The significance of this is an alternate method of compliance and will back up the facility in 10 seconds, but it allows the microgrid to connect to the emergency source and carry the load.

Mr. Schnick explained the Future Microgrid as Emergency Power Source (EPS). EPSS = Microgrid, EDB, and ATs. He stated that as we start to see product seismically certified, we would still need to solve the on-site fuel storage requirements, and hopefully by then we will have more proof of concept, data from some of the non-essential microgrids that we see being built in our state, to prove that microgrids are just as reliable as emergency generators.

### **Discussion and input**

Dr. Bliss was grateful for the change in CMS rules. He reported that there is an interesting exception for long-term care facilities, in that they still explicitly require diesels, but that it is no longer a requirement for acute care hospitals. Dr. Bliss noted that Mr. Schnick has had an important role in the development, design, and process for both the acute care hospitals, and for the SNF piece. He went on to thank Mr. Chris Tokas for allowing Mr. Schnick to do that important work.

1 Dr. Bliss asked Mr. Schnick to:

- 2 1. address what are some of the expanded loads that SNFs will have to cover
- 3 because of AB2511, that are different from what has been the standard rule in
- 4 the past.
- 5 2. cover the financial considerations and if there are any specified funding
- 6 resources from the state or anyone else.
- 7 3. cover the issue with communities around California that have outlawed any
- 8 additional fossil fuel usage within their communities, like Berkley and Pasadena.
- 9 Additional fossil fuels cannot be added to the facility in those communities without
- 10 some exceptional circumstance.

11  
12 Mr. Schnick explained that for CMS, the exclusion is for subacute SNFs. If there is life  
13 support equipment in the SNF, it is still required to have a generator. This new law  
14 requires cooling HVAC maintaining systems between 71-81 degrees, to be backed up by  
15 onsite resources and to have provisions for 96 hours of operation. He noted there are  
16 also oxygen-generating devices and lifesaving equipment written into that law.

17 Mr. Schnick noted that from the assessment developed, it allows each facility to identify  
18 that they have HVAC equipment, and whether it is connected to normal or emergency  
19 power. Although these facilities are not as energy intensive as a hospital, more than half  
20 of the load is the HVAC system. They were backing up 10-15%, and now will need to  
21 back up 60-70% of the facility's energy use. He added that most of the existing systems  
22 on these SNF sites are inadequate to back up this load. Mr. Schnick then asked  
23 Dr. Bliss to speak on the financial load.

24  
25 Dr. Bliss stated that because it is an unfunded mandate, SNF owners and operators are  
26 worried about how to pay for this. He noted that although there is some new funding via  
27 the Inflation Reduction Act that may mitigate some of it, the not for profit and non-profit  
28 institutions are a bit under the gun with respect to financing.

29  
30 Mr. Griffiths disclosed that electrical engineers are currently facing the challenge of  
31 finding sustainability certified equipment to deliver these goals. He asked Mr. Schnick if  
32 there was a call to action to anyone in the supply and construction community to provide  
33 the tools and equipment needed to meet these requirements and goals. Mr. Schnick  
34 responded that HCAI has done its best to get the word out on that manner.

### 35 36 **Information and Action item**

- 37 • None

### 38 39 **13. Leadership Training for Board Members**

40 **Presenters:** Louise Belair, Board Chair and Scott Jackson, Board Vice Chair

1 Ms. Belair gave a brief presentation on the HBSB Leadership Training for Board  
2 Members:

- 3 • The Hospital Building Safety Board (HBSB) was established by law as part of SB  
4 1953 to advise the Director of the Department of Health Care Access and  
5 Information (HCAI).
- 6 • The Board also acts as a Board of appeals for HCAI in matters related to:
  - 7 ○ Design, construction, alteration, and seismic safety of health facility projects.
  - 8 ○ Fire and safety issues related to hospital facilities.
  - 9 ○ Alternate means of protection determinations.
- 10 • Board members serve the people of California and commit to full participation in  
11 the Board activities.
- 12 • The Board maintains contact with professional groups and industry organizations  
13 through the committees.
- 14 • The Board maintains state-of-the-art knowledge of architectural and engineering  
15 theory and applications related to health facilities.
- 16 • The Board does not provide oversight of OSHPD or HCAI; it is more of an advisory  
17 board.

18  
19 Ms. Belair mentioned that everyone received a Policies and Procedures Guide for HBSB  
20 when joining and that is what the Board uses to conduct business. It is updated  
21 occasionally and is re-distributed when necessary.

