HCAi Department of Health Care Access and Information

FREER MANUAL

A Guide for
Field Review (FR) Projects,
Excluded (E) from OSHPD Plan Review,
and Expedited Review (ER)

For
General Acute Care Hospitals,
Psychiatric Hospitals,
Skilled Nursing Facilities,
Intermediate Care Facilities,
and
Chemical Dependency Recovery Hospitals

Office of Statewide Hospital Planning and Development

Revised September 22, 2023

THE FREER MANUAL

This manual is formatted to assist users in understanding and obtaining necessary clearances, plan approvals and building permits from the Department of Health Care Access and Information (HCAI), Office of Statewide Hospital Planning and Development (OSHPD), for projects that are classified as "Field Review", "Excluded" from OSHPD plan review, and "Expedited Review" projects. Users should feel free to contact the regional field staff if they have any questions about this manual. To find the region field staff for a facility, visit https://hcai.ca.gov/construction-finance/facility-detail/.

ACKNOWLEDGMENTS

To the Regional Compliance Officers, Compliance Officers, District Structural Engineers, and Fire and Life Safety Officers for their generous contributions directly or indirectly in support of this project. In addition, the clients and customers who frequent this Office and offer their ideas and suggestions.

Chris Tokas
Deputy Director
Office of Statewide Hospital Planning and Development

TABLE OF CONTENTS

THE FREER MANUAL i
ACKNOWLEDGMENTS i
TABLE OF CONTENTS ii
SECTION I: STATUTORY AUTHORITY 1
SECTION II: FREER PROJECT TYPES 2
SECTION III: HOW TO USE THIS MANUAL 4
SECTION IV: DEFINITIONS 6
SECTION V: HOW TO INITIATE A FREER PLAN REVIEW 16
SECTION VI: HOW TO OBTAIN A BUILDING PERMIT 18
SECTION VII: HOW TO START CONSTRUCTION 20
SECTION VIII: HOW TO CLOSE A CONSTRUCTION PROJECT 21
SECTION IX: FREER PROJECT TABLE 23
SECTION X: CRITERIA 44
X: (a) COMMUNICATIONS/INFORMATION SYSTEMS CRITERIA 44
X: (b) ASBESTOS CRITERIA 46
X: (c) FINISHES-FLOOR, WALLS, AND CASEWORK 47
X: (d) DISHWASHER REPLACEMENT CRITERIA 52
X: (e) HANDRAIL REPLACEMENT CRITERIA 53
X: (f) MAINTENANCE CRITERIA 54
X: (g) RE-ROOFING CRITERIA 57
X: (h) SHELVING CRITERIA 59
X: (i) WATER HEATER REPLACEMENT CRITERIA 60

SECTION I: STATUTORY AUTHORITY

This manual has been developed pursuant to the provisions of Health and Safety Code (HSC) Section 129875 which permits the Department of Health Care Access and Information to develop and set forth criteria to expedite or exempt from the plan review process certain projects undertaken by general acute care hospitals, psychiatric hospitals, chemical dependency recovery hospitals, skilled nursing facilities and intermediate care facilities. HSC Section 129875 reads:

129875. Construction or alterations of buildings specified in paragraphs (2) and (3) of subdivision (b) of Section 129725 shall conform to the latest edition of the California Building Standards Code. The office shall independently review and inspect these buildings. For purposes of this section, "construction or alteration" includes the conversion of a building to a purpose specified in paragraphs (2) and (3) of subdivision (b) of Section 129725. Any construction or alteration of any building subject to this section shall be exempt from any plan review and approval or construction inspection requirement of any city or county.

The Office may also exempt from the plan review process or expedite those projects undertaken by an applicant for a hospital building that the Office determines do not materially alter the mechanical, electrical, architectural, or structural integrity of the facility.

The Legislature recognizes the relative safety of single story, wood frame, and light gauge steel frame construction for use in housing patients requiring skilled nursing and intermediate services and it is, therefore, the intent of the Legislature to provide for reasonable flexibility in seismic safety standards for these structures. The Office shall be reasonably flexible in the application of seismic standards for other buildings by allowing incidental and minor nonstructural additions or nonstructural alterations to be accomplished with simplified written approval procedures as established by the Office, with the advice of the Division of the State Architect and the Office of the State Fire Marshal.

For hospital buildings, the Office shall implement, and modify as necessary, criteria to exempt from the plan review process or expedite those projects for alterations for those buildings specified in paragraphs (2) and (3) of subdivision (b) of Section 129725 that may include, but are not limited to, renovations, remodeling, or installations of necessary equipment.

The Office shall include provisions for onsite field approvals by available HCAI Compliance Officers and the preapproval of projects that comply with the requirements for which the Office has developed standard architectural and/or engineering detail(s).

When work or adverse condition may impact patient care, notification to California Department of Public Health (CDPH) is required.

SECTION II: FREER PROJECT TYPES

FR-E-ER (FR) = Field Review (E) = Excluded (ER) = Expedited Review

Many construction/alteration projects at health care facilities are minor in nature. OSHPD has developed the FREER Manual as a guideline for Field Review or Excluded or Expedited Review of these minor projects. The FREER manual is not intended to cover every possible situation.

Field Review (FR) and **Expedite Review (ER)** projects require submission to the Office for plan review and application for building permit and applicable fees.

For **Excluded (E)** work projects, review the FREER Project Table (Section IX) for the item number that best describes the proposed area of work. If unsure or you cannot find an item number that best describes the work, please contact the Compliance Officer assigned to your facility. For **Excluded** work projects, there is not a requirement for submission of plans, building permit, or fees. See Facility Details web page for the Compliance Officer assigned to your facility.

In some cases, split reviews are acceptable; the FREER project may be referred to the Office by the Compliance Officer to have portions of the review completed. If there is doubt whether a project qualifies for Field Review, the Compliance Officer (CO) will discuss the project with the Regional Compliance Officer (RCO). Projects outside the scope of the FREER manual may be field reviewed with the approval of the RCO.

The FREER Project Table located in Section IX in this manual denotes projects that are eligible for Field Review (FR), Excluded (E) and Expedited Review (ER).

Field Review (FR) are standard projects that are reviewed by OSHPD field staff. To be eligible for Field Review, the field staff must have availability, and the project must be simple enough to be reviewed by OSHPD field staff within the amount of time permitted by the program.

NOTE: Time allotment for reviews in the field have been suggested to be limited to one hour. Field Review projects that included structural may be extended to two hours.

If the CO determines that the scope of the project is beyond the time limitation allowed for field review, the project shall be submitted by the client to OSHPD office. Projects requiring time allotments beyond these limits shall be submitted to the Office as a standard project for office plan review. For projects not shown in the table, the CO may contact the RCO to discuss the options.

To be eligible for Field Review, contact the field staff to determine their availability. After initial contact with field staff to determine availability, plans need to be submitted via e-Services Portal. Once submitted, client can check plan review schedule online. This can be done electronically through the eServices Portal (https://esp.oshpd.ca.gov) or if online submission is not available, required paper documents may be submitted to the OSHPD regional office serving your facility. **When submitting documents for electronic review or paper review, the design professional is required to contact the field staff and schedule the review.**

Excluded (E) projects consist of minor work that may be excluded from OSHPD plan review, OSHPD building permit, and payment of any fees to OSHPD. For Excluded projects, submission of the HCAI-OSH-102 form **may be** required as indicated in the FREER Project Table located in Section IX. The HCAI-OSH-102 form is available for download from the HCAI webpage.

