California Health and Human Services Agency





Hospital Building Safety Board Structural and Nonstructural Regulations Committee AGENDA October 23, 2024 10:00 a.m. – 4:00 p.m.

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

Locations:

hcai.ca.gov

2020 West El Camino Ave, Conference Room 930, Sacramento, CA 95833 355 South Grand Avenue, Conference Room 2000, Los Angeles, CA 90071 Teams Meeting Access; Meeting ID: 217 751 658 574; Passcode: xxeomf Call in: (916) 535-0978; Phone Conference ID: 248 231 529#

- Item #1 Call to Order and Welcome Facilitator: Jim Malley, SE, Senior Principal, Degenkolb Engineers; Committee Chair (or designee)
- Item #2 Roll Call and Meeting Advisories/Expectations Facilitator: Veronica Yuke, Manager, HCAI; Executive Director (or designee)
- Item #3 Triennial Code Cycle update and timelines on proposed amendments to the 2025 California Building Standards Code Title 24, Part 1, Part 2, and Part 10

Discussion and public input.
 Facilitator: Mia Marvelli, Architect, Supervisor; HCAI (or designee)

Item #4 Streamlining the continued use of existing <u>OSHPD Preapproval Programs</u> to align with the new force equation in ASCE 7-22 for supports and attachments, and special seismic certification of nonstructural components • Discussion and public input

Facilitator: Timothy Piland, SE, Senior Structural Engineer; HCAI (or designee)

Item #1 Call to Order and Welcome Facilitator: Jim Malley, SE, Senior Principal, Degenkolb Engineers; Committee Chair (or designee) Item #2 Roll Call and Meeting Advisories/Expectations Facilitator: Veronica Yuke, Executive Director (or designee) Item #3 Triennial Code Cycle update and timelines on proposed amendments to the 2025 California Building Standards Code Title 24, Part 1, Part 2, and Part 10

• Discussion and public input

Facilitator: Mia Marvelli, Architect, Supervisor; HCAI (or designee)

Title 24 California Building Standards Code Update

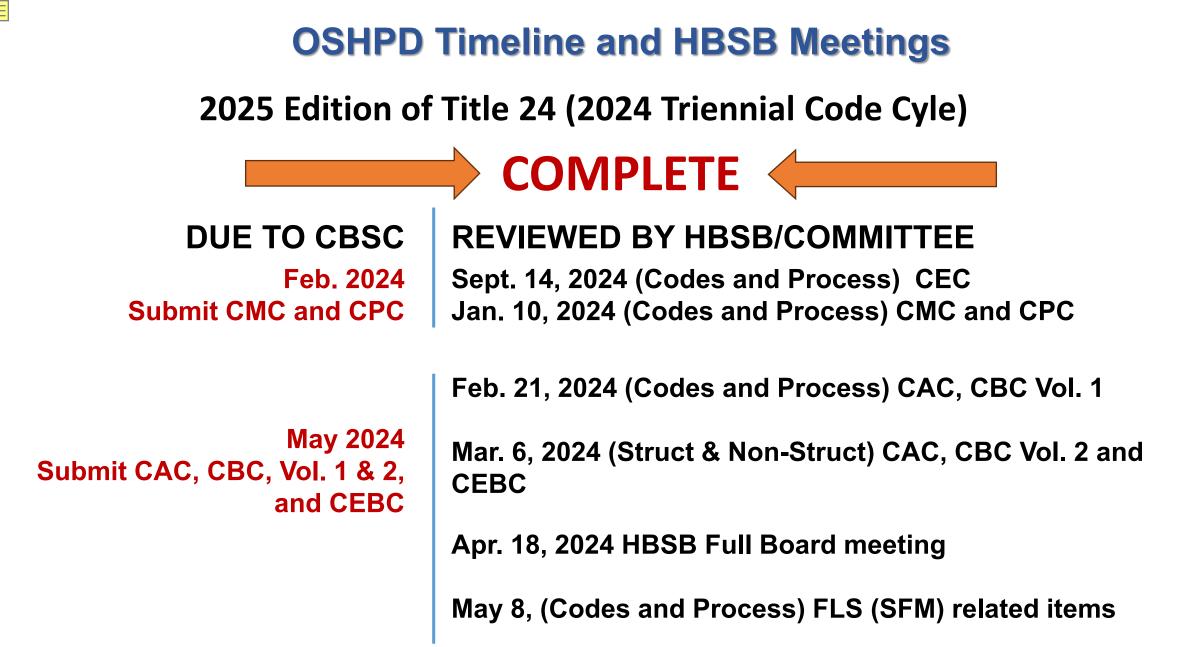


Timeline

✓ 2025 Edition of Title 24 (2024 Triennial Code Cyle)

Aug. 2023, Submit Electrical to CBSC Feb. 2024, Submit Mech and Plumb. to CBSC May 2024, Submit Admin, Building Vol. 1 & 2, Existing to CBSC







CBSC Code Advisory Committee dates			COMPLETE
GREEN — MARCH 18-19, 2024		+	APPROVED!
PEME — MARCH 25-26, 2024		+	APPRO
ACCESS — JUNE 4-5, 2024	Familiar faces:	+	
BFO — JULY 9-11, 2024	Connie Christensen-HF Ex- Officio	+	APPROVED!
SDLF — JULY 16-17, 2024	Gary Dunger-HF Belinda Young-HF	+	APPROVED!
HF — JULY 30, 2024	Bill Zellmer-HF & ACCESS	+	APPIre

Code Advisory Committees (ca.gov)



CBSC Public Comment Periods

45-Day Public Comment Period

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- PEMEMay 17 July 1 COMPLETEPEME 15-DAYJuly 29 August 13 COMPLETE
- SDLF/BFO/HFSeptember 6 October 21 COMPLETESDLF/HF 15-DAYTBD



CBSC Public Comment Period

45-Day & 15-Day Public Comment Period

PEME	May 17 – July 1 COMPLETE
PEME 15-DAY	July 29 – August 13 COMPLETE
SDLF/BFO/HF	September 6 – October 21 COMPLETE
SDLF/HF 15-DAY	TBD

Assembly Bill 869, Wood. Hospitals: seismic safety compliance, (Chapter 801, Statutes of 2024) amended Health and Safety Code (HSC) Section 130065 and added HSC Sections 130065.1, 130065.15, 130078.5 and 130078.6.

In part, this bill would authorize specified small and rural hospitals to seek approval for a delay to the January 1, 2030, compliance deadline by up to 5 years. The revised law requires HCAI to adopt new or revise existing regulations and standards. HCAI intends to further amend Part 1 during an additional comment period since the amendments are sufficiently related to the current OSHPD 03/24 Part 1 proposal and would satisfy the urgency of the legislative mandate.

https://www.dgs.ca.gov/en/BSC/Rulemaking/2024-Triennial-Cycle



CBSC Public Comment Period

HCAI is utilizing the existing CBSC rulemaking process to include code language in Part 1 of Title 24 to implement AB 869. (15-day comment period)

- V Oct. 11 Comment on the 45-day code language
- V Oct. 15 Draft 15-day regulatory changes (ET) for HCAI Legal and Exec office review (tight turn around)
- Oct. 23 HBSB Structural/Non-Structural review (need to notice ET for the meeting)
- Nov. 8 Submit to the CBSC for 15-day comment period (TBD)
- Nov. 13-29 15-day comment period (TBD)
- Dec. 11-12 HBSB Board (provide an overview)
- Jan. 14-16 CBSC public meeting review/adoption 2025 Part 1
- Feb. 17(+/-) Effective 30-days after filing with SoS (Feb. 17 +/-)



CBSC Commission Meetings

Commission Meetings

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December 14, 2023 - Code Advisory Committee Member Selection January 18, 2024 - Closed Session Unrelated to Rulemaking April 16, 2024 - Closed Session Unrelated to Rulemaking

July 18, 2024 - Cancelled

October, 17, 2024

December 17-19, 2024

January, 14-16, 2025



Commission Meetings (ca.gov)



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www.dgs.ca.gov/BSC/Contact

CBSC Rulemaking page www.dgs.ca.gov/BSC/Rulemaking/2024-Triennial-Cycle





- Any Questions?
- Any Additional Thoughts or Discussion?





