

California Administrative Code, Part 1

7-118. Building energy efficiency program.

Healthcare facility projects that consist of a newly constructed building or an addition that increases floor area and conditioned volume requires compliance with Title 24, Part 6, California Energy Code.

- (a) **Documentation.** The following documentation is required to demonstrate compliance with Part 6.
- 1. **Certificate of Compliance.** For healthcare facilities, the Certificate of Compliance shall be signed by the design professional of record in responsible charge or the design professional delegated the portion of work for which they are responsible per Section 7-115. All Certificate of Compliance documentation shall conform to the California Administrative Code, Chapter 10, Article 1, Section 10-103(a)1.A. items i, ii and iv. For all newly constructed buildings and additions regulated by Part 6, the applicant shall submit the applicable Certificate(s) of Compliance in the construction documents for approval.
- 2. **Certificate of Installation.** The Certificate of Installation shall be included in the testing, inspection, and observation program pursuant to Section 7-141. The Certificate of Installation documentation shall comply with the California Administrative Code, Chapter 10, Article 1, Section 10-103(a)3.B.
- 3. **Certificate of Acceptance.** The Certificate of Acceptance for envelope shall be included in the testing, inspection, and observation program pursuant to Section 7-141. The Certificate of Acceptance documentation shall comply with the California Administrative Code, Chapter 10, Article 1, Section 10-103(a)4.A.



7-119. Functional program.

(a) General.

1. **Functional program requirement.** The owner or legal entity responsible for the outcome of the proposed health care facility design and construction project shall be responsible for providing a functional program to the project's architect/engineer and to the Office. The requirement applies to all scopes and disciplines of the project that affect patient care directly or indirectly, by means of new construction, additions, or modifications to specific hospital departmental functions which form an integral part of the facility. Projects that only involve equipment replacement, fire safety upgrades, or renovations that will not change the occupancy, function, or use of existing space shall not require a functional program, except those projects for imaging, dietary and pharmacy sterile compounding.

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(c) **Functional program content.** The functional program for the project shall include the following:

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9. **Patient safety risk assessment.** Projects associated with acute psychiatric hospitals, acute psychiatric nursing units in general acute-care hospitals, <u>outpatient behavioral health observation units and behavioral health observation areas within emergency departments in general acute-care hospitals, and special treatment program service units in skilled nursing facilities shall include a Patient Safety Risk Assessment. At a minimum, a Behavioral and Mental Health Risk Assessment shall be addressed as part of the Patient Safety Risk Assessment. The Patient Safety Risk Assessment shall be subject to review and approval by the California Department of Public Health.</u>



7-126. Deferred submittals.

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(f) Review time. Review times for deferred submittals shall be the same as final review of construction documents as required in 7-125.

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7-129. Time limitations.

- (a) Final construction documents shall be submitted to the Office within one year of the date of the Office's report on preliminary plans and outline specifications or the application shall become void unless an extension has been requested and approved. The architect or engineer in responsible charge may request one extension of up to 180 calendar days; however, the Office may require that the construction documents meet current regulations. The extension must be requested in writing and justifiable cause demonstrated.
- (b) The procedures leading to obtaining written approval of final construction documents shall be carried to conclusion without suspension or unnecessary delay. Unless an extension has been approved by the Office, the application shall become void <u>if either of the following occur</u> when paragraph 1, 2 or 3 occurs:
 - 1. If project actual construction cost is \$500,000 or less and construction documents are not filed for backcheck within 45 calendar days after the date of return of checked construction documents to the architect or engineer in responsible charge. Backcheck submittals that do not contain a written response to all comments in accordance with Section 7-125(c) shall not be considered an official submittal to the Office. The architect or engineer in responsible charge may request one extension of up to 45 calendar days; however, the Office may require the construction documents be revised to meet current regulations. The extension must be requested in writing and justifiable cause demonstrated.
 - 2. If project actual construction cost is greater than \$500,000 and construction documents are not filed for backcheck within 90 calendar days after the date of return of checked construction documents to the architect or engineer in responsible charge. Backcheck submittals that do not contain a written response to all comments in accordance with Section 7-125 (c) shall not be considered an official submittal to the Office. The architect or engineer in responsible charge may request one extension of up to 90 calendar days; however, the Office may require the construction documents be revised to meet current regulations. The extension must be requested in writing and justifiable cause demonstrated.
 - 3. A set of stamped construction documents are not submitted to the Office within 45 calendar days after the date shown with the identification stamp by the Office.
- (c) ... [no change to text]
- (d) ... [no change to text]
- (e) ... [no change to text]



7-133. Fees.

- (a) **Plan review and field observation.** The fee for plan review and field observation shall be based on the estimated cost of construction as specified below. If the actual construction cost for a hospital or skilled nursing facility project exceeds the estimated construction cost by more than five percent (5%), a further fee shall be paid to the Office, based on the applicable schedule specified in (a) (1) or (2) and computed on the amount by which the actual cost exceeds the estimated cost.
 - 1. [No change to text] ...

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(k) Seismic examination. The Office shall charge actual costs for the seismic examination of the condition of a hospital building upon written request to the Office by the governing board or authority of any hospital, pursuant to Section 129835 of the Health and Safety Code. In addition, the minimum filing fee of \$250.00 shall apply to each application pursuant to Health and Safety Code Section 129785(a). The total cost paid for these services shall be nonrefundable.

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(o) Hospital building seismic compliance extensions. The Department shall charge actual costs to cover the review and verification of the extension documents submitted, pursuant to Section 130060(g) of the Health and Safety Code. The total cost paid for these services shall be nonrefundable.

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7-135. Time of beginning construction.

- (a) Construction shall not commence until the health facility has applied for and obtained from the Office:
 - 1. Written approval of the construction documents.
 - 2. A building permit.
 - 3. Written acceptance of the testing, inspection and observation program.
 - 4. Written approval of the inspector of record for the project pursuant to Section 7-212(a).

7-136. Reserved.

7-137. Notice of start of construction.

(a) As soon as a contract has been awarded, the governing board or authority of the health facility the following information shall be provided to the Office, on a form provided by the Office, the following:

- 1. Name and address of the contractor.
- 2. Contract price.
- 3. Date on which contract was awarded.
- 4. Date of construction start.

Reserved.

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7-153. Changes to the approved work.

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(b) Changes that do not materially alter the work. The following types of changes in the work do not materially alter the work and do not require the submission of amended construction documents to the Office:

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6. Dimensional changes to rooms that do not affect code required minimum dimensions, fixed dimensions, minimum room or space requirements and required clearances.

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