Expedited Review (ER) projects consist of work, that while minor in nature, do not qualify for a Field Review (FR) project status. Or, if there is a discovered condition that involves unauthorized construction, the Compliance Officer shall consult with the RCO to request a potential expedited review. These projects will be expedited for review in the Office after the RCO issues notification to the OSHPD plan review supervisor.

SECTION III: HOW TO USE THIS MANUAL

This manual includes the following Sections:

Definitions - The definitions section will assist the user in recognizing and identifying various acronyms and terms generally used in the manual. Other definitions may also be found in the California Administrative Code, California Building Code, California Mechanical Code, California Plumbing Code, California Electrical Code, and California Fire Code.

How-To Sections - The How-To Sections of the manual will answer many questions asked about OSHPD 's plan review, plan approval, building permit issuance procedures and code references.

FREER Project Table - The FREER Project Table (Section IX) describes the scope of a variety of different project types that may be eligible for a FREER. It also includes specific items to consider as well as an indication of how the project will likely be processed. The FREER Project Table lists categories of projects determined by OSHPD to be either Field Review (FR), Excluded (E) or Expedited Review (ER). The FREER Project Table also assists users and OSHPD staff on what is the expected action to be taken for the project. The column titled "Remarks" provides further direction and references to code sections, details, criteria, cautions, and exceptions. When the FREER Project Table column "(E Only) Form 102" is marked as "YES", HCAI-OSH-102 form must be submitted to the Compliance Officer.

Criteria - The Criteria section (Section X) offers more specific guidance for certain types of projects. Criteria to consider in design are also offered if it is necessary to submit drawings and calculations.

Margin Markings
The margin bars on the left indicate significant changes made to this manual since its prior update. Minor editorial or information that adds clarity to the manual is not identified.

Resources
Code Application Notices (CANs) and Policy Intent Notices (PINs) can be found on the HCAI Codes and Regulation webpage: Codes and Regulations - HCAI

Forms can be found on the Forms, Applications, & Reminder Lists webpage: Forms, Applications, & Reminder Lists - HCAI

Companion Documents
The Office publishes How-To-Guides for various maintenance and repair projects conducted at Skilled Nursing Facilities (SNFs) and Intermediate-Care Facilities (ICF). The How-To -Guides are companion documents to the HCAI Field Review, Exempt, and Expedited Review (FREER) Manual, and intended as general reference guides and/or checklists to facilitate repair, maintenance, minor renovation/remodeling, or installation of certain equipment project. The How-To-Guides are found on the SNF webpage: Skilled Nursing Facilities (SNFs) - HCAI

In addition to the FREER Manual, OSHPD offers the following Preapproval Programs:

- HCAI Preapproval of Manufacturers Certification (OPM) - SEE: HCAI PIN 62
- HCAI Special Seismic Certification Preapproval (OSP) - SEE: HCAI PIN 55
- HCAI Preapproved Details (OPD) - Are standard architectural and engineering details developed by OSHPD for use in California health facilities construction, at the discretion of Registered Design Professionals (RDP).

The companion documents provide standard details for partition walls, casework, and suspended ceilings the user may copy and use as part of the plans submitted to the Office for approval. See Policy Intent Notice (PIN) 51 for information on incorporating standard details in your field review and expedited review projects. Visit the HCAI website at https://hcai.ca.gov/construction-finance/preapproval-programs/ to see lists of other items that have anchorage preapproval (OPM), a voluntary program for review and preapproval of seismic design of supports and attachments for nonstructural components. Use of preapproved details may expedite the review of your project.

OSHPD has published Code Application Notice (CAN) 2-102.6 which covers remodel projects. CAN 2-102.6 provides owners, designers and OSHPD staff with a consistent method for planning, reviewing, and implementing projects on existing buildings and systems, and identifying remodel work that will require compliance with current building standards.

Jurisdiction
If there is uncertainty about whether your planned project is under the jurisdiction of OSHPD, it is recommended to consult with the OSHPD field staff and refer to CAN 2-0 OSHPD Jurisdiction. This CAN clarifies the jurisdictional boundaries for construction and site improvements between those under OSHPD authority and those under local authorities.

SECTION IV: DEFINITIONS

Amended Construction Document (ACD): is the instrument through which changes or alterationsof the approved construction documents are made. These are prepared by the design professional in responsible charge. All required application forms can be obtained from the HCAI webpage at: https://hcai.ca.gov/construction-finance/resources/forms-applications-reminder-lists/ or submit online via eService's Portal at https://esp.oshpd.ca.gov.

Annual Building Permit: Health and Safety Code Section 129785 requires OSHPD to make available an annual permit to contain projects at a facility, up to a cumulative total construction cost of $25,000 for skilled nursing facilities and $50,000 for acute care facilities. A flat fee of $250 for skilled nursing and intermediate care facilities and $500 for acute care facilities is charged for an Annual Building Permit in lieu of an application fee. If the cumulative value of construction exceeds the dollar limit, OSHPD will charge an additional fee based on standard rates for all work performed at the 1.5% rate as provided by law and regulation for SNF's and 1.64% or 2.0% for hospitals depending on project cost. The main advantage of performing work under an Annual Building Permit is that the fees are reduced**.** Annual building permits are issued for a fiscal year (July 1 to June 30) and are valid for amaximum period of 12 months, beginning July 1. It is suggested that owners or operators of facilities obtain an annual permit on or shortly after July 1 of each year if any minor work is anticipated during the following months. The permits expire on June 30 of each year. A project can be initiated under an annual permit on and up to the expiration date, provided the cumulative construction value of projects under the annual permit does not exceed the values noted above. Annual Building Permit are closed out at the end of the fiscal year (end of June). If a project under the Annual Building Permit exceeds the maximum dollar threshold, the balance is invoiced separately.

To obtain the Annual Building Permit, the facility must submit an application for Annual Building Permit Form to OSHPD. All required application forms can be obtained from the OSHPD webpage: https://hcai.ca.gov/construction-finance/resources/forms-applications-reminder-lists/.

After the Annual Building Permit is obtained, each project to be plan reviewed and permitted under the Annual Building Permit Number has its' own Application For New Project, submitted to OSHPD. Pursuant to the California Administrative Code, Section 7-135, construction for each project cannot begin until the health facility has applied for and obtained from the Office:

- Written approval of the construction documents.
- Written approval of the Testing, Inspection and Observation Program (TIO).
- Written approval of the inspector of record for the project.

Each project submitted within the Annual Building Permit time limitation is closed separately and may extend beyond the annual building permit expiration date.

California Administrative Code (CAC): Contains the administrative regulations for several state agencies including projects within HCAI authority. The CAC is Part 1 of the California Building Standards Code, Title 24 of the California Code of Regulations. CAC

as it applies to this manual is in reference to the enforceable Title 24 edition for the project per Enforceable Codes.

California Building Code (CBC): The State's adoption of the International Building Code with State amendments. The CBC is Part 2 (Volumes 1 & 2) of the California Building Standards Code, Title 24 of the California Code of Regulations. CBC as it applies to this manual is in reference to the enforceable Title 24 edition for the project per Enforceable Codes.

California Building Standards Code, Title 24 of the California Code of Regulations (Title 24): The State's entire adopted code i.e., the CAC, CBC, CEC, CMC, CPC, CFC and any other adopted building codes or standard. This body of codes is commonly referred to as Title 24. As it applies to this manual, it is the enforceable Title 24 edition for the project per HCAI CAN 1-0 Enforceable Codes.