Item #4 Streamlining the continued use of existing OSHPD Preapproval Programs to align with the new force equation in ASCE 7-22 for supports and attachments, and special seismic certification of nonstructural components

• Discussion and public input

Facilitator: Timothy Piland, SE, Senior Structural Engineer; HCAI (or designee)

Impact of New Provisions within ASCE 7-22 Nonstructural Components on use of HCAI *Existing* Preapprovals

ASCE 7-22 will be incorporated into the 2025 CBC, with significant changes to the seismic horizontal nonstructural component lateral forces within Chapter 13.

Specifically, Eqn 13.3-1 (F_P), Table 13.5-1 Architectural Components and Table 13.6-1 Mechanical and Electrical Components.

OFFICE USE ONLY

APPLICATION #: OPM-0669

The changes reflect a more refined approach to the behavioral response of nonstructural components in a major seismic event, based upon ATC 120 research, testing, and the collaborative efforts of the ASCE 7-22 Seismic Committee.



DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION FACILITIES DEVELOPMENT DIVISION



OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT FACILITIES DEVELOPMENT DIVISION

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

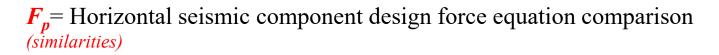


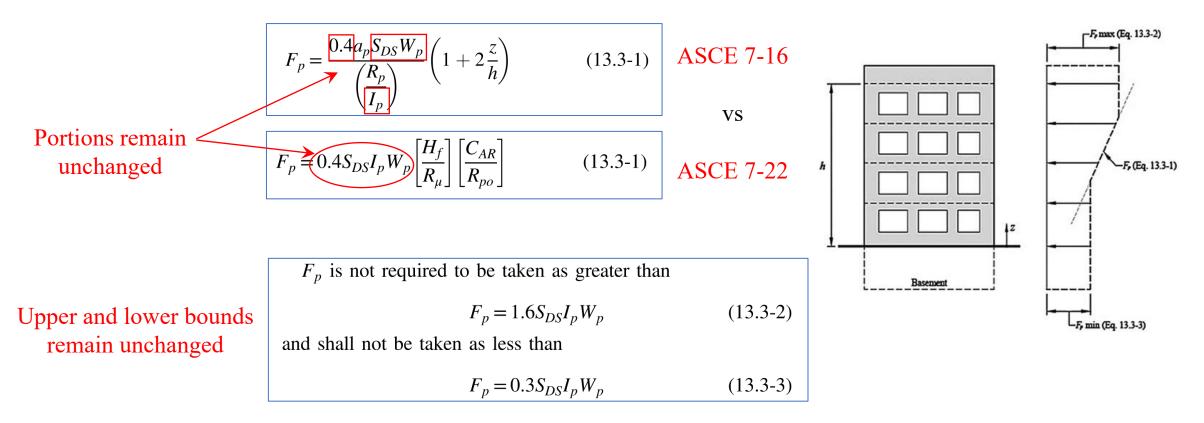
Type: X New Renewal/Update

APPLICATION FOR HCAI PREAPPROVAL OF MANUFACTURER'S CERTIFICATION (OPM)

HCAI Preapproval of Manufacturer's Certification (OPM)

ASCE 7-16 vs 7-22 Nonstructural Horizontal Seismic Component Equation Comparison







ASCE 7-16 vs 7-22 Nonstructural Component Equation Variables

 $H_f =$ Force amplification as a function of height [*Peak Floor Acceleration /Peak Ground Acceleration (PFA)/(PGA)*]

$$H_f = 1 + a_1 \left(\frac{z}{h}\right) + a_2 \left(\frac{z}{h}\right)^{10}$$
 (13.3-4)

$$H_f = 1 + 2.5 \left(\frac{z}{h}\right) \text{ Default} \qquad (13.3-5)$$

Where:

 $a_1 = 1/T_a \le 2.5$

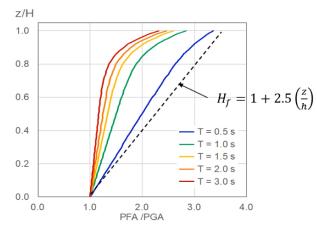
 $a_2 = 1 - 0.4 \sqrt{T_a^2} \ge 0$

z = Height above the base of structure to component attachment

h = Average roof height of structure with respect to the base

 $T_a = Lowest$ approximate fundamental period of the supporting building or nonbuilding structure in either orthogonal direction. For structures with combinations of seismic force- resisting systems (SFRSs), the SFRS that produces the lowest value of T_a shall be used.

$$\frac{F_p}{W_p} = (0.4S_{DS}) \times \left[\frac{H_f}{R_{\mu}}\right] \times \left[\frac{C_{AR}}{R_{po}}\right] \times I_p$$





F_p is *now* a function of the Building Seismic Force Resisting Systems (SFRS)

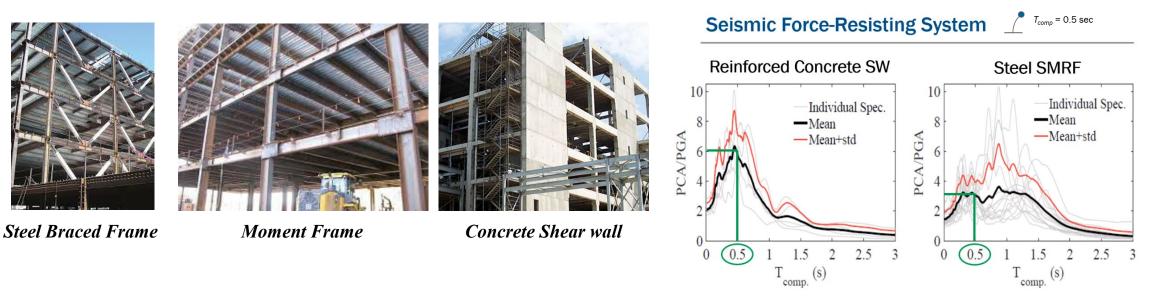
 $\boldsymbol{F_p} = 0.4 S_{DS} I_p W_p \left[\frac{H_f}{\boldsymbol{R_\mu}} \right] \left[\frac{C_{AR}}{R_{po}} \right]$

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

 R_{μ} = Structure ductility reduction factor, based upon the SFRS

 \mathbf{R} = Response modification coefficient, SFRS in Table 12.2-1

 Ω_{θ} = Overstrength factor as defined in Table 12.2-1

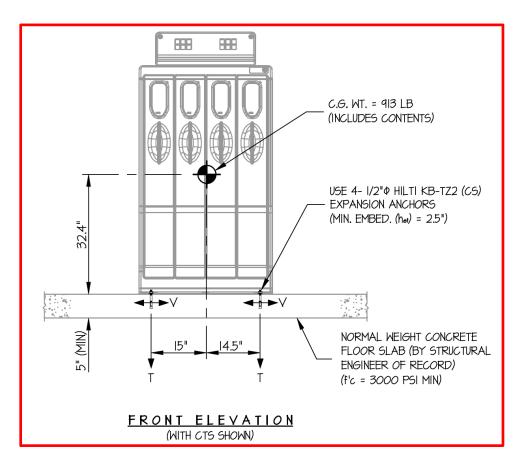


Effect of building stiffness on PCA/PGA for instrumental recordings



Adaptation of the ASCE 7-22 Nonstructural Component Changes to the Existing Preapproval Programs; OPM

OPM





Adaptation of the ASCE 7-22 Nonstructural Component Changes to the Existing Preapproval Programs; OPM

Existing OPM – No Change

- OPMs do not have an expiration date, (essentially remain valid indefinitely under the code for which they are approved).
- All existing OPMs may be used for the CBC 2025/ASCE 7-22, provided the existing OPM demands exceed the project specific requirements.