22  
23 Ms. Belair mentioned that HBSB holds a planning meeting annually between the Board  
24 Chair, Board Vice Chair, OSHPD Deputy Director, and Deputy Division Chiefs, to  
25 discuss the following items:

- 26 • The current year's accomplishments.
- 27 • Establish annual overall Board goals and objectives for the following year.
- 28 • Establish annual Committee goals and objectives for the following year.
- 29 • Assess goals versus accomplishments.

30  
31 Ms. Belair stressed that the main work of the Board is done at the Committee level.

32  
33 Ms. Belair communicated that at each Full Board meeting, the Chair of each committee  
34 reports on the work of the committee:

- 35 • Overview of topics discussed.
- 36 • Overview of motions.
- 37 • Discussions.
- 38 • Overview of next steps.

39 Ms. Belair explained how Board voting works:

- 40 • A quorum must be present to take any action or vote.
  - 41 ○ A quorum is one more than half the voting members.

- 1 • Only appointed members can vote at board meetings:
  - 2 ○ Ex-officio members may not vote.
  - 3 ○ Consulting members may not vote.
- 4 • Votes are decided by a simple majority.
- 5 • If a member has a conflict of interest, that member must abstain from voting.

6

7 Ms. Belair communicated how Committee voting works:

- 8 • A quorum must be present to take any action or vote:
- 9 • Only members of the Committee can vote on that committee:
  - 10 ○ Appointed members
  - 11 ○ Ex-officio members
  - 12 ○ Consulting member.
- 13 • Votes are decided by a simple majority conducted in open meetings.
- 14 • If a member has a conflict of interest, that member must abstain from voting.

15

16 Ms. Belair explained how appeals to the board work:

- 17 • CAC Article 5 covers appeals to the HBSB.
- 18 • Appeals come through HCAI.
- 19 • HBSB acts as the hearing body and conducts a public meeting.
- 20 • At least three HBSB voting members will hear and decide the appeal.

21 She also noted that appeals do not happen often.

22

23 Mr. Jackson detailed the roles and responsibilities of the different roles:

- 24 • Board Chair:
  - 25 ○ Calls all meetings.
  - 26 ○ Is the presiding officer at all Board meetings.
  - 27 ○ Designates committees, committee chairs, and membership.
    - 28 ▪ Subject to Board approval.
  - 29 ○ Appoints consulting members to committees.
  - 30 ○ Appoints new Board members to committees.
  - 31 ○ Dissolves or establishes committees.
    - 32 ▪ Subject to Board approval.
  - 33 ○ Advises HCAI Director on Board activities.
  - 34 ○ Authorized spokesperson for the Board.
- 35 • Board Vice Chair:
  - 36 ○ Fills in for the Board Chair when necessary.
  - 37 ○ Replaces Board Chair if Chair is unable to finish term.
- 38
- 39 • Committee Chair:
  - 40 ○ Carries out assignments from the Board Chair.
  - 41 ○ With the Board Chair, designates a Vice Chair for the Committee.

- 1 ○ Develops Committee meeting agendas with Board and HCAI staff.
- 2 ○ Conducts Committee meetings and reports to the full Board.
- 3 ○ Reviews Committee meeting reports.
- 4 ○ Establishes Committee goals with the Committee.
- 5 ○ Defines Committee work product deliverables.
- 6 ○ Develops a production plan.
- 7 ○ Defines milestones and action items.
- 8 ● Committee Vice Chair:
  - 9 ○ Fills in for the Committee Chair when necessary.
  - 10 ○ Provides support and assistance in preparing the work of the Committee.
- 11 ● Committee Members:
  - 12 ○ Attend Committee meetings.
    - 13 ■ This helps to establish a quorum.
  - 14 ○ Be prepared to engage in the Committee's work.
  - 15 ○ Fulfill assignments from the Committee Chair.
  - 16 ○ Vote at Committee meetings.
  - 17 ○ Interact with professional and industry organizations and report to the
  - 18 Committee.
- 19 ● HCAI Staff:
  - 20 ○ Report to the Board and Committees.
  - 21 ○ Work with Committees on various initiatives.
  - 22 ○ Help develop goals and objectives.
  - 23 ○ Seek advice and industry feedback.
- 24 ● HBSB Staff:
  - 25 ○ Executive Director:
    - 26 ■ Provides administrative direction.
    - 27 ■ Coordinates with HCAI staff.
    - 28 ■ Authorized spokesperson for the Board.
  - 29 ○ Administrative Staff:
    - 30 ■ Supports Board activities.
    - 31 ■ Provides administrative support.