California Code of Regulations (CCR): The codification of the general and permanent rules and regulations of the State of California. CCR as it applies to this manual is in reference to the enforceable Title 24 edition for the project per HCAI CAN 1-0 Enforceable Codes.

California Department of Public Health (CDPH): Licensing and certification agency for health facilities.

California Electrical Code (CEC): The State's adoption of the National Electrical Code with Stateamendments. The CEC is Part 3 of the California Building Standards Code, Title 24 of the California Code of Regulations. CEC as it applies to this manual is in reference to the enforceable Title 24 edition for the project per HCAI CAN 1-0 Enforceable Codes.

California Fire Code (CFC): The State's adoption of the International Fire Code with Stateamendments. The CFC is Part 9 of the California Building Standards Code, Title 24 of the California Code of Regulations. As it applies to this manual is in reference to the enforceable CBSC edition for the project per HCAI CAN 1-0 Enforceable Codes.

California Mechanical Code (CMC): The State's adoption of the Uniform Mechanical Code withState amendments. The CMC is Part 4 of the California Building Standards Code, Title 24 of the California Code of Regulations. CMC as it applies to this manual is in reference to the enforceable Title 24 edition for the project per HCAI CAN 1-0 Enforceable Codes.

California Plumbing Code (CPC): The State's adoption of the Uniform Plumbing Code with State amendments. The CPC is Part 5 of the California Building Standards Code, Title 24 of the California Code of Regulations. CPC as it applies to this manual is in reference to the enforceable Title 24 edition for the project per HCAI CAN 1-0 Enforceable Codes.

California Department of Health Care Access and Information (HCAI): A Department within the California Health and Human Services Agency. HCAI has many offices and programs including the Office of Statewide Hospital Planning and Development. See OSHPD below.

Certificate of Occupancy (C-of-O): The Compliance Officer shall issue a Certificate of Occupancy for all construction projects that require a C of O prior to occupancy of newly constructed building(s), additions or changes of occupancy.

Code Application Notice (CAN): A document published by OSHPD that provides additionalinformation on the proper application of a specific code section. CANs are linked on the Codes and Regulations webpage: https://hcai.ca.gov/construction-finance/codes-and-regulations/#CANs.

Compliance Officer (CO) is part of the Field Compliance Unit that observes construction projects for health facilities in regards to some of the following: plumbing, medical gas, mechanical, electrical, architectural, accessibility, materials and finishes, anchorage and bracing of nonstructural items, secondary structural framing, interior partitions, and ceiling systems as necessary to enforce applicable construction standards, regulations and substantial conformance with the approved construction documents approved by OSHPD and in compliance with Title 24 (including all referenced codes and standards therein), OSHPD's Code Application Notices and other applicable regulations. Observations of this work is primarily completed by periodic field visits/observations and monitoring the work of the IOR, who is responsible with maintaining continuous, adequate, and competent inspection of all parts of the work of construction in all stages of its progress to ensure the work is in accordance with Title 24. Field staff also provide concurrence of non-material changes (NMA) as well as field reviews of FREER projects which also include qualifying Amended Construction Documents and Deferred Submittal Items. Field staff monitor the compliance of the approved Testing, Inspection and Observation Program (TIO). Field staff monitor the compliance of the approved Testing, Inspection and Observation Program (TIO). Field staff sign off the TIO item once the IOR has provided initials/date for compliance verification for line items, phases, intervals, milestones, occupancy, and construction final. Field staff provide recommendations for projects as well as code interpretations to assist the project design team. This includes recommendations for approval/denial of Alternate Methods of Compliance (AMC). The CO coordinates with the DSE and FLSO to issue Substantial Compliance (SC), Certificate of Occupancy (C-of-O), and/or Construction Final (CF).

Component: A part or element of a larger whole such as an exact replacement of an item of the original machine or equipment.

Construction Final (CF): A Construction Final report will be issue by OSHPD to advise the owner/owner's representative that the construction is completed, including all required post approval documents. For final approval of the work, see CAC Section 7-155.

Critical Path Expedited Review (CPER): This process is a method to expedite the review of an Amended Construction Document that if not quickly reviewed and approved, would cause an undue schedule delay. See the HCAI e-Service Portal Section 6B – Applications for Post-Approval Documents. This process requires approval by the RCO.

Deferred Submittal Item (DSI): Where a portion of the design cannot be fully detailed on the approved construction document because of variations in product design and manufacture, the approval of the construction documents for such portion may be deferred until the material suppliers are selected. These items shall be listed on the parent project CAC Section 7-126.

Department of Health Care Access and Information (HCAI): The Office of Statewide Hospital Planning and Development (OSHPD) is one Office within HCAI. OSHPD is the building department for hospitals in the State of California.

Design Professional of Record (DPOR): Responsible for the project. Depending on the scope of work this may be a California Licensed Architect, Structural Engineer, Civil Engineer, Electrical Engineer, Mechanical Engineer, or a Contractor. See CAC Section 7-115 for more information.

Direct Replacement: Repairs which use the same or similar materials in the original location which comply with the currently adopted code.

District Structural Engineer (DSE): DSE is part of the Field Compliance Unit that observes construction projects for health facilities in regards to gravity load bearing and lateral load resisting primary structural frames and systems, and other related structural work as necessary to enforce applicable construction standards, regulations and substantial conformance with the approved construction documents approved by OSHPD and in compliance with the California Building Standards Code (CBSC), Title 24, CCRs (including all referenced codes and standards therein), the OSHPD's Code Application Notices and other applicable regulations. The DSE also assists in the review of other structural items when explicitly requested by the RCO or CO. Observations of this work is primarily completed by periodic field visits/observations and monitoring the work of IOR, who is responsible with maintaining continuous, adequate, and competent inspection of all parts and phases of the work are in accordance with the CAC. Field staff also provide concurrence of non-material changes (NMA) as well as field reviews of FREER projects which also include qualifying ACDs and DSIs. Field staff monitor the compliance of the approved Testing, Inspection and Observation Program (TIO). Field staff monitor the compliance of the approved Testing, Inspection and Observation Program (TIO). Field staff signs off items on the TIO once the IOR has provided initials/date for compliance verification for line items, phases, intervals, milestones, occupancy, and construction final. Field staff provide recommendations for projects as well as code interpretations to assist the project design team. This includes recommendations for approval/denial of Alternate Methods of Compliance (AMC). The DSE coordinates with the CO and FLSO to recommend Substantial Compliance (SC), Certificate of Occupancy (C-of-O), and/or Construction Final (CF).

Electronic Medical Record Management (EMR): EMR are digitized paper charts that include diagnoses, allergies, medical histories, immunization dates, lab results, medications, and physicians' notes. EMR systems can handle everything from documenting patient data and scheduling appointments to filling prescriptions and verifying insurances.

Emergency Work: Emergency work may be necessary due to permanent equipment failure, natural disaster, or other occurrences that require immediate repair or replacement to ensure jobsite or building occupant health or safety. See HCAI PIN 72 - Emergency Work Authorization.

e-Services Portal: OSHPD Internet based project tracking database program found at https://esp.oshpd.ca.gov.

Excluded (E): FR-**E**-ER projects consists of minor work that may be excluded from OSHPD plan review, building permit, and payment of any fees to OSHPD.

NOTE: For Excluded projects, submission of the HCAI-OSH-102 form **may or may not** be required as indicated in the FREER Project Table located in Section IX. HCAI-OSH-102 form is available for download from the OSHPD webpage at: HCAI-OSH-102 form.