Existing Distribution System OPM – No Change

- Require the submission of project-specific layout drawings:
 - Vendors calculate project-specific demand and use capacities based on the approved distribution system OPMs.
 - *NOTE*: The S_{DS} in the approved OPMs is not related to the Demand/Capacity ratio; it is only referenced in examples accompanying the OPMs



Adaptation of the ASCE 7-22 Nonstructural Component Changes to the Existing Preapproval Programs; OSP

OSP





Adaptation of the ASCE 7-22 Nonstructural Component Changes to the Existing Preapproval Programs; OSP

Existing OSP – No Change

• Valid for use on any project (including 2025 CBC) for the S_{DS} listed in the OSP, which corresponds to the certified tested required response accelerations.

Existing Shake Table Tests

• Valid on any project (including 2025 CBC).

OSP Renewal and New Preapprovals to the 2025 CBC

- New OSPs submitted after January 1, 2026, must use seismic parameters consistent with CBC 2025/ASCE 7-22 (CAN 1-0) & updated Applications
- Manufacturers are not required to update their OSPs until they reach their natural expiration date.



Webinar on the application of the new ASCE 7-22 force equations to new or renewed OSHPD preapprovals will be presented in the near future





Questions/Thoughts?





Item #5

Proposed Policy Intent Notice (PIN) for Steel Quality Assurance (QA) and Quality Control (QC)

- Vote to approve proposed amendments
- Discussion and public input

Facilitators: Mohammad Karim, PhD, SE, Supervisor, HCAI; and Bob Lyons, District Structural Engineer; HCAI (or designees)

PIN XX: Steel Quality Assurance (QA) and Quality Control (QC)

Hospital Building Safety Board Structural and Nonstructural Regulations Committee Meeting

October 23, 2024



Office of Statewide Hospital Planning and Development

The Building Department for California's Hospitals



PIN XX: Steel QA and QC

Purpose

Streamline and simplify the transition of Steel QA/QC from the legacy requirements

То

Conform with Model Code and steel material standards



Quality Assurance (QA) vs Quality Control (QC)



Quality assurance. Monitoring and inspection tasks to ensure that the material provided and work performed by the fabricator and erector meet the requirements of the approved construction documents and referenced standards. Quality assurance includes those tasks designated "special inspection" by the applicable building code.

Quality control. Controls and inspections implemented by the fabricator or erector, as applicable, to ensure that the material provided and work performed meet the requirements of the approved construction documents and referenced standards.

(1)e are Moving Ahead

PIN XX: Steel Quality Assurance (QA) and Quality Control (QC)

- Moving from OSHPD (& DSA) specific Steel QA/QC provisions in the CBC 2022 to Model Code provisions in CBC 2025
 - Align with IBC 2024
 - Align with AISC 360 and AISC 341
 - Will be permitted to be used with the CBC 2022 or 2019 based projects

Reason for not Adopting Model Code in the CBC 2007

- IBC 2006 and AISC 360-05/341-05 was regulating both Quality Assurance and Quality Control
 - OSHPD didn't want to introduce a new mandate for Steel
 Quality Control
 - OSHPD wanted to retain Periodic and Continuous Special Inspection terminology in-lieu of adopting Observe and Perform terminology used in AISC standards

Periodic Inspection vs Observe

Periodic special inspection. Special inspection by the special inspector who is intermittently present where the work to be inspected has been or is being performed and at the completion of the work.

Observe (O): The inspector shall observe these items on a random basis. Operations that do not interfere with the ability to observe (O) for inspections need not be delayed pending these inspections. Frequency of observations shall be adequate to confirm that the work has been performed in accordance with approved construction documents.

• AISC 341: Any tasks listed as Observe (O) shall be performed at least daily.







Continuous Inspection vs Perform

Continuous special inspection. Special inspection by the **special** *inspector* who is present continuously when and where the work to be inspected is being performed.

Perform (P). Tasks listed as Perform (P) for QA in the steel material standards shall be performed for each joint or member by the QAI/special inspector and shall be documented including the part inspected, date inspected, and results of the inspection.

Model Code (IBC 2024) Provisions for Ordinary Loads (Non-Wind or Seismic Loads)

1705.2 Steel construction. The *special inspections* and nondestructive testing of steel construction

1705.2.1 Structural steel: AISC 360

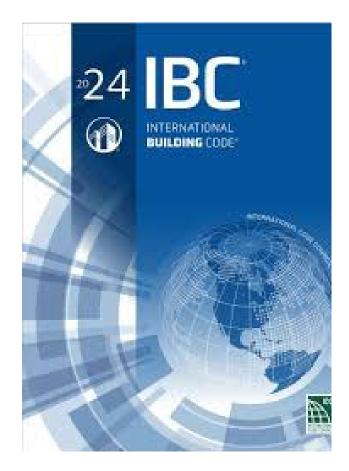
1705.2.2 Structural stainless steel: **AISC** 370

1705.2.3 Cold-formed steel deck: **SDI QA/QC**

1705.2.4 Open-web steel joists and joist girders: **SJI 100 and 200**

1705.2.5 Cold-formed steel trusses spanning 60 feet or greater

1705.2.6 Metal building systems.



Model Code (IBC 2024) Provisions for Wind Resistance

1705.12 Special inspections for wind resistance. Special inspections for wind 1705.12.2 Coldformed steel lightframe construction



Model Code (IBC 2024) Provisions for Seismic Resistance

1705.13 Special inspections for seismic resistance. *Special inspections* for seismic resistance

1705.13.1 Structural steel. *Special inspections* for seismic resistance in Accordance with AISC 341

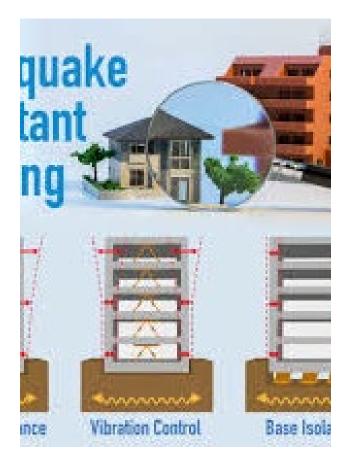
1705.13.1.1 Seismic force-resisting systems

1705.13.1.2 Structural steel elements

1705.13.3 Cold-formed steel light-frame construction

1705.14 Testing for seismic resistance. Nondestructive testing of *structural steel elements* in the *seismic force-resisting systems* shall in accordance with the quality assurance requirements of AISC 341.

1705.14.1.1 Seismic force-resisting systems 1705.14.1.2 Structural steel elements



CBC 2022 Chapter 17A: Provisions for Ordinary Loads (Non-Wind or Seismic Loads)

1705A.2.1 Structural steel. Special inspections and

nondestructive testing ... shall be in accordance with ... *quality control requirements of AISC 360, AISC 341* and AISC 358.