32  
33 Ms. Belair detailed the meeting protocols and behaviors:

- 34 ● Meeting preparation:
  - 35 ○ Review the minutes of the last meeting and other meeting materials from the
  - 36 HCAI website prior to the meeting.
  - 37 ○ Bring all necessary materials.
  - 38 ○ Do your research.
  - 39 ○ Make sure you have the most up to date information.
- 40 ● Meeting agendas:
  - 41 ○ The meeting roadmap, identify the goal of the meeting.
  - 42 ○ Organize agenda by priority, be specific, no vague agenda items:

- 1           ▪ Reference the committee goals.
- 2           ▪ Contact HCAI Committee Representatives for items to cover.
- 3           ○ Confirm with speakers prior to issuing agenda to HBSB Staff.
- 4           ○ Have agenda prepared and submitted to HBSB staff at least 3 weeks prior to
- 5           the meeting.
- 6           ○ Start on time with a review of the agenda.
- 7           ○ Keep the meeting moving, identify time frames.
- 8           ○ Take a break at least every 90 minutes.
- 9           ● Meeting presentations:
  - 10           ○ Topic should be general education—no sales pitch.
  - 11           ○ Request abstract from presenter to review before confirming.
  - 12           ○ Presentation should be tailored to the audience.
- 13           ● Action item assignments:
  - 14           ○ At the end of each agenda item, verify actions with the Committee.
  - 15           ○ Confirm what needs to be accomplished.
  - 16           ○ Identify who is best suited to get the action done.
  - 17           ○ Determine the timeline for completion.
  - 18           ○ Keep in mind the context.
  - 19           ○ At the end of the meeting, restate action items.
  - 20           ○ Carry action items to the next meeting.

21

22 Mr. Jackson noted additional meeting protocols and behaviors:

- 23           ● Meeting reports:
  - 24           ○ At the beginning of the meeting, the Chair reports on the previous meeting.
  - 25           ○ The previous meeting minutes are available prior to the current meeting,
  - 26           expect members to have reviewed the minutes.
  - 27           ○ The chair report should focus on highlights.
  - 28           ○ Start with meeting date, summarize topics and any motions, include action
  - 29           items.
  - 30           ○ Reports to Full Board are similar except all members may not be as familiar
  - 31           with previous meeting minutes.
- 32           ● Manage distractions with minimal meeting interruption:
  - 33           ○ Members and public need to be heard from, be aware of potential speakers.
  - 34           ○ Clearly identify speaker by name if possible.
  - 35           ○ Keep the meeting moving, do not allow interruptions.
  - 36           ○ If speaker goes off topic, bring them back or direct them to comment at the
  - 37           end of the meeting.
  - 38           ○ Ask disruptive people to wait their turn.
- 39
- 40           ● Committee interaction:
  - 41           ○ Chair:
    - 42           ▪ Keep to the agenda.

- 1           ▪ Ask dissenters to summarize their convictions in a direct statement.
- 2           ▪ Allow everyone to be heard.
- 3           ▪ Keep the meeting moving.
- 4       ○ Members:
- 5           ▪ Ask for the floor, do not interrupt.
- 6           ▪ Keep comments short and to the point.
- 7           ▪ Do not hesitate to comment, criticize constructively, or disagree.

8

9 Mr. Gray communicated the purpose of the Bagley-Keene Open Meeting Act:

- 10       • To allow members of the public to attend and participate as fully as possible in a
- 11       state body’s decision-making processes.
- 12       • We answer to the people, and they have a right to know what goes on the
- 13       meetings.
- 14       ○ Gov. Code section 11120; 102 Ops.Cal.Atty.Gen. 42)
- 15       • The act applies to “state bodies,” such as “every state board... that is created by
- 16       statute...”:
- 17       ○ Gov. Code section 1121(a)
- 18       ○ HBSB is created by Health & Safety Code section 129925.
- 19       ○ When there is a conflict between Bagley-Keene and Roberts rules, we follow
- 20       Bagley-Keene.
- 21       • Committees: The Act also applies to any advisory committee HBSB creates if the
- 22       committee consists of 3 or more persons:
- 23       ○ Gov. Code section 11121(c)
- 24       ○ This can be any 3 people; they do not have to be members of the board.
- 25       • The Act applies to “Meetings”:
- 26       ○ Every “meeting” is subject to the Act’s requirements.
- 27       ○ “Meeting” definition: A quorum of the Board/Committee convening, at the same
- 28       time and place to hear, discuss, or deliberate on any item within the subject
- 29       matter of the Board/Committee.
- 30       ▪ A quorum is the minimum number of members who must be present for the
- 31       Board/Committee to transact business and California law generally states
- 32       that a quorum is a majority of the members. (94 Ops.Cal.Atty.Gen. 100)
- 33       ▪ For the full board, quorum is 9 appointed/voting members (out of 16). This
- 34       does not include ex-officio members.
- 35       ○ Gov. Code section 11122.5(a)
- 36       • Physical presence/location requirements and COVID-19 exception:
- 37       ○ Normally, the Act requires the physical presence of members at meetings and
- 38       a physical location where the public may attend. The Act allows some
- 39       teleconferencing, but still requires physical presence and location.
- 40       ○ Because of COVID-19, the Legislature suspended the physical
- 41       presence/location requirements until July 1, 2023. (Gov. Code section 11133):