Expedited Building Permit (Originally AB 2632) Project: (How-To-Guides)
The following Expedited Building Permit Guides are companion documents to the FREER Manual and are intended as general reference guides and/or checklists to facilitate repair, maintenance, minor renovation/remodeling, or installation of certain equipment projects. The Expedited Building Permit Guides are intended only for single-story OSHPD 2 Skilled Nursing Facilities (SNFs) and Intermediate Care Facilities (ICFs) that are of wood-frame or light gauge steel frame construction and excluded from the definition of "Hospital Building" of the California Administrative Code (CAC), Article 2, Section 7-111.

- Guide#1 - Wall-Mounted TV/Monitors
- Guide#2 - Water Heater Replacement
- Guide#3 - Wall-Mounted Handrail Replacement
- Guide#4 - Roof-Mounted HVAC Unit Replacement
- Guide#5 - Re-Roofing
- Guide#6 - Installing a Connection for Temporary Generator – Full Building Backup
- Guide#7 - Installing a Connection for Temporary Generator – Emergency Backup
- Guide#8 - Installing Temporary Generator
- Guide#9 - Mobile Dialysis Unit Installation

Expedited Review (ER): FR-E-**ER** is an accelerated review conducted in the office for projects of limited scope and complexity. To be eligible for Expedited Review, the estimated review effort for each plan review discipline must be less than two hours.

Field Compliance Unit (FCU): The OSHPD Field Compliance Unit assigned to a given geographical location separated into regions. The Field Compliance Unit consist of the following field staff: Regional Compliance Officer (RCO), Compliance Officer (CO), District Structural Engineer (DSE), and Fire and Life Safety Officer (FLSO). In accordance with CAC Section 7-147, during the construction, of any health facility, the Office shall make such observation as in its judgment is necessary or proper for the enforcement of these regulations and all applicable parts of the California Building Standards Code. Whenever the Office finds a violation of these regulations and/or applicable parts of the California Building Standards Code that requires correction, the citation of the violation shall be issued to the hospital governing board or authority in writing and shall include a proper reference to the regulation or statute being violated.

Field Confirmation: Field confirmation is a process performed by the field staff in conjunction with other OSHPD staff. The process is intended to guide and assist owners and operators of facilities in determining the classification of projects. The process also provides owners and operators with a written confirmation that the project is a lawful undertaking incompliance with laws and regulations.

Field Review (FR): FR-E-ER projects that are reviewed entirely in the field by the OSHPD field staff. To be eligible for Field Review, the field staff must have availability, and the project must be simple enough to be reviewed by OSHPD field staff within one hour. Field Review projects that included structural may be extended to two hours.

Field Visit/Observation (FV): To enforce applicable codes and regulations for health facility construction, field staff must visit the project site to verify that construction is in conformance with the approved construction documents, applicable building codes and to monitor the performance of the Inspector of Record (IOR).

Field Visit Report (FVR): After a site visit by an HCAI field staff, a field report that identifies if the visit was remote or onsite and any participants present during the visit. The general construction progress shall be noted within the report. The IOR Daily Field Records / Daily Reports / Outstanding items / Seeming errors / Deviations / Non-Conformances, verification of the Testing Inspection and Observation (TIO) program should be in alignment with the general progress of the work. The reports should include the next anticipated scheduled field visit/observation, a summary of the Non-Material Alterations reviewed for concurrence and additional project specific comments. See CAC Section 7-147.

Fire Life Safety Officer (FLSO): FLSO is part of the Field Compliance Unit that observes construction projects for health facilities in regards to fire and life safety systems and construction requirements including exiting systems, smoke removal systems, automatic fire/smoke detection and alarm systems, automatic fire sprinkler/suppression systems, fire resistive/rated building construction and all related fire and life safety work as necessary to enforce applicable construction standards, regulations and substantial conformance with the approved construction documents approved by OSHPD and in compliance with Title 24 (including all referenced codes and standards therein), OSHPD Code Application Notices and other applicable regulations. Observations of this work is primarily completed by periodic field visits/observations and monitoring the work of IOR, who is responsible with maintaining continuous, adequate, and competent inspection of all parts and phases of the work are in accordance with Title 24, Part 1, California Code of Regulations (CCRs). Field staff also provide concurrence of non-material changes (NMA) as well as field reviews of FREER projects which also include qualifying ACDs and DSIs. Field staff monitor the compliance of the approved Testing, Inspection and Observation Program (TIO). Field staff signs off items on the TIO once the IOR has provided initials/date for compliance verification for line items, phases, intervals, milestones, occupancy, and construction final. Field staff provide recommendations for projects as well as code interpretations to assist the project design team. This includes recommendations for approval/denial of Alternate Methods of Compliance (AMC). The FLSO coordinates with the CO and DSE to recommend Substantial Compliance (SC), Certificate of Occupancy (C-of-O), and/or Construction Final (CF).

Health Facility: Any health facility licensed pursuant to Section 1250 of the Health and Safety Code under the jurisdiction of the Office. See CAC Section 7-111.

Heating Ventilation and Air Conditioning System (HVAC): Standard acronym for heating systems and cooling systems.

Hospital Building: Any building used for a health facility of a type required to be licensed pursuant to Section 1250 of the Health and Safety Code.

> **NOTE:** A Skilled Nursing Facility or Intermediate Care Facility of single story, wood frame or light steel frame construction is not considered a hospital building. See Title 24, Part 1, Section 7-111 for further information.

Hospital Inspector of Record (IOR): An individual who is:

(a) An OSHPD certified Hospital Inspector, pursuant to the provisions of CAC Sections 7-144 and 7-200 and
(b) Employed by the hospital governing board or authority and
(c) Approved by the architect and/or engineer in responsible charge and the Office as being satisfactory to inspect a specified construction project.

Inspection Services Unit (**ISU):** The ISU supports and trains Field Staff within the regions and works to develop ongoing training and education for the IOR community. The Inspection Services Unit is charged with the review of all matters relative to the quality assurance of healthcare facility projects. Standards of care and practices by project inspection personnel and test laboratories are established and monitored by the unit. Practices associated with the onsite management of the Test, Inspection, and Observation (TIO) Programs are evaluated and modified as needed to improve the statewide application of hospital building construction.

Intermediate Care Facility (ICF): A health facility that provides the following basic services: 24-hour care to residents who have a recurring need for skilled nursing supervision and need supportive care, but who do not require availability of continuous skilled nursing care.

Materially Alter: as applied to construction projects or approved construction documents means any change, alteration, or modification, as determined by the Office, that alters the scope of a project, could cause the project to be in noncompliance with Title 24, or causes an unreasonable risk to the health and safety of patients, staff, or the public. See CAC Section 7-153.

National Fire Protection Association (NFPA): NFPA is a global self-funded nonprofit organization, established in 1896, devoted to eliminating death, injury, property and economic loss due to fire, electrical and related hazards. The NFPA publishes more than 300 consensus codes and standards, including but not limited to NFPA 70 the National Electrical Code, and other reference standards such as NFPA 13, 72, 99 and 110 used for health care.

Non-Materially Alter (NMA): See**:** CAN 1-7-153(b) Non-Material Alteration (NMA)

Office of Statewide Hospital Planning and Development (OSHPD or Office): The building department for health facility construction in California. OSHPD is an office in HCAI.