TYPE	CONTINUOUS SPECIAL INSPECTION	PERIODIC SPECIAL INSPECTION	REFERENCED STANDARD	CBC REFERENCE®	
1. Material identification and testing of high-strength bolts, nuts and washers:	-	•			
a. Identification markings to conform to ASTM standards specified in the approved construction documents.	_	X	RCSC: 1.5, AISC 360: A3.3, J3.1 and applicable ASTM material standards	2202A.1, [DSA- SS/CC] 2202.1	
b. Manufacturer's certificate of compliance required.	_	X	RCSC: 1.5 & 2.1; AISC 360: A3.3 & N3.2		
c. Testing of high-strength bolts, nuts and washers.	_	_	RCSC: 7.2, Applicable ASTM material standards	1705A.2.6, [OSHPD 1 & 4] 2213A.1	
2. Inspection of high-strength bolting:		•			
a. Snug-tight joints.	—	X			
b. Pretensioned and slip-critical joints using turn-of-nut with matchmarking, twist-off bolt or direct tension indicator methods of installation	_	X	RCSC: 7-9, AISC 360: J3.1, J3.2,	1705A.2.6, 2204A.2, [DSA-	
c. Pretensioned and slip-critical joints using turn-of-nut without matchmarking or calibrated wrench methods of installation.	Х	—	M2.5 & N5.6	SS/CC] 2204.2	
3. Material identification and testing of structural steel and cold-formed steel dec	k:		•		
a. For structural steel, identification markings to conform to AISC 360.	_	X	AISC 360: A3.1	2202A.1, [DSA- SS/CC] 2202.1	

TABLE 1705A.2.1 REQUIRED SPECIAL INSPECTIONS AND TESTS OF STEEL CONSTRUCTION



CBC 2022 Chapter 17A: Provisions for Seismic Resistance

1705A.13.1.1 Seismic force-resisting systems inspection shall be performed in accordance with the quality assurance requirements of AISC 341 *as modified by Section 1705A.2.1 of this code*.



CBC 2022 Chapter 17: Provisions for Ordinary Loads (Non-Wind or Seismic Loads)

1705.2.1 Structural steel. Special inspections and nondestructive testing ... shall be in accordance with ... quality control requirements of AISC 360.

 [OSHPD 1R, 2 & 5] Special inspections ... shall be in accordance with the quality assurance inspection requirements of AISC 360 ... and quality control requirements of AISC 360, AISC 341 and AISC 358.

The following provisions of AISC 360, Chapter N are not adopted:

2. N5, Item 2 (Quality Assurance).

. . .

. . .

• Replacement table similar to Table 1705A.2.1 was not added. Hence there is no qauality assurance requirements for steel gravity framing.



CBC 2022 Steel Special Inspection Table

ТҮРЕ	CONTINUOUS SPECIAL	PERIODIC SPECIAL	REFERENCED STANDARD	CBC REFERENCE ^a
	INSPECTION	INSPECTION	CIANDAND	NET ENERGE
. Material identification and testing of high-strength bolts, muts and washers:				
a. Identification markings to conform to ASTM standards specified in the approved construction documents.	—	X	RCSC: 1.5, AISC 360: A3.3, J3.1 and applicable ASTM material standards	2202A.1, [DSA SS/CC] 2202.1
b. Manufacturer's certificate of compliance required.	_	X	RCSC: 1.5 & 2.1; AISC 360: A3.3 & N3.2	_
c. Testing of high-strength bolts, nuts and washers.	_	_	RCSC: 7.2, Applicable ASTM material standards	1705A.2.6, [OSHPD 1 & 4] 2213A.1
. Inspection of high-strength bolting:				
a. Snug-tight joints.	-	X		
b. Pretensioned and slip-critical joints using turn-of-nut with matchmarking, twist-off bolt or direct tension indicator methods of installation	—	X	RCSC: 7-9, AISC 360: J3.1, J3.2,	1705A.2.6, 2204A.2, [DSA
c. Pretensioned and slip-critical joints using turn-of-nut without matchmarking or calibrated wrench methods of installation.	Х	-	M2.5 & N5.6	SS/CC] 2204.2
. Material identification and testing of structural steel and cold-formed steel dec	k:			
a. For structural steel, identification markings to conform to AISC 360.	_	X	AISC 360: A3.1	2202A.1, [DSA SS/CC] 2202.1
b. For other steel, identification markings to conform to ASTM standards specified in the approved construction documents.	_	X	Applicable ASTM material standards	2202A.1, [DSA SS/CC] 2202.1
c. Manufacturer's certified test reports.	—	X	AISC 360: A3.1& N3.2	_
d. Testing of unidentified steel.	_	-	Applicable ASTM material standards	2202A.1, [DSA SS/CC] 2202.1
. Material identification of welding consumables and testing of welded elements:				
 a. Identification markings to conform to AWS specification in the approved construction documents. 	_	X	AISC 360, A3.5 & N3.2 and applicable AWS A5 documents	_
b. Manufacturer's certificate of compliance required.	_	X	AISC 360: N3.2	_
c. Nondestructive testing of welded joints.	_	_	AISC 360: N5.5	_
. Inspection of welding:				
a. Structural steel and cold-formed steel deck:				
1. Complete and partial joint penetration groove welds	Х	-		
2. Multipass fillet welds.	X	-	AISC 360:	
3. Single-pass fillet welds > $\frac{3}{16}$ "	Х	-	J2, M2.4, & M4.5, AWS D1.1	1705A.2.1, 1705A.2.5
4.Plug and slot welds.	Х	_	AWS D1.8	1,00111210
 Single-pass fillet welds ≤ ⁵/₁₆" 	_	X		
6. Floor and roof deck welds.	_	X	AWS D1.3, SDI QA/QC	1705A.2.1, 1705A.2.2 1705A.2.5
7. End-welded studs.	_	X	AWS D1.1	1705A.2.5, 2213A.2, [DSA SS/CC] 2212.6.
8. Welded sheet steel for cold-formed framing members	_	X	AWS D1.3	1705A.2.5, 1705A.2.4.1
b. Reinforcing steel				Table 1705A.3 Item 2
. Inspection of steel frame joint details for compliance:				
a. Details such as bracing and stiffening.	-	X	(100.250	
b. Member locations.	_	X	AISC 360: N5.8	1705A.2.1
c. Application of joint details at each connection.		X	110.0	

TARI E 1705A 2.1



AISC 360: Welding Inspection

Table N5.4-1 Inspection Tasks Prior to We	lding	
Inspection Tasks Prior to Welding	QC	QA
Welder qualification records and continuity records	Р	0
WPS available	Р	Р
Manufacturer certifications for welding consumables available	Р	Р
Material identification (type/grade)	0	0
 Welder identification system Fabricator or erector, as applicable, shall maintain a system by which a welder who has welded a joint or member can be identified. Die stamping of members subjected to fatigue shall be prohibited unless approved by the engineer of record. 	0	0
Fit-up of groove welds (including joint geometry) • Joint preparations • Dimensions (alignment, root opening, root face, bevel) • Cleanliness (condition of steel surfaces) • Tacking (tack weld quality and location) • Backing type and fit (if applicable)	0	0
Fit-up of CJP groove welds of HSS T-, Y-, and K-connections without backing (including joint geometry) • Joint preparations • Dimensions (alignment, root opening, root face, bevel) • Cleanliness (condition of steel surfaces) • Tacking (tack weld quality and location)	Ρ	0
Configuration and finish of access holes	0	0
Fit-up of fillet welds Dimensions (alignment, gaps at root) Cleanliness (condition of steel surfaces) Tacking (tack weld quality and location) 	0	0
Check welding equipment	0	-

Inspection Tasks During Welding	QC	QA
Control and handling of welding consumables Packaging Exposure control 	0	0
No welding over cracked tack welds	0	0
Environmental conditions Wind speed within limits Precipitation and temperature 	0	0
WPS followed • Settings on welding equipment • Travel speed • Selected welding materials • Shielding gas type/flow rate • Preheat applied • Interpass temperature maintained (min./max.) • Proper position (F, V, H, OH)	0	0
Welding techniques Interpass and final cleaning Each pass within profile limitations Each pass meets quality requirements 	0	0
Placement and installation of steel headed stud anchors	Р	Р

TABLE N5.4-3 Inspection Tasks After Web	ding	
Inspection Tasks After Welding	QC	QA
Welds cleaned	0	0
Size, length, and location of welds	Р	Р
Welds meet visual acceptance criteria • Crack prohibition • Weld/base-metal fusion • Crater cross section • Weld profiles • Weld size • Undercut • Porosity	Ρ	Ρ
Arc strikes	Р	Р
k-area ^[a]	Р	Р
Weld access holes in rolled heavy shapes and built-up heavy shapes $^{\left[b\right] }$	Р	Р
Backing removed and weld tabs removed (if required)	Р	Р
Repair activities	Р	Р
Document acceptance or rejection of welded joint or member ^[c]	Р	Р
No prohibited welds have been added without the approval of the engineer of record	0	0
^[a] When welding of doubler plates, continuity plates, or stiffeners has been pe inspect the web k-area for cracks within 3 in. (75 mm) of the weld.	rformed in the I	k-area, visually

inspect the web k-area for cracks within 3 in. (75 nm) of the weld. "@Atter rolled heavy shapes (see Section A3.1e) and built-up heavy shapes (see Section A3.1e) are welded, visually inspect the weld access hole for cracks. "@Dis stamping of members subjected to fatigue shall be prohibited unless approved by the engineer of record."