- 1           ▪ The Board must still comply with the notice and public participation
- 2           requirements of the Act.
- 3           ▪ Statute urges state bodies to adhere as closely to the Act as possible to
- 4           “maximize transparency and provide the public access to the meetings”.
- 5       • Serial communications are prohibited:
- 6           ○ Outside of a properly noticed “meeting”, three or more members cannot
- 7           ▪ Communicate in a series of communications of any kind.
- 8           ▪ Directly or through intermediates.
- 9           ▪ Regarding items within the subject matter of the Board.
- 10          ○ Purpose: to prevent deliberations/actions/decisions being made in secret,
- 11          without public knowledge or participation.
- 12          ○ Gov. Code section 11122.5(b)
- 13       • “Meeting” exceptions:
- 14          ○ The act does not consider the following to be “meetings”:
- 15           ▪ Public contacts: a member of the public contacting a quorum of members if
- 16           members do not solicit such contacts.
- 17           ▪ Social gatherings: a quorum of the members may attend a purely social
- 18           event if they do not discuss Board issues among themselves.
- 19           ▪ Conferences: exempt, if they are open to the public and involve subject
- 20           matter of general interest, and a quorum of the members do not discuss
- 21           Board issues among themselves, other than as part of the scheduled
- 22           program.
- 23          ○ Gov. Code section 11122.5(c)
- 24
- 25       • Meeting notices and agenda:
- 26          ○ The Board must post meeting notices on the internet at least 10 days before a
- 27          meeting.
- 28          ○ Notices must have:
- 29           ▪ Time and place(s) of the meeting:
- 30           □ For virtual meetings, the notice must have “the means by which
- 31           members of the public may observe the meeting and offer public
- 32           comment”.
- 33           ▪ A specific agenda for the meeting that contains a brief description of all
- 34           items to be discussed/transacted at the meeting:
- 35           □ The description should provide enough information to allow the public to
- 36           understand what issues will be discussed or considered.
- 37           □ Generally, if an issue is not on the agenda, the Board cannot consider
- 38           it. However, a new issue can be mentioned for the purpose of including
- 39           it in a future meeting.
- 40           ▪ The 10-day notice requirement does not apply for “emergency” or “special”
- 41           meetings as defined under statute.
- 42           ▪ Gov. Code section 11125 and 11133