OSHPD Preapproval of Manufacturer's Certification (OPM): is a voluntary program for review and preapproval of seismic design of supports and attachments for nonstructural components https://hcai.ca.gov/construction-finance/preapproval-programs/. See HCAI PIN 62.

OSHPD Preapproved Standard Details (OPD): Standard architectural and engineering details developed by OSHPD for use in California health facilities construction, at the discretion of Registered Design Professionals (RDP). See Preapprovals programs at Preapproval Programs - HCAI.

OSHPD Special Seismic Certification Preapproval (OSP): is a voluntary program for review andpreapproval of Special Seismic Certifications to be used in health facilities construction in California. See Preapprovals programs at Preapproval Programs - HCAI.

Outstanding Items List (OIL): A project can be approved with comments. The comments become an Outstanding Items List (OIL) that the Design Professional of Record (DPOR) must resolve. All comments must be cleared before construction can occur in the area relating to the comments.

Policy Intent Notice (PIN): OSHPD issues policy intent on specific subjects. PINs are linked on the Codes and Regulations webpage: https://hcai.ca.gov/construction-finance/codes-and-regulations/

Post Approval Document (PAD): Submittals such as Amended Construction Documents (ACD), Deferred Submittal Items (DSI) and Non-Materially Altered (NMA) are submittals after the original project is approved.

Regional Compliance Officer (RCO): The Regional Compliance Officer (RCO) is the supervisor of the Field Compliance Unit specific to the geographical region. The RCO monitors and evaluates the work activities of District Structural Engineers, Compliance Officers, Fire and Life Safety Officers and ensures the Division's standards of performance and quality are met. The RCO makes determinations regarding Alternate Methods of Compliance for projects under construction and approves extensions of projects with no activity when justified and requested. The RCO issues building permits and makes determinations regarding qualifications and workload of Inspectors of Record (IOR). The RCO is involved with the process of issuing stop work orders for unsafe, unauthorized, or non-complying construction work as necessary. The RCO provides Emergency Authorization when requested by facilities, see PIN 72 - Emergency Work Authorization.

SB 1838 Project (Exempt from Plan Review): Senate Bill 1838 (Perata, Chapter 693, Statutes of 2006) provided for a special type of project that allows exemption from the HCAI plan review process if certain criteria are met. SB 1838 projects are limited to $50,000 in construction value and may have fixed equipment costs in addition to that amount. See CAC Section 7-127. Code compliance is verified in the field by OSHPD staff. These projects shall be submitted to the Office for processing in accordance with Policy

Intent Notice 36. For information, see PIN 36 - Projects of $50,000 or Less – Exempt From Plan Review Process. Exempt from plan review projects are different than Excluded projects that may be part of the FREER process.

Skilled Nursing Facility (SNF): Health facility that provides the following basic services: skilled nursing care and supportive care to patients whose primary need is for availability of skilled nursing care on an extended basis.

Standard Building Permit: Projects of any construction value can be issued a standard building permit valid for the total period of time the project is under construction. There is no predetermined expiration date so long as project construction remains active per CAC Section 7-129 Time Limitations.

California Administrative Code Section 7-129 (c) defines time limitations for projects receiving plan approval of construction documents as one year from the date of approval to obtain a building permit from OSHPD and begin active construction or the approval becomes void.

Projects must be reviewed and approved prior to commencement of construction per California Administrative Code Section 7-135 (a). Before a building permit can be issued, construction documents must be submitted to OSHPD for plan review. Once the construction documents are approved, an application for a standard building permit can be submitted. Information on applying for plan review and obtaining a standard building permit may be found at: https://hcai.ca.gov/construction-finance/building-and-construction-projects/.

Substantial Compliance (SC): The substantial compliance shall be issued by the CO for a stage(s) of a construction or building project, or a designated portion of the project, that is sufficiently complete in accordance with the approved construction plans and Title 24 such that the owner may use or occupy the building project, or designated portion thereof, for the intended purpose. Substantial compliance does not include a Certificate of Occupancy.

Title 24: See California Building Standards Code above.

Temporary Equipment: Installation of temporary equipment may be necessary to accommodate replacement or maintenance of existing equipment. Refer to CAN 2-108 Temporary Systems, Utilities, and Equipment.

TIO: Testing, Inspection & Observation program. See Forms web page TIO section.

Unpermitted Work: Work Performed without a permit. See CAC 7-128. Work performed without an OSHPD permit, will result in the need for a complete plan review submission to OSHPD and the facility shall be cited for performing work without a permit as provided in CAC Section 7-128. An Unauthorized Construction Investigation will be initiated to track work performed without a permit. If the scope of work is outside OSHPD's jurisdiction, it may be subject to review and permitting by the local authority having jurisdiction. See CAN 2-0 OSHPD Jurisdiction.

WOW (Workstation On Wheels): See PIN 68 - Support and Attachment Requirements for Fixed, Interim, Mobile, Movable, Other and Temporary Equipment.

SECTION V: HOW TO INITIATE A FREER PLAN REVIEW

To begin a FREER project, the following steps are required:

a. Determine the scope of the project.
b. Use the FREER Project Table (Section IX) to determine which of the three options for minor projects - Field Review (FR), Excluded (E) or Expedited Review (ER) – may be appropriate.
c. For a project being requested as Field Review (FR), contact the OSHPD field staff, via email or phone call, to obtain concurrence of the project scope category. The field staff will verify that the project is eligible for the FREER program, and determine which FREER options are available.
d. Any required supplementary information such as OPM, OPD, OSP, etc. for the proposed construction project shall be on the job site before construction is started. Preapproved Details must be part of the approved project documents. It is the Design Professional of Record's (DPOR) responsibility to deliver a copy of these details to both the contractor and the IOR at the job site.
e. Local government entity approvals or clearances shall be furnished to HCAI, when applicable, prior to approval of the construction documents. See: CAN 2-0 OSHPD Jurisdiction
f. See CAC Chapter 7, Article 3 Approval of Construction Documents, for additional information.

Field Review (FR) FR-E-ER projects shall submit a project to OSHPD and contact the field staff to schedule a FREER field plan review appointment. The project plans, specifications and Testing, Inspection and Observation program (TIO) for the construction project under an Application for New Project. This can be done electronically through the e-Services Portal (https://esp.oshpd.ca.gov) or, by submitting the required paper documents to the office serving your facility. Projects submitted under the FREER process that are outside of the scope of the project types listed in the FREER Project Table shall require approval of the Regional Compliance Officer prior to field review. When it is determined that the scope of the project is unsuitable for Field Review or is beyond the time limitations for field review it shall be submitted to the Office for review and approval as an Expedited Review FR-E-**ER** project.

> **NOTE:** Time allotment for reviews in the field have been suggested to be limited to one hour. Field Review projects that included structural may be extended to two hours.

Excluded (E) FR-**E**-ER projects **may or may not** require submission of the HCAI-OSH-102 form as indicated in the Project Table located in Section IX. HCAI-OSH-102 form is available for download from the OSHPD web page at. HCAI-OSH-102 form.

If the scope of work is outside of OSHPD jurisdiction (see CAN 2-0), Excluded projects may be subject to review and permitting by the local authority having jurisdiction.

Expedited Review (ER) FR-E-**ER** projects shall be submitted to OSHPD with plans and specifications for the construction project under an Application for New Project. This can be done electronically through the e-Services Portal (https://esp.oshpd.ca.gov) or by submitting the required paper documents to the office serving your facility.