AISC 360: Welding Inspection

TABLE N5.6-1 Inspection Tasks Prior to Bolting				
Inspection Tasks Prior to Bolting	QC	QA		
Manufacturer's certifications available for fastener materials	0	Р		
Fasteners marked in accordance with ASTM requirements	0	0		
Correct fasteners selected for the joint detail (grade, type, bolt length if threads are to be excluded from shear plane)	0	0		
Correct bolting procedure selected for joint detail	0	0		
Connecting elements, including the appropriate faying surface condition and hole preparation, if specified, meet applicable requirements	0	0		
Pre-installation verification testing by installation personnel observed and documented for fastener assemblies and methods used	Р	0		
Protected storage provided for bolts, nuts, washers, and other fastener components	0	0		

TABLE N5.6-2 Inspection Tasks During Bolting

Inspection Tasks During Bolting	QC	QA
Fastener assemblies placed in all holes, and washers and nuts are positioned as required	0	0
Joint brought to the snug-tight condition prior to the pretensioning operation	Ο	0
Fastener component not turned by the wrench prevented from rotating	0	0
Fasteners are pretensioned in accordance with the RCSC <i>Specification</i> , progressing systematically from the most rigid point toward the free edges	0	0

TABLE N5.6-3 Inspection Tasks After Bolting QC QA

moposition racito Arton Dorang	40	
Document acceptance or rejection of bolted connections	Р	Р



AISC 341: Seismic Welding Inspection

TABLE J7.1 Documentation of Visual Inspection After Welding					
	QC		QA		
Documentation of Visual Inspection After Welding	Task	Doc.	Task	Doc.	
Welds meet visual acceptance criteria					
 Crack prohibition 					
– Weld/base-metal fusion					
- Crater cross section	Р	D	Р	D	
- Weld profiles and size					
– Undercut					
– Porosity					
<i>k</i> -area ^[a]	Р	D	Р	D	
Placement of reinforcing or contouring fillet welds (if required)	Р	D	Р	D	
Backing removed, weld tabs removed and finished, and fillet welds added (if required)	Р	D	Р	D	
^[a] When welding of doubler plates, continuity plates, or stiffeners has been performed in the <i>k</i> -area, visually inspect the web <i>k</i> -area for cracks within 3 in. (75 mm) of the weld. The visual inspection shall be performed no sooner than 48 hours following completion of the welding.					
Note: Doc. = documentation			_		

TABLE J9.1 Other Inspection Tasks					
	QC QA				
Other Inspection Tasks	Task	Doc.	Task	Doc.	
RBS requirements, if applicable					
- Contour and finish	Р	D	Р	D	
 Dimensional tolerances 					
Protected zone—no holes or unapproved attachments made by fabricator or erector, as applicable	Р	D	Р	D	
Note: Doc. = documentation	-	-		-	



AISC 341: Composite Structures and H-Piles Inspection

TABLE J10.1 Inspection of Composite Structures Prior to Concrete Placement				
Inspection of Composite Structures	Q	С	Q	A
Prior to Concrete Placement	Task	Doc.	Task	Doc.
Material identification of reinforcing steel (type/grade)	0	-	0	-
If welded, determination of carbon equivalent for reinforcing steel other than ASTM A706/A706M	0	-	0	-
Proper reinforcing steel size, spacing, and orientation	0	-	0	-
Reinforcing steel has not been rebent in the field	0	-	0	-
Reinforcing steel has been tied and supported as required	0	-	0	-
Required reinforcing steel clearances have been provided	0	-	0	-
Composite member has required size	0	-	0	-
Note: Doc. = documentation - = indicates no documentation is required				

TABLE J10.2 Inspection of Composite Structures During Concrete Placement					
Inspection of Composite Structures QC QA					
During Concrete Placement	Task	Doc.	Task	Doc.	
Concrete: Material identification (mix design, compressive strength, maximum large aggregate size, maximum slump)	0	D	0	D	
Limits on water added at the truck or pump	0	D	0	D	
Proper placement techniques to limit segregation	0	-	0	-	
Note: Doc. = documentation - = indicates no documentation is required					

TABLE J11.1 Inspection of H-Piles								
	QC		Q	QA				
Inspection of Piling	Task	Doc.	Task	Doc.				
Protected zone—no holes or unapproved attachments made by the responsible contractor, as applicable	Р	D	Р	D				
Note: Doc.= documentation								



CBC 2025 Chapters 17 & 17A

- Special Inspections and Testing for Structural Steel shall be in accordance with IBC 2024, AISC 360 and AISC 341, as applicable, with minor modification in the CBC 2025
- Special Inspection of Cold-Formed Steel shall be in accordance with AISI S240, with minor modification in the CBC 2025
- PIN will permit essentially the CBC 2025 provisions for the CBC 2022 and 2019 codes



PIN XX: Steel Quality Assurance (QA) and Quality Control (QC)

Policy:

- 1. Basic Requirements: CBC 2025 Basics
- 2. Quality Assurance (QA) Tasks for Structural Steel: Reference tables for all tasks
- **3. Fabricator and Erector Quality Control (QC) Program:** AISC 360, AISC 341, SDI QA/QC and AISI S240
- 4. Quality Assurance (QA) Inspections or Special Inspections, and Nondestructive Testing: AISC 360, SDI QA/QC and AISI S240
- 5. Quality Assurance (QA) Tasks for Structural Steel: AISC 360
- 6. Quality Assurance (QA) Tasks for Structural Steel Seismic Force Resisting System (SFRS): AISC 341
- 7. Implementation on HCAI Projects: CAC 2025 & CBC 2025



Questions, Comments, Suggestions?





Item #6

New automated Seismic Compliance Project portal to facilitate submittals of updated compliance plans

Discussion and public input

Facilitator: Ali Sumer, PhD, SE, Supervisor, HCAI (or designee)





New Automated Seismic Compliance Project Portal [Coming Soon]

HBSB SNSR Meeting 10/23/2024

Existing Regulations

2022 California Administrative Code

1.4.2 Compliance plan submittal ... Deadline to submit: January 1, 2001

1.4.3 Compliance plan submittal extension. ... No later than January 1, 2002.

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



Existing Regulations

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

- 1. Obtain a geotechnical report (if necessary);
- 2. Architecture and engineering design/construction document preparation;
- 3. Local approvals;
- 4. Office review, approval and permitting;
- 5. Approval of Department of Health Services Licensing and Certification, and any other required licensing;
- 6. Permanent relocation of acute care services to other buildings or facilities (identify services affected);
- 7. Temporary/interim relocation of acute care services to other buildings including the duration of the approved program flexibility plan pursuant to Health and Safety Code Section 1276.05;
- 8. Construction period; and
- 9. Beneficial occupancy.