- 1 • Public attendance and participation:
  - 2 ○ Generally, meetings must be open and public:
    - 3 ▪ Conditions on public attendance at the meeting cannot be imposed. An
    - 4 individual is not required to identify themselves or to sign-in to attend.
  - 5 ○ Public participation: the Board must give the public an opportunity to directly
  - 6 address the Board on each agenda item before or during the Board's
  - 7 discussion or consideration of the item:
    - 8 ▪ Public criticism of the Board cannot be prohibited.
  - 9 ○ Broadcasting/recording of meetings: members of the public are allowed to
  - 10 record and broadcast meetings.
  - 11 ○ Gov. Code sections 11123, 11124, 11124.1 and 11125.7
- 12 • Closed sessions:
  - 13 ○ "Close sessions" are parts of meetings without the public and are only allowed
  - 14 for specific statutorily stated reasons, e.g., to discuss pending litigation or to
  - 15 discuss employment issues.
  - 16 ○ These sessions must be included on the agenda and the specific statutory
  - 17 authority allowing the closed sessions must be stated.
  - 18 ○ These are rare occurrences.
  - 19 ○ Gov. Code section 11126
- 20 • Meeting documents:
  - 21 ○ Generally, materials distributed to the Board prior to or during a meeting are
  - 22 disclosable public records:
    - 23 ▪ Some material can be held confidential pursuant to certain sections of the
    - 24 California Public Records Act.
    - 25 ▪ Materials prepared by Board members or staff are required to be available
    - 26 to the public at the meeting.
    - 27 ▪ Materials prepared by others are required to be available to the public after
    - 28 the meeting
  - 29 ○ Gov. Code section 11125.1
- 30 • Voting:
  - 31 ○ The vote or abstention of each member must be publicly reported. (Gov. Code
  - 32 section 11123(c)).
    - 33 ▪ If a virtual meeting, votes must be taken by roll call. (Gov. Code sections
    - 34 11123(b) and 11123.5(e)).
  - 35 ○ Vote by secret ballot at a meeting is not allowed. (68 Ops.Cal.Atty.Gen. 65.)
  - 36 ○ Vote by proxy is not authorized. (68 Ops.Cal.Atty.Gen. 65.)
- 37 • Abstentions:
  - 38 ○ Abstentions may complicate voting:
    - 39 ▪ In general, a state body cannot act without support of at least a majority of
    - 40 its quorum:
      - 41  For the full Board, this is at least 5 members.

- 1           ▪ Members who voluntarily abstain are counted toward a quorum, but
- 2           decisions will only require the majority of those members who actually vote
- 3           as long as there is support from a majority of the quorum.
- 4           ▪ Members who are disqualified from voting by law are not counted toward a
- 5           quorum.
- 6           ▪ 94 Ops.Cal.Atty.Gen 100.
- 7       • Penalties for non-compliance:
- 8           ○ Civil:
- 9           ▪ Any interested person, the Attorney General, or a district attorney can
- 10           commence court action to stop or prevent violations of the Act. (Gov. Code
- 11           section 11130.).
- 12           ▪ Any interested person can also commence court action to declare a Board
- 13           action taken in violation of the Act’s notice, agenda, and public attendance
- 14           requirements as “null and void”. (Gov. Code section 11130.3)
- 15           ▪ If successful, a plaintiff can obtain a court order, court costs, and attorney
- 16           fees. (Gov. Code section 11130.5)
- 17           ○ Criminal:
- 18           ▪ It is a misdemeanor for any member to attend a meeting in violation of the
- 19           Act and where the member “intends to deprive the public of information to
- 20           which the member knows... the public is entitled”. (Gov. Code section
- 21           11130.7)

22  
23 Mr. Gray explained the purpose of Conflict of Interest and Form 700:

- 24       • Overview of conflict-of-interest laws:
- 25           ○ Conflict of interest laws (non-exhaustive list):
- 26           ▪ Financial conflicts: An HBSB member “shall not make, participate in
- 27           making, or in any way attempt to use the [their] official position to influence
- 28           a governmental decision in which the [member] knows or has reason to
- 29           know the [member] has a financial interest”.
- 30           ▪ Common law doctrine: An HBSB member is “prohibited from placing
- 31           themselves in a position where their private, personal interests may conflict
- 32           with their official duties”.
- 33           ▪ Incompatible activities: An HBSB member “shall not engage in any
- 34           employment activity, or enterprise which is clearly inconsistent,
- 35           incompatible, in conflict with, or inimical to his or her duties as a state
- 36           officer or employee”.
- 37       • The purpose of conflict-of-interest laws:
- 38           ○ The State of California’s “conflict of interest statutes are concerned with what
- 39           might have happened rather than merely what actually happened...
- 40           ○ They are aimed at eliminating temptation, avoiding the appearance of
- 41           impropriety, and assuring the government of the officer’s undivided and
- 42           uncompromised allegiance...