NOTE: To be eligible for Expedited Review, the estimated review time for each plan review discipline must be less than two hours. If the OSHPD plan review supervisor makes the determination that the time limitations for expedited office plan review will be exceeded, the project will be reviewed as standard plan review and be subject to normal timelines.

Not Eligible as a FREER project:

- Projects that require Geotechnical or Preliminary plan reviews are not eligible for FREER projects.
- Deferred Submittals are not eligible for FREER projects.

Project Preparation and Execution

- The responsible primary or design professional in responsible charge (DPOR) shall place the HCAI project number on all required documents and plans.
- OSHPD Standard Details used in preparation of construction documents must be incorporated into the approved drawings (references alone to the OPD are not acceptable). The use of OSHPD Standard Details does not exclude a project from OSHPD plan review, building permit, construction observation or compliance with all applicable codes and regulations. Project construction must be executed in strict accordance with the OSHPD Preapproved Detail used. Differences in construction shall require submittal of new/revised detail(s) by Amended Construction Document (ACD) for review and approval.
- The OSHPD approval letter constitutes written approval of construction documents.

SECTION VI: HOW TO OBTAIN A BUILDING PERMIT

CAC, Section 7-113(a): Before commencing construction or alteration of any healthcare facility, the governing board or authority shall submit an application for plan review to the Office and shall obtain the written approval of the plans by the Office describing the scope of work included and any special conditions under which approval is given.

CAC, Section 7-128: Failure to obtain the necessary reviews and approvals prior to commencing construction will result in work performed without a permit citation and examination fees, in addition to application fees.

HCAI offers several different building permit options. The best choice for your project will depend on the scope and complexity of the work and the cost of construction. In the Definitions Section IV above, the different building permit types are described. If assistance is needed to make a determination on the best submittal options, please contact the OSHPD Compliance Officer assigned to the facility.

To obtain a building permit, submit an Application for Building Permit via e-Services Portal once OSHPD plan approval is obtained. This can be done electronically through the e-Services Portal (https://esp.oshpd.ca.gov) or by submitting the required paper documents, links provided below, to the Office serving your facility.

- Application for Inspector of Record Form HCAI-OSH-124. This form requests that an individual currently holding OSHPD IOR certification be approved and appropriate for the project.
- Current IOR workload shall be submitted for each IOR application.
- The licensed contractor, workers' compensation and/or owner-builder declarations are filed with OSHPD with the Application for Building Permit HCAI-OSH-302.
- The reviewed Testing, Inspection and Observation (TIO) form: the completed form that was stamped and reviewed during the OSHPD plan review must be submitted with the Building Permit application. See TIO section on the Forms webpage.

Northern California, contact:

Department of Health Care Access and Information
Office of Statewide Hospital Planning and Development
2020 W. El Camino Avenue, Suite 800
Sacramento, CA 95833
(916) 440-8300 phone or (916) 274-0102 fax

Southern California, contact:

Department of Health Care Access and Information
Office of Statewide Hospital Planning and Development
355 South Grand Avenue, Suite 1900
Los Angeles, CA 90071
(213) 897-0166 phone or (213) 217-8511 fax

CAC Section 7-129 Time limitations: OSHPD construction projects exceeding time limitation per CAC Section 7-129 may be cancelled, closed inactive or void for the following reasons:

- The applicant withdraws a project after submitting the project but prior to commencement of plan review.
- The applicant withdraws a project after commencement of plan review but prior to commencement of construction.
- The applicant cancels a project after commencement of construction.

- If construction does not commence within one year after written approval of the construction documents, the office approval becomes void.
- If the work of construction is suspended or abandoned for a period of one year for any reason following its commencement the offices approval shall become void.
- A project shall be considered abandoned when the work of construction, if any, performed during a twelve-month period does not result in a minimum of ten percent increase in the overall percentage of construction work. An extension may be approved by the Office. See CAC Section 7-129(d).
- The applicant shall submit form HCAI-OSH-129 Project Cancellation/Withdrawal Notice to the Office to cancel or withdraw the project.

NOTE: If the project is canceled after construction has been started, a field review by the OSHPD CO, IOR., facility representative, OSHPD FLSO, and OSHPD DSE is required to ensure the facility has been left in a safe condition.

SECTION VII: HOW TO START CONSTRUCTION

Prior to the start of construction, the following must occur:

CAC, Section 7-135: Construction shall not commence until the health facility has applied for and obtained the following from the Office:

- The project has received written plan approval and plans and specifications are stamped approved by OSHPD plan review.
- A building permit has been issued for the project.
- DPOR and OSHPD field staff meet to field accept the Office reviewed TIO.
- The facility must retain an OSHPD certified Inspector of Record (IOR) approved by the Office for the project to monitor construction activities.

Construction is ready to start once the permit is issued and field acceptance of the TIO is completed. The required submittals are listed below:

- Per California Administrative Code (CAC) Section 7-137, the governing board or authority of the health facility shall submit a Notice of Start of Construction to the Office on the HCAI-OSH-801 form, which notifies OSHPD that work on the project is commencing.
- Per California Administrative Code, Section 7-145(a)5, the Inspector of Record Shall notify the OSHPD Compliance Officer, District Structural Engineer, and Fire Life Safety Officer when work has started.

NOTE: For Excluded work, by email or phone call, notification shall be sent to the OSHPD Compliance Officer and OSHPD Fire Life Safety Officer assigned to the facility when the Excluded work starts.

Construction may now start…

SECTION VIII: HOW TO CLOSE A CONSTRUCTION PROJECT (All Permits)

Approval by OSHPD is often assumed to be the end of the journey. Before OSHPD will log a project as being Closed with Compliance (CLSD) the following needs to occur:

> **NOTE:** For Excluded work that requires a HCAI-OSH-102 form, send an email or phone call notification to the OSHPD Compliance Officer and OSHPD Fire Life Safety Officer assigned to the facility once the Excluded work has been completed.

To receive Certification of Substantial Compliance, contact the assigned Compliance Officer so they can verify the project, or a designated portion of the project is sufficiently complete in accordance with the approved construction plans and Title 24. Verified Compliance Reports are required for the portion of the project completed. See CAC Section 7-151 Verified compliance reports for more information.

Per **CAC Section 7-155 Final approval of the work,** the final approval of the construction shall be issued by the Office when:

- All work has been completed in accordance with the approved plans.
- The verified compliance reports, tests and inspection reports have been filed with the Office.
- All remaining fees have been paid to the Office. The fee for plan review and field observation is based on the estimated cost of construction as specified below. If the actual cost for a project exceeds the estimated cost by more than five percent (5%), a further fee shall be paid to OSHPD, based on the applicable schedule, and computed on the amount by which the actual cost exceeds the estimated cost. Refer to CAC, Section 7-133(a).

Final approval will be confirmed by a letter sent by the Office that identifies the project and the approved final costs. The letter states work has been constructed in accordance with CAC Section 7-155 (c).

CAC Section 7-145(7): Upon completion of the project, all field records of construction progress shall be retained on the job until the completion of the work and shall, upon request be made available to the Office, the architect or engineer in responsible charge and the owner. Upon completion of the project, these original field records shall be submitted to the hospital governing board or authority. See CAC 7-145(7).

- All Amended Construction Documents (ACD), Non-material alteration documents (NMA), OIL Items, and Deferred Submittal Items (DSI) have been completed, concurred, and approved by OSHPD staff and entered into the OSHPD project files.
- Completion and receipt of the TIO program signed by the IOR and issued to the CO.
- Final Verified Compliance Reports as listed on the TIO are presented to HCAI Field Staff.
- All outstanding fees are cleared and paid in full.
- Recommendation for Construction Final provided by OSHPD DSE and FLSO as applicable.