Compliance Plan Update

1.4.5 Compliance plan update/change notification. Should a hospital owner change an approved Compliance Plan, the hospital shall document any changes and submit for review and approval to the Office an amended Compliance Plan. Changes are defined as alterations.....



The new system will gather information through a web portal

Facility level information

- Ownership type
- Owner information
- Operator information
- Multiple facility contacts to manage application
- Multiple consultant contacts capability



Building level information

- All buildings list (pre-populated in the application)
- Compliance type if applicable (retrofit/replace)
- Description and date of milestones for each building
- Final compliance date



Buildings with extension requests beyond 2030

- Narrative for reasoning
- Financial documents when required
- Detailed schedule and milestones



Changes to Compliance Plan

The portal will allow proposed revisions to the existing compliance plan

- The user can have access to the existing plan
- Amendment copies to the existing plan and creates a temporary compliance plan (proposed)
- After HCAI review, if accepted, Amendment becomes current compliance plan. The previous plan gets saved as "historical version"
- There is no limit on number of revisions



Transparency: Website updates

- Portal data will be synchronized with the website.
- Bi-weekly update will show latest status of submitted compliance plan details
- Decisions/review status by HCAI
- Enforcement status of each building, including fines.



Questions?



Item #7 Assembly Bill (AB) 1882 (Chapter 584) requires facilities to report specific services provided in each building, and the 2024-period reporting portal will be opened on November 1, 2024

• Discussion and public input

Facilitator: Ali Sumer (or designee)

Item #8

Proposed PIN for design and implementation of anchorage and bracing of NPC items required to meet NPC compliance deadlines
Discussion and public input

Facilitator: Ali Sumer (or designee)



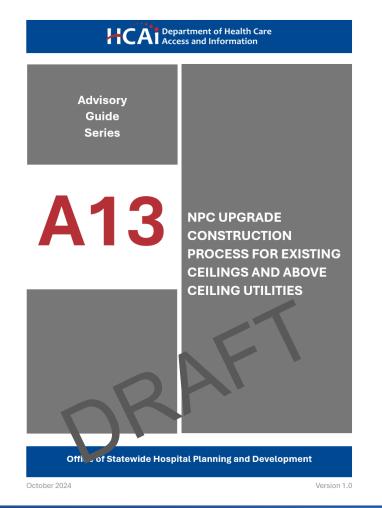


A13 - Advisory Guide Series

NPC UPGRADE CONSTRUCTION PROCESS FOR EXISTING CEILINGS AND ABOVE CEILING UTILITIES

HBSB SNSR Meeting 10/23/2024

Purpose



- For buildings not constructed under an OSHPD permit (or pre-1982/83, information regarding the layout and bracing conditions of utilities above ceilings is limited or incorrect.
- Surveying these utilities disrupts hospital operations
- Advisory Guide is to minimize disruption and expedite NPC upgrade construction for components at or above ceilings.
- Currently it is in DRAFT version, not published yet.





- Advisory Guide is solely on the NPC upgrade of existing components and systems at or above ceilings.
- Advisory Guide does not apply to wall-mounted equipment, floor-mounted equipment, new equipment, systems and utilities, or deferred submittals.



Assessing Existing Conditions





- DPOR should review record drawing
- Visit the site to observe and document typical conditions in various locations



Construction Drawings

Use of Pre-approved Details

- Acceptable to use more than one OPM (with some conditions)
- Pre-approved details shall be shown on the drawings

Application and Plan Review

- Plan review will be performed at the corresponding HCAI region, following the typical plan approval and permitting process.
- Since the construction cost is unknown, the project review cost may be billed hourly by HCAI.



Testing, Inspections and Observation (TIO)

- Identify phases/stages/areas on the approved plans
- If the scope has a large area, multiple milestones are recommended.
- The first milestone shall be reserved for On-Site First Assessment (OSFA)



Pre-Construction Meeting

HCAI staff will address issues and concerns to clarify the construction TIO process

Construction TIO Process

- The first phase/stage/area identified in the TIO form will be completed with HCAI staff presence, where possible, to provide critical feedback.
- Construction in each phase/stage/area shall be documented, photographed and maintained by the DPOR (and a copy kept by the facility).



Site Verification

- The contractor or licensed professional is permitted to perform site verification but the DPOR shall take responsibility for the attachment detail and by documenting bracing locations and dimensions as part of the layout drawing.
- Decisions for adequacy of the approved details compared to the existing conditions shall be done only by the licensed professional.
- The braces that are added during construction should be noted on the layout drawings with accurate locations identified by the DPOR.
- It is the responsibility of the DPOR to present the layout drawings for HCAI field staff when requested.
- Each area needs to be shown on the layout drawings before closing out the area.



Utility and above Ceiling Braced Equipment Layout

- The DPOR shall submit a layout plan or as-builts to HCAI field staff showing the locations of all new braces, existing verified braces.
- The layout plan needs to be updated every time a new location is opened, showing the layout of the existing utility lines.
- Utilities that require no added bracing, either because existing bracing is adequate, or because the utility is exempt from bracing requirements, may be listed for each room, rather than shown.
- The transition from where bracing is required to where bracing is not required, should be clearly shown and noted.
- The layout drawing must be submitted and approved prior to requesting Construction Final from the HCAI field staff.



Existing Braces With Existing Drawings:

- For non-OSHPD projects (plan submittal to the Office prior to 1982/1983 with bracing layout, the DPOR shall implement an onsite verification process
- Verification can be through various methods, including torque testing, pull testing, visual inspections, etc.
- Any observed deviation shall be evaluated by the design professional of record.

Existing Braces Without Existing Drawings:

- The DPOR shall verify the bracing details and spacing and evaluate for conformance.
- The DPOR shall provide calculations to justify existing conditions if asked by the HCAI field staff.
- The DPOR shall include a sketch of existing bracing detail under the layout drawings.
- Similar to existing braces with documentation above, the DPOR shall establish a verification criteria throughout the area of work.



ACD vs NMA:

- Changes to bracing locations and utility layout based on discovered conditions will be incorporated into the layout drawing and would not be classified as either an NMA or an ACD.
- If a condition is discovered that can be accommodated by using another detail in the OPM or the approved drawings, this will be incorporated into the layout drawing and would be classified as either an NMA or an ACD.
- If the OPM detail is not yet included in the approved drawings, it shall be added as an NMA. Please note that HCAI does not allow OPMs to be brought into a project through the NMA process, they must be ACD. This NMA process is an exception, as it only applies to this NPC upgrade guide. These details will be incorporated into the layout drawing before closeout.
- The OPM detail is required to be shown on the drawings per 2022 CAC Section 7-115(d)2.



ACD vs NMA:

- If a condition is discovered that requires a minor non-material modification to a project approved detail that would generally be considered a non-material alteration
- If the change requires a calculation where determination cannot be made by inspection, it must be submitted as an ACD.
- If a material alteration is required, then an ACD must be prepared and approved by HCAI. If the DPOR can provide a stamped sketch to the construction team such that direction is provided before the space must be closed, then construction may proceed with inspection performed to the stamped detail.
- DPOR shall issue the ACD to HCAI within 24 hours. Please note, any work performed in this manner is subject to the Office's review and possible destructive investigation.



Final Closeout of Construction Project:

Layout drawings must be submitted and approved by HCAI prior to project closeout.

- The layout drawings shall have a statement by the DPOR where all conditions in the area are compliant with the NPC requirements per 2022 CAC.
- Photographs need not be uploaded to the eSP HCAI project portal. The photographs with proper documentation are required to be kept with the facility and the design professional until the NPC 5 upgrade (which also includes NPC 4 or NPC 4D upgrade) is achieved. Please note that this documentation storage duration may be many years after completion of the project.



Construction Phase

NPC Upgrade Request:

- After completing all NPC 4 or NPC-4D construction projects, submit an updated reconciliation report under the previously accepted SRU project.
- The reconciliation report shall include the list of all relevant projects completed as part of the NPC upgrade.
- SCU will review and approve the reconciliation report, then change the rating and send an upgrade approval letter to the facility contact.