- 1       ○ Their objective is to remove or limit the possibility of any personal influence,  
2       either directly or indirectly, which might bear on an official’s decision...”.
- 3       ○ People v. Honig (1996) 48 Cal.App.4th 289, 314
- 4       ● Appearance of impropriety:
  - 5       ○ The State of California is concerned with not just actual conflicts of interest,  
6       but also the appearance of impropriety. This is to instill confidence and build  
7       trust in government and that its decisions are legitimate.
- 8       ● Exception: financial effect on representative interest:
  - 9       ○ There is no conflict of interest if a decision would generally impact the industry,  
10       trade, or profession, or other identified interest the HBSB member legally  
11       represents in HBSB.
  - 12       ○ Cal. Code Regs., Title 2, section 18703(e)
- 13       ● Disqualification and recusal:
  - 14       ○ A HBSB member disqualified from making or participating in decisions must  
15       not take part in the decision, and the member’s recusal from the decision must  
16       meet the following requirements:
    - 17       ▪ The member’s determination of a conflict of interest may be accompanied  
18       by an oral or written disclosure of the conflicting interest.
    - 19       ▪ The member’s presence will not be counted toward achieving a quorum.
    - 20       ▪ During a closed session, a disqualified member must not be present when  
21       the decision is considered or knowingly obtain or review a recording or any  
22       other nonpublic information regarding the governmental decision.
    - 23       ▪ HBSB may adopt a local rule requiring the member to step down from the  
24       dais or leave the chambers.
  - 25       ○ Cal. Code. Regs., Title 2, section 18707(b)
- 26       ● Form 700:
  - 27       ○ HCAI is required to have a Conflict-of-Interest Code which identifies its  
28       positions that involve the making, or participation in the making, of decisions  
29       that may have financial effects. These positions are required to file a  
30       “Statement of Economic Interests,” also known as the “Form 700”.
  - 31       ○ HBSB members will be included in HCAI’s Conflict of Interest Code and will be  
32       required to file Form 700 about relevant financial interests. Generally, form 700  
33       require a member to disclose foreseeable conflict of interests, which HCAI will  
34       specifically identify in its Conflict-of-Interest Code.
  - 35       ○ This serves to provide transparency to the public and acts as a reminder to  
36       members of potential conflicts of interest.
  - 37       ○ This form must be filled out when you are appointed and then annually after  
38       that. They are due at the beginning of April and there are financial penalties for  
39       not completing the form on time.
- 40       ● Form 700 disclosure requirements:
  - 41       ○ Category 4

- 1 ○ Must disclose all interests in real property in the State of California, as well as
- 2 investments, business positions and income, including gifts, loans, and travel
- 3 payments, from sources of the type that engage in the management, design,
- 4 construction, construction review, or financing of, health facilities of the type
- 5 subject to plan and construction review and approval by the Department of
- 6 Health Care Access and Information (HCAI).

7

8 Mr. Scheuerman communicated how to apply Robert's Rules of Order:

- 9 ● Standards for Board conduct:
  - 10 ○ Influences:
    - 11 ■ Bagley-Keene Act:
      - 12 □ Statutory conduct requirements for state boards, etc.
    - 13 ■ HBSB Policies and Procedures (P&P).
    - 14 ■ Specific to HBSB; sets forth operating practices.
    - 15 ■ Duties of the Board Chair and Board Vice Chair as described.
    - 16 ■ Formation of committees and duties and responsibilities of Committee
    - 17 Chairs and Committee Vice Chairs.
    - 18 ■ Robert's Rules of Order.
    - 19 ■ Official method of conduct per HBSB P&P VII.B.

20

21 Mr. Scheuerman detailed what Robert's Rules of Order are:

- 22 ● Copyrighted by Robert's Rules Association.
- 23 ● An organized method for meeting conduct ("Parliamentary Procedure"):
  - 24 ○ Maintains the integrity of the agenda ("Order of the Day for the Conduct of
  - 25 Business").
  - 26 ○ Provides methods to determine the will of the majority (voting).
  - 27 ○ Protects the rights of the minority (debate).

28

29 Mr. Scheuerman explained the Conduct of the Agenda:

- 30 ● Call to order (initialization of the agenda):
  - 31 ○ Roll call - determination of quorum.
  - 32 ○ Issuance of advisories and meeting expectations.
- 33 ● Conduct the agenda:
  - 34 ○ Receive reports
  - 35 ○ Conduct business
  - 36 ○ Special presentations
- 37 ● Determine breakpoints:
  - 38 ○ Recesses (NOT "adjourn for lunch")
  - 39 ○ "Meeting at ease"
- 40 ● Request for general public comments as the last item before adjournment
- 41 ● Adjourn (hard end, no further conduct)