- Construction Final Report issued by CO.

NOTE: After HCAI Construction Final, it is the facilities responsibility to contact the Department of Public Health for license of occupancy and use of the area/space for patient care.

SECTION IX: FREER PROJECT TABLE

The FREER Project Table categorizes many of the typical small projects OSHPD reviews in the field or excluded from review and permitting. Project headings include General, Site-Work, Special Construction, Architectural, Mechanical, Plumbing, Utility Connection, Electrical, Equipment, Communications/Information Systems and Fire and Life Safety. When a project scope is identified, look for a heading and then the specific item listings to help determine what action OSHPD may take. When the project scope does not clearly match one given in the list, contact the OSHPD Compliance Officer for assistance.

The FREER Project Table has been enhanced to include item numbers and the columns have been arranged to align with the **FR**=**E**=**ER** acronyms.

For items that are designated as Excluded, there are two possible levels of communication with HCAI:

- After review of the FREER Project Table Item number and if HCAI-OSH-102 form is not required, proceed with the work as outlined in sections VII and VIII above. If unsure or you cannot find an item # that best describes the work, please contact the Compliance Officer assigned to your facility.
- After review of the FREER Project Table and selecting an Item number, if the column "(E Only) Form 102" contains a "Yes", the HCAI-OSH-102 form is required to be submitted to the Compliance Officer for consultation prior to the start of any construction.

NOTE: HCAI-OSH-102 form is available for download from the HCAI web page at. HCAI-OSH-102 form.

FREER PROJECT TABLE

GENERAL (G)

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
G-1	**MAINTENANCE** Maintenance and repair (e.g., replacement of a minor component on a "single" piece of equipment).		✓			• See Maintenance Criteria, Section X(f).

SITE WORK (SW)

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
SW-1	**ACCESSORY BUILDINGS** Detached one-story accessory buildings used as tool and storage sheds and similar uses provided the projected roof area does not exceed 120 square feet and the accessory building is located 30' or more from a licensed health facility.		✓	YES		• See CBC, Sect. 105.2(1) • Local jurisdiction review may be required.
SW-2	**ACCESSORY BUILDING UTILITY CONNECTIONS** Utility connections from a health facility to detached accessory building.	✓				• Any connections for fire extinguishing systems and natural gas connections need review by FLSO.
SW-3	**FENCES** Fences not more 7'-0" in height measured on both sides and not connected to a health facility.		✓			• Facility to ensure that exiting to and from the building is not affected. • See CBC Section 105.2(2) Fences not over 7'-0".
SW-4	**FOUNTAINS** Installing exterior drinking fountains.	✓				• Field review is only required if fountains are directly connected to the facility's electrical or plumbing systems.
SW-5	**Water Storage Tank** Exterior water tank for irrigation.		✓	YES		• See CAC, Sect. 105(5), HCAI-OSH-102 form NOT required for water tanks supported directly on grade if the capacity is not greater than 5,000 gallons (18 925L) and the ratio of height to diameter or width is not greater than 2:1 and not connected to the facility in any way. • Office Review Project Submission required: ○ If tank is greater than 5,000 gallons. ○ If water is supplied from the facility to the tank or tank supplies water to building(s). ○ If backflow protection is required. ○ See CPC Section 602.1 - 602.3 -603.2

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
SW-6	**LANDSCAPING** Landscaping, lawn and shrub sprinklers or decorative fountains.		✓			• If the irrigation system water is supplied from the hospital building a backflow prevention device is required. If a backflow device is required to be added ,a Field review project will need to be submitted .
SW-7	**SITE WORK**		✓			• For Work that may affect utility shut off or access compliance to the public way CO and FLSO notification is required. • 30-day minimum notification to CO required prior to any utility shutoff. (Permit may be required). • See: HCAI CAN 2-0 - OSHPD Jurisdiction.
SW-8	**PARKING LOTS** Re-surfacing		✓	YES		• Accessible parking features to be reviewed by OSHPD field staff if features are part of HCAI approved project plans or if Local building department is not reviewing the work. • See HCAI CAN 2-0 OSHPD Jurisdiction.
SW-9	**PARKING LOT LIGHTING** Parking lot or exterior lighting with connection to health facilities.				✓	• OSHPD office plan review required. • See HCAI CAN 2-0 OSHPD Jurisdiction.
SW-10	**PARKING STRUCTURES** Detached parking structures with separate utilities and located more than 30' from health care facility and does not contain any essential services i.e., fire pump, emergency generator, etc.		✓	YES		• Submittal of evidence of local building department approval and Permit required.
SW-11	**PLANTERS** Installing planters less than 3'-0" high at grade at the building accessible entrance and exits only.		✓	YES		• Planters include freestanding pots and plant containers. • OSHPD CO Shall review for exiting and accessibility requirements.

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
SW-12	**RETAINING WALLS** Retaining walls not more than 4'-0" in height measured from the footing bottom to the top of wall unless supporting additional earth, equipment or structure loads or impounding flammable liquids, at the building accessible entrance and exits only.		✓	YES		• A fence may be constructed on a retaining wall provided the total height of the wall and fencing do not exceed 7'-0". Combinations over 7'-0" may require CO / DSE review and may require local building permit. • Excluded project if Distance from OSHPD building footing to retaining wall footing is more 15'-0". • Less than 15'-0" may require field review. • See CBC Section 105.2(2) and 105.2(4).
SW-13	**WALKS** Exterior platforms, walks and driveways not more than 30 inches above grade and not over any basement or story below and not affecting entrance or exiting system		✓			• Facility shall review locations to ensure exiting and accessibility requirements are in compliance. • See CBC Section 105.2(6).

SPECIAL CONSTRUCTION (SC)

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
SC-1	**MOBILE UNITS USED FOR OUTPATIENT HOSPITAL SERVICES**		✓	YES		• See OSHPD CAN 2-0 and OSHPD PIN 34
SC-2	**DECONTAMINATION FACILITIES**		✓	YES		• Detached and located away from Hospital buildings is Local Authority Jurisdiction. • If utilities are obtained for the decontamination facility from the OSHPD Hospital Building, OSHPD will review the utility connections to ensure that the Hospital utilities will not incur any potential adverse impact. Refer to OSHPD PIN 35 - Healthcare Decontamination Facilities.
SC-3	**SURGE TENTS** Temporary tent facilities erected to accommodate a surge in demand for health care are governed by the local fire department and OSHPD.		✓	YES		• OSHPD has the responsibility and authority to ensure the safety of the hospital building relative to adjacent hazards and exposures. • OSHPD will need to review drawings for any surge tent installation and any utility hookups that originate in or pass through any hospital building and ensure that there is access, and any required means of egress is not compromised. • Coordination with the local planning/zoning department may also be necessary. Temporary tent facility's erected to accommodate a surge in demand for health care are governed by the local fire department. See CAN 2-0.