Questions?



Item #9

Seismic compliance update on recently signed legislation: AB 869 (Chapter 801) and Senate Bill (SB) 1447 (Chapter 896)

• Discussion and public input

Facilitator: Ali Sumer (or designee)





AB 869 Hospitals: Seismic Safety Compliance

HBSB SNSR Meeting 10/23/2024

Existing Law

Existing law requires, no later than January 1, 2030, owners of all acute care inpatient hospitals to either demolish, replace, or change to nonacute care use all hospital buildings not in substantial compliance with specified seismic safety standards

or

to seismically retrofit all acute care inpatient hospital buildings so that they are in substantial compliance with those seismic safety standards.



Assembly Bill No. 869

CHAPTER 801

An act to amend Section 130065 of, and to add Sections 130065.1, 130065.15, 130078.5, and 130078.6 to, the Health and Safety Code, relating to hospitals.

[Approved by Governor September 28, 2024. Filed with Secretary of State September 28, 2024.]



Definitions

- "Critical access hospital" means a hospital designated by the State Department of Public Health as a critical access hospital, and certified as such by the Secretary of the United States Department of Health and Human Services under the federal Medicare Rural Hospital Flexibility Program.
- "Distressed Hospital Loan Program recipient" is a hospital that received a loan pursuant to Chapter 4 (commencing with Section 129380) of Part 6. This may also include a future program recipient, should the Legislature appropriate additional state funding to the program and extend the date identified in Section 129387.
- **Health care district hospital**" is a hospital authorized pursuant to Division 23.
- "Rural hospital" means a "rural general acute care hospital" as set forth in subdivision (a) of Section 1250 or a hospital located in a rural or frontier medical study service area, as defined by the California Healthcare Workforce Policy Commission.

"Small hospital" is a hospital with 50 beds or fewer.



Notwithstanding the January 1, 2030, seismic compliance deadline outlined in Section 130065, a Distressed Hospital Loan Program recipient, a small hospital, a rural hospital, a critical access hospital, or a health care district hospital, except as otherwise provided in this section, may seek approval from the department for a delay to the compliance deadline by up to three vears with the submission and departmental approval of a seismic compliance plan, as described in subdivision (d), and, if necessary, a Nonstructural Performance Category-5 evaluation report.



(1) Hospitals that belong to integrated health care systems with two or more separately licensed hospital facilities shall be ineligible for a delay under this section, including a health care district hospital that has a contractual agreement with a health system that imposes upon the health system any financial responsibility for the health care district's infrastructure costs for compliance with Section 130065, unless the entire integrated health care system is determined by the department to be in financial distress.

(2) Paragraph (1) shall not apply to any of the following:

- (A) A rural hospital with <u>fewer than 80 general acute care beds</u> and general acute care hospital revenue of seventy-five million dollars (\$75,000,000) or fewer, as reported to the department pursuant to Section 128740 in 2020.
- (B) A hospital that is part of an integrated health care system that is operated by a <u>health care district</u> or a nonprofit corporation that is affiliated with the health care district hospital owner by means of the district's status as the nonprofit corporation's sole corporate member.
- (C) A <u>health care district</u> hospital that does not have a contractual, management, lease, or operating agreement with a health system that imposes upon the health system any financial responsibility for the health care district's infrastructure cost for compliance with Section 130065.



A Distressed Hospital Loan Program recipient, a small hospital, a rural hospital, a critical access hospital, or a health care district hospital, except as otherwise specified, with a building that is not anticipated to be in full compliance with the seismic safety regulations or standards described in Section 130065 when this section becomes operative shall provide all of the following to the department:

(1) A Nonstructural Performance Category-5 evaluation report in compliance with Article 11 of Chapter 6 of Title 24 of the California Administrative Code for each noncompliant building, if necessary, by no later than January 1, 2025.

(2) The hospital's seismic compliance plan in accordance with Section 1.4 of Article 1 of Chapter 6 of Title 24 of the California Administrative Code and related regulations, by no later than January 1, 2026. The seismic compliance plan shall outline steps, including milestones, to achieve compliance with seismic safety standards at the earliest reasonable date, but by no later than January 1, 2033.

(3) (see the next slide..)



(3) The subject hospital and the department shall identify at least two major milestones relating to the seismic compliance plan that will be used as the basis for determining whether the hospital is making adequate progress toward meeting the subject hospital's seismic compliance deadline. The seismic compliance plan is subject to departmental review for reasonableness.

- (A) If the seismic compliance plan includes a compliance schedule that is delayed beyond the 2030 seismic compliance deadline described in Section 130065, the hospital shall submit any documentation requested by the department to assist the department in its review of the reasonableness of the compliance schedule.
- (B) The department shall have 120 days to approve or deny the hospital's seismic compliance plan and any delay to the seismic compliance deadline. If the department determines the compliance schedule is unreasonable based on the information submitted, the department shall notify the hospital and provide the department's rationale for its determination. The hospital shall be given the opportunity to address the identified concerns or to provide additional information to substantiate the compliance schedule.



- (1) The department shall have the discretion to additionally delay the amount of time by which a Distressed Hospital Loan Program recipient, a small hospital, a rural hospital, a critical access hospital, or a health care district hospital shall comply with Section 130065 by two years, up to a maximum of January 1, 2035. This delay may be authorized as necessary for hospitals that continue to experience financial distress or that need to deal with contractor, labor, or material delays, acts of God, governmental entitlements, or other circumstances beyond the hospital's control. If up to an additional two-year delay is granted, the hospital shall submit a revised construction schedule and associated milestones to the department.
- (2) A Distressed Hospital Loan Program recipient, a small hospital, a rural hospital, a critical access hospital, or a health care district hospital, except as otherwise specified, that is granted a delay in compliance with the requirements of Section 130065 pursuant to this subdivision shall provide the department with any information that the department deems necessary, including, but not limited to, information to assess whether the hospital is in financial distress or continues to be in financial distress.



- (3) For eligible hospitals requesting an additional delay under this subdivision due to financial distress, the department make a determination of financial distress using financial criteria, including, but not limited to, days cash on hand, current ratio, access to working capital, operating margin, cash burn rate, the financial impact of mandatory seismic compliance costs on the hospital or integrated health care system, and other methodologies developed pursuant to Chapter 4 (commencing with Section 129380) of Part 6.
- (4) If the department determines that an eligible hospital or integrated health care system is no longer in financial distress and is not likely to return to financial distress due to complying with seismic safety standards, the hospital or integrated health care system shall submit a revised seismic compliance plan to the department for review and approval one month after being informed of the department's determination that the hospital or integrated health care system is no longer in financial distress. Notwithstanding any delay of the January 1, 2030, seismic requirements granted to the hospital or integrated health care system pursuant to subdivision (b), the department may adjust compliance deadlines to reflect the fact that the hospital or integrated system is no longer in financial distress.



- (f) Notwithstanding any other provisions in this chapter, a hospital seeking a delay under this section shall comply with requirements for a seismic compliance plan in accordance with Section 1.4 of Article 1 of Chapter 6 of Title 24 of the California Administrative Code and related regulations.
- (g) All hospitals determined eligible to delay compliance with Section 130065 pursuant to this section shall comply with Section 130065 no later than January 1, 2035. Failure to comply with the revised construction schedule or meet any major milestones established by the department and the hospital shall result in the assessment of a fine of five thousand dollars (\$5,000) per calendar day until the requirements or milestones, respectively, are met.
- (h) The department shall provide support to a Distressed Hospital Loan Program recipient, a small hospital, a rural hospital, a critical access hospital, or a health care district hospital requesting a delay under this section to explore the opportunities under the Small and Rural Hospital Relief Program to assist with seismic compliance.
- (i) Hospitals that fail to meet any milestone or seismic compliance deadline approved in its compliance plan shall not be issued a building permit for any building in the facility except those required for <u>seismic compliance</u>, <u>maintenance</u>, and <u>emergency repairs</u> until the milestone is met and the hospital is adequately progressing toward meeting the subject hospital's seismic compliance, as determined by the department.