1 Mr. Scheuerman described the Principal Categories of Motions:

- 2 • A “motion” is a formal proposal made by a member of the body (other than the  
3 Chair) in a meeting upon which the group takes certain action. Principle  
4 categories include:
  - 5 ○ Main Motion - brings principal business before the body:
    - 6 ▪ Subsidiary Motion - amendments to main motions.
  - 7 ○ Incidental Main Motions and Privileged Motions:
    - 8 ▪ Secondary types of motions and actions not requiring solicitation from the  
9 Chair.
- 10 • Main Motions:
  - 11 ○ The Chair determines if a main motion is “In Order”:
    - 12 ▪ Motion must be made by a voting member.
    - 13 ▪ Motion must be specific in intent and verbiage.
    - 14 ▪ Must be germane to the agenda item.
    - 15 ▪ A “second” is required for a motion to become actionable if is determined to  
16 be in order.
  - 17 • Making a Main Motion:
    - 18 ○ A member requests recognition and awaits the Chair’s action.
    - 19 ○ When recognized, the member says: “I move...” and states the precise  
20 verbiage of the motion.
    - 21 ○ Chair determines if motion is in order.
    - 22 ○ If in order, Chair calls for a second.
    - 23 ○ If seconded, Chair determines if the intent and language of the motion are  
24 clear.
    - 25 ○ Chair then states: "It is moved and seconded that..." repeating the motion  
26 verbatim.
    - 27 ○ Chair calls for debate on motion.
  - 28 • Debate versus discussion:
    - 29 ○ An issue cannot be debated until a motion and second have been made and  
30 recognized by the Chair.
    - 31 ○ Debate is on whether a motion as stated should be adopted (approved or  
32 rejected by vote).
    - 33 ○ Questions to presenters, and discussion and dialog during an agenda item for  
34 the purpose of understanding and clarity of meaning, and surfacing differences  
35 of opinion between members, which may or may not lead to a motion, is not  
36 considered debate.
  - 37 • Debate:
    - 38 ○ Chair opens debate by stating a motion is “on the floor”.
    - 39 ○ Chair recognizes each member wishing to speak to the motion:
      - 40 ▪ May limit each speaker’s time at outset.
      - 41 ▪ Offers first comments to the maker of the motion.
      - 42 ▪ Attempts to rotate between support and opposition.

- 1           ▪ Ensures fairness to members wishing to speak.
- 2           ▪ Determines that debate is germane to the motion (no off-topic discussion
- 3           during debate).
- 4           ▪ Ensures that debate is not personal - speaker addresses the Chair.
- 5       ○ Debate continues until Chair determines it is exhausted (no more speakers or
- 6       lapse into redundancy).
- 7       ● Amending a Main Motion:
  - 8       ○ A member may wish to amend motion prior to voting. A Motion to Amend is a
  - 9       Subsidiary Motion. The rules for amending a motion are the same as making a
  - 10       motion.
    - 11       ▪ Maker provides specific language to be added or deleted from a motion on
    - 12       the floor and where the precise location the new language is to be placed.
  - 13       ○ Voting on amendment is conducted the same way as the main motion, it
  - 14       occurs before final action.
  - 15       ○ Chair can accept a “friendly amendment” to a motion on the floor if acceptable
  - 16       by the maker and the second; however, this is done outside of Robert’s Rules
  - 17       at the discretion of the Chair for the sake of the Order.
    - 18       ▪ For example, there were motions made to adopt the report as amended,
    - 19       but no motion to amend the report. What you were actually moving, was to
    - 20       adopt the report as corrected, and we determined that during our
    - 21       discussion. An amendment to a report would require a motion to amend
    - 22       and that means there is something substantively wrong or missing from the
    - 23       report that needs to be formally added.
- 24       ● Voting on a Main Motion:
  - 25       ○ Chair asks the body, “Are you ready for the question?” “Question” is the vote
  - 26       on the motion.
  - 27       ○ If confirmed, the Chair announces, “The question is on adoption of the motion
  - 28       to... (restates the motion verbatim).”
  - 29       ○ Chair calls the vote and asks the Executive Director to poll eligible members
  - 30       for their vote:
    - 31       ▪ Yes, no, or abstain.
    - 32       ▪ Maker of the motion must vote in favor; seconder is not required to vote in
    - 33       favor.
  - 34       ○ Executive Director announces count of votes. Chair determines and states
  - 35       which side “has it” (motion carries or motion is defeated) based on a simple
  - 36       majority (50% + one of eligible members counted in the quorum call).
  - 37       ○ Chair determines if passage of the motion affects the Order or goes to the next
  - 38       item.
- 39       ● HBSB Common Main Motions:
  - 40       ○ Motion to approve minutes of prior meetings.
  - 41       ○ Motions to adopt board operations proposals:
    - 42       ▪ Committee formation, mission, membership, and goals.