ARCHITECTURAL (A)

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
A-1	**ASBESTOS** Asbestos removal or encapsulation		✓			• If project involves the replacement of fire rated materials, OSHPD review and building permit is required. • See asbestos criteria.
A-2	**CABINETS** Permanent floor-supported storage cabinets are considered furniture		✓			• See OSHPD Pre-Approved Details (OPD). • Permanent floor-supported storage cabinets LESS than 6 ft (1,829 mm) tall.
A-3	**CEILINGS** (non-fire rated) Ceiling systems only	✓				• See OSHPD Pre-Approved Details (OPD).
A-4	**ACOUSTICAL CEILING TILES (ACT)**		✓	YES		• Replacement of existing ceiling tile same rating and texture. • See Maintenance Criteria Section X(f).
A-5	**DEMOLITION** Separate Project / Permit	✓				• Balance of exiting system must meet exiting requirements.
A-6	**DOORS** Infill of a non-required door opening in a *non-fire* rated wall	✓				• Balance of exiting system must meet exiting requirement and fire rated assembly to be maintained.
A-7	**DOORS** Infill of a non-required door opening in a *fire rated* wall	✓				• Wall must be non- load bearing and non- shear resisting. • Accessible hardware must be provided. Non-fire rated. • See FLSO section for fire rated doors.
A-8	**DOORS** Adding a door or open doorway in a partition wall maximum size of opening 4'-0"	✓				• Wall must be non- load bearing and non- shear resisting. • Accessible hardware must be provided. Non-fire rated. • See FLSO section for fire rated doors.

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
A-9	**DOORS** Replacement of existing non-rated door Fire rated doors see FLS section (Item # F-9).		✓	YES		• Unlimited quantity of doors. • Frame is NOT included. • Patient room doors are not required to be rated but must resist the passage of smoke (Smoke seal). • Hardware is not integrated with other systems.
A-10	**DOOR HARDWARE** Replacing door hardware.		✓	YES		• Hardware is not integrated with other systems. • Accessible hardware must be provided. Non-fire rated. • See FLSO section for fire rated doors.
A-11	**DOOR WINDOW** Changing a window opening to a door opening.	✓				• No increase in opening width. • Must meet accessibility requirements.
A-12	**WINDOW REPLACEMENT**	✓				• Complete replacement of window and frame • Upgrade from single to dual pane.
A-13	**WINDOW GLAZING REPLACEMENT** Maintenance of windowpanes. No frame revisions		✓	YES		• Replacement of damaged windowpane(s) and/or caulking. • Compliance required with CBC, 2406.4 thru 2406.4.7 for hazardous locations required to have safety glazing materials. • No frame revisions
A-14	**FINISHES** Wall coverings, ceiling finishes, flooring, ceiling tiles, casework, and similar finishes on existing facilities. (For painting, see A-15)		✓	YES		• See Section X(c) Finishes and X(f) Maintenance for all finishes and dietary service area criteria.
A-15	**PAINTING** Painting, caulking and sealants in and on existing facilities.		✓			• See CBC, Section 1224.4.11.3-wall finishes and Criteria section X(c). • Review code section listed above for correct product type to be used such as gloss, semi-gloss, etc. certain wall finishes are required to be smooth and washable.

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
A-16	**FOUNTAINS** Installing interior drinking and decorative fountains.				✓	• OSHPD Office Plan review required.
A-17	**HANDRAILS** Replacement of handrails in corridors	✓				• See Handrail Replacement. • Criteria, Section X(e) (SNF Only see How-To-Guide #3 Expedited Building Permit).
A-18	**LADDERS** Fixed Ladders				✓	• Fixed ladders attached to the structure.
A-19	**PORTABLE PARTITIONS AND WORKSTATIONS**		✓	YES		• 5'-9" or less in height • See CBC, Section 105.2.(13) • Not connected to the building utilities. • Not open to or within the corridor or exit system. • Field review if over 5'-9" or connected to building utilities or open to or with corridor or exit system.
A-20	**RE-ROOFING** Re-roofing and roof repairs	✓				• Field review if roof top equipment over 400 lbs. require remounting (DSE approval required). • See re-roofing criteria, Section X(g). (SNF Only, see How-To-Guide #5 Expedited Building Permit).
A-21	**GYPSUM BOARD WEATHER PROTECTION** Temporary and Permanent weather protection	✓				• Protection of gypsum boards shall be per CAN 2.2508.2.1. • May require an AMC. • Contact OSHPD field staff to discuss proposed method for providing weather protection of the building gypsum wallboard.
A-22	**SCREEN(S) REPLACEMENT** (Insect screens)		✓			• See Section 1224.4.9.4
A-23	**SIGNS (INTERIOR)** Signage and labels; surface applied and less than 20 pounds		✓			• See 11B-703 and other applicable provisions in CBC Chapter 11-B. • If electrified, will require office review. • See Section X(c).
A-24	**WHITEBOARD and GREASE BOARD**		✓			• See Finishes, Section X(c).

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
A-25	**SIGNS (EXTERIOR)** Free standing electric signs if connected to hospital electricalsystem	✓				• If sign is in a remote location i.e., vicinity of the back of sidewalks, local authorities may also have jurisdiction.
A-26	**SIGNS (EXIT)** (illuminated) New exit signs and emergency lighting	✓				• OSHPD Electrical Engineer and FLSO review required.
A-27	**SHELVING** Floor-supported storage cabinets 6 ft tall or less. Floor-supported library shelving, storage cabinets, bookstacks, and bookshelves 6 ft tall or less.		✓			• 6'-0" or less in height. • See ASCE 7-16 Chapter 13, Table 13.5-1. • See shelving criteria, Section X(h).
A-28	**SHELVING** Floor-supported storage cabinets over 6 ft., Floor-supported library shelving, bookstacks, and bookshelves over 6 ft.	✓				• Over 6'-0" in height. • See ASCE 7-16 Chapter 13, Table 13.5-1. • See shelving criteria, Section X(h).
A29	**WALLS** Addition or removal of non-loadbearing partitions or non-fire rated partitions	✓				• Using OSHPD /OSHPD Pre-approved details (OPD). • See FLSO Section for information on fire rated walls.
A-30	**WALLS (Repair)** Mold mitigation		✓	YES		• Non-rated. Gypsum replacement only. • See FLSO Section for information on fire rated walls. • Industrial hygienist report required. • See maintenance Section X(f).

MECHANICAL (M)

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
M-1	**AIR HANDLING UNIT, SUPPLY, RETURN, EXHAUST FAN** Minor component replacement		✓	YES		• Minor component replacement. • Direct replacements for filters, fan motors, controls, fan coils. • Must be a direct replacement with no increased size or capacity. • Refer to CAN 2-102.6.14 (a & b) for air balance requirements.
M-2	**AIR HANDLING UNIT, SUPPLY, RETURN, EXHAUST FAN** Replacement *Less* than 2000 CFM	✓				• Refer to CAN 2-102.6 • (SNF Only, see How-To-Guide #4 - Roof Mounted HVAC Expedited Building Permit).
M-3	**AIR HANDLING UNIT, SUPPLY, RETURN, EXHAUST FAN** Replacement *More* than 2000 CFM				✓	• Refer to CAN 2-102.6.
M-4	**AIR HANDLING UNIT** upgrade to larger system				✓	• Refer to CAN 2-102.6.
M-5	**SUPPLY, RETURN & EXHAUST FAN** "single" component replacement	✓				• Refer to CAN 2-102.6, narrative 14a.
M-6	**SUPPLY, RETURN & EXHAUST FAN** multiple component(s) replacement or components of different capacity replacement				✓	• Refer to CAN 2-102.6, narrative 14a.
M-7	**DUCT WORK (Maintenance)** Registers, diffusers, or grilles replacement in kind for damaged components		✓			• Items to remain in same