- (j) This section shall not extend any deadlines for <u>Structural Performance Category-1</u> buildings to achieve structural integrity to no longer pose a potential risk of collapse or a significant risk of loss of life.
- (k) Notwithstanding any other law, any information used by the department to determine a hospital's financial status for purposes of this section is confidential and shall not be subject to disclosure under the California Public Records Act (Division 10 (commencing with Section 7920.000) of Title 1 of the Government Code).
- (I) The department shall adopt regulations and standards, or revise existing regulations and standards, or both, to implement the provisions of this section. Regulatory submissions made by the department to the California Building Standards Commission pursuant to this section shall be deemed to be emergency regulations and shall be adopted as such. The adoption of these regulations shall be deemed to be an emergency and necessary for the immediate preservation of the public peace, health and safety, and general welfare.



130078.5.

(a) The department shall expand eligibility for grants for single- and two-story general acute care hospitals located in rural areas with fewer than 80 general acute care beds and general acute care hospital revenue of seventy-five million dollars (\$75,000,000) or less, as reported to the department pursuant to Section 128740 in 2020.

(b) (1) Grants pursuant to this chapter shall provide general acute care hospitals described in subdivision (a) with funds to secure an SPC-4D assessment for purposes of planning for, and estimating the costs of, complying with Section 130065.

(2) The department shall conduct outreach to general acute care hospitals described in subdivision (a) regarding the availability of these grants and provide technical assistance to hospitals applying for the grants.

(3) A general acute care hospital receiving a grant for an assessment pursuant to this subdivision shall provide the estimated cost of SPC-4D compliance to the department.

(c) (1) Subject to paragraphs (2) and (3), general acute care hospitals that have received a grant for an assessment pursuant to subdivision (b) may apply for a grant for purposes of complying with Section 130065.
(2) Subject to paragraphs (2) and (3), for general acute care hospitals that already have an SPC-4D assessment approved by the department, the department may award the general acute care hospital grant money for purposes of complying with Section 130065.



130078.6.

(a) If state funds are appropriated to the Small and Rural Hospital Relief Fund in the future for the purpose of complying with Section 130065, before being awarded state funds, a hospital that qualifies for assessment grants under this chapter shall submit financial information to the department, on a form as required by the department, related to all of the following:

(1) Whether the hospital has attempted to secure other methods of funding for SPC-4D compliance, including federal funding, and if not, the reason why.

(2) The accuracy of the hospital's SPC-4D cost estimates and confirmation that the estimated costs are only for purposes of SPC-4D compliance.

(3) The hospital's need for assistance due to financial hardship and lack of ability to finance the required improvements, in order to access state funds.

(b) In awarding grants, the department shall have the authority to deny any costs from the assessment completed pursuant to this chapter that the department determines are not necessary to comply with SPC-4D requirements.



Questions?







SB 1447

Seismic compliance: Children's Hospital Los Angeles

HBSB SNSR Meeting 10/23/2024

Senate Bill No. 1447

CHAPTER 896

An act to amend Section 130065 of, and to add Section 130069.1 to, the Health and Safety Code, relating to hospitals.

[Approved by Governor September 28, 2024. Filed with Secretary of State September 28, 2024.]



Scope

This bill would authorize the Children's Hospital Los Angeles to seek approval from the Department of Health Care Access and Information for an extension to the January 1, 2030, compliance deadline described above by up to 3 years.



(a) Notwithstanding any other law, the Children's Hospital Los Angeles, referenced in subdivision (c) of Section 10727 of the Welfare and Institutions Code, may seek an extension to the January 1, 2030, seismic compliance deadline outlined in Section 130065, of up to three years, to no later than January 1, 2033, with the submission and department approval of a seismic compliance plan, and a Nonstructural Performance Category-5 evaluation report, if necessary. The department may authorize this extension as necessary if the hospital experiences issues with contractor, labor, or material delays; acts of God; governmental entitlements; or with other circumstances beyond the hospital's control that prevent it from meeting the January 1, 2030, deadline.

(b) If the Children's Hospital Los Angeles includes a building that is not anticipated to be in full compliance with the seismic safety regulations or standards described in Section 130065 on the date this section becomes effective, the hospital may submit both of the following items to the Department of Health Care Access and Information by the dates specified to seek an extension:

- (1) A Nonstructural Performance Category-5 evaluation report for each noncompliant building, if necessary, as outlined in Article 11 of Chapter 6 of Title 24 of the California Code of Regulations, by no later than January 1, 2025.
- (2) The hospital's seismic compliance plan, as outlined in Section 1.4 of Article 1 of Chapter 6 of Title 24 of the California Code of Regulations and related regulations, by no later than January 1, 2026. The seismic compliance plan shall outline steps, including milestones, to achieve compliance with seismic safety standards at the earliest reasonable date, but no later than January 1, 2033. The hospital and the department shall identify at least two major milestones relating to the seismic compliance plan that will be used as the basis for determining whether the hospital is making adequate progress towards

meeting the hospital's seismic compliance deadline. The seismic compliance plan is subject to department review.



(c) The department shall approve or deny the hospital's seismic compliance plan and any extension to the seismic compliance deadline within 120 days.

(d) If the seismic compliance plan includes a compliance schedule that is extended beyond the January 1, 2030, seismic compliance deadline established in Section 130065, the hospital shall submit any documentation requested by the department to assist the department in its review of the compliance schedule.

(e) If the department determines the compliance schedule is unreasonable based on the information submitted, the department shall notify the hospital and provide the department's rationale for its determination. The hospital shall be given the opportunity to address the identified concerns or to provide additional information to substantiate the compliance schedule.

(f) The duration of an extension granted by the department pursuant to this section shall not exceed the maximums permitted by this section and the department shall not grant an extension that exceeds the amount of time needed by the hospital to come into compliance. The department may grant an adjustment to an extension of time approved pursuant to this section, the milestones agreed upon pursuant to this section, or both, as necessary to deal with contractor, labor, or material delays; acts of God; governmental entitlements; or other external forces beyond the hospital's control.

(g) If the hospital fails to meet any milestone or the seismic compliance deadline approved in the compliance plan approved pursuant to this section, it shall not be issued a building permit for any building in the facility except those required for seismic compliance, maintenance, and emergency repairs until the milestone is met and the hospital is adequately progressing toward meeting the hospital's seismic compliance, as determined by the department. On a case-by-case basis, the department may determine if a building permit unrelated to seismic compliance may be considered for approval.



(h) Failure to comply with the revised construction schedule or meet any major milestones established by the department and the hospital shall result in the assessment of a fine of five thousand dollars (\$5,000) per calendar day until the requirements or milestones, respectively, are met.

(i) Notwithstanding any other provision of this chapter, the hospital shall comply with requirements for a seismic compliance plan in accordance with Section 1.4 of Article 1 of Chapter 6 of Title 24 of the California Code of Regulations and related regulations.

(j) This section does not extend any deadlines for Structural Performance Category-1 buildings to achieve the structural integrity to no longer pose a potential risk of collapse or pose a significant risk of loss of life.

(k) Pursuant to Section 130065.15, the department shall include the name and location of the hospital and the projected final compliance date approved by the department.



Questions?



Item #10 Comments from the Public/Committee Members on Issues not on this Agenda The Committee will receive comments from the Public/Committee Members. Matters raised at this time may be taken under consideration for placement on a subsequent agenda. *Facilitator: Jim Malley (or designee)* Item #11 Adjournment

No future Structural and Nonstructural Regulations Committee meetings scheduled at this time.