- 1           ▪ Annual calendar.
- 2           ▪ Motion to recommend action on information contained in presentations.
- 3           ○ Motion to adopt committee report, or to individually concur in committee
- 4           motions.
- 5       ● Subsidiary Motions:
- 6           ○ Refer the matter back to the committee.
- 7           ○ Tabling a Motion and Postponements:
- 8           ▪ Temporary
- 9           ▪ Time certain
- 10          ▪ Indefinite
- 11          ○ Limit debate.
- 12          ○ Previous question (a formal vote ending debate).
- 13       ● Privileged Motions:
- 14          ○ Adjourn the Meeting:
- 15           ▪ Superior motion; not debatable and requires a vote:
- 16             Excludes a vote to “adjourn (dissolve) the body”.
- 17          ○ Take a recess.
- 18          ○ Raise a Question of Privilege:
- 19           ▪ Request for “Points”.
- 20             Order - request for Chair to determine if current action is consistent with
- 21            the agenda.
- 22             Other points that support the rights of the member of the body.
- 23       ● Committee Conduct:
- 24          ○ Committees, subcommittees, and other groups working on behalf of the Board
- 25          and are required to follow all rules that affect conduct of the Full Board.
- 26          ○ Actions of a committee cannot bind the Board. Motions adopted by a
- 27          committee are reported as recommendations to the Full Board and come in
- 28          the form of a motion to adopt.
- 29       ● Committee Reports:
- 30          ○ Committee chairs conclude their presentations with a motion to accept the
- 31          report of the committee. The committee chair speaking for the entire
- 32          committee in making the motion.
- 33          ○ Motion must occur in the recommendation of the committee and the committee
- 34          report must be seconded by a member not participating in the adoption of the
- 35          recommendation, as the committee members’ action is already incorporated in
- 36          the motion to adopt the committee report.
- 37       ● Common Committee Motions:
- 38          ○ HCAI staff request for endorsement or guidance on code or program
- 39          development issues.
- 40          ○ Motion to recommend further board action on information contained in
- 41          consultant presentations.

- 1           ○ Motions to request HCAI action on issues presented by others.
- 2       ● Adjournment:
- 3           ○ Final action of the Order, signifying its end:
- 4           ▪ Principal authority of the Chair, may be unilaterally declared at any time; or
- 5           ▪ Chair may request a Motion to Adjourn which must be voted upon,
- 6           ▪ Privileged motion from the floor made at any time, must be voted upon.
- 7           ○ No further business allowed for declaration of adjournment.

## 8

### 9 **Discussion and input**

10 Mr. Griffiths asked how Board members can rule on appeals if HBSB is an advisory, not  
11 oversight Board. Mr. Scheuerman responded that it is an additional duty set in statute,  
12 above the advisory duty of the Board.

13  
14 Dr. Catherine Sullivan disclosed that she would like to be an advisor to the Board and  
15 asked how best to accomplish that. Ms. Belair replied that Board members are appointed  
16 to specific representative positions on the Board, which are listed in the HBSB roster.  
17 When appointed members reach their term limit, HCAI reaches out to specific California  
18 organizations to request nominations. Ms. Belair explained that all HBSB meetings are  
19 open to the public and there are various avenues to get involved, including participating  
20 in meetings as a member of the public. She added that there are also consulting  
21 members invited to participate at the Committee level and those are usually suggested  
22 by the Committee Chair, Board Chair, or Committee Members.

23  
24 Mr. Malley asked how the Bagley-Keene Act applies to committees versus the Full  
25 Board? Mr. Gray responded that it applies the same to the committees and the Full  
26 Board.

27  
28 Mr. Foulkes asked if one's personal residence, vacation home, and rental property must  
29 be disclosed on the Form 700. Mr. Gray replied that one's personal residence does not  
30 have to be disclosed, but all other properties do, including rental property.

### 31

### 32 **Information and Action item**

- 33       ● None

### 34

### 35 **14. Comments from the Public/Board Members on issues not on this agenda**

36 **Presenters:** Louise Belair, Board Chair

37  
38 Ms. Belair noted the future Full Board meetings are scheduled for:

- 39       ● August 17, 2023, in Sacramento
- 40       ● December 6-7, 2023, in Los Angeles

1 **Discussion and input**

2

3 Ms. Belair gave her thanks to everyone for their participation and said she was looking  
4 forward to the work on the committee levels, including the Education and Outreach  
5 Committee for their upcoming fall seminar.

6

7 **Information and Action item**

- 8 • None

9

10 **15. Adjournment**

11 Ms. Belair adjourned the meeting on April 20, 2023, at approximately 3:45 p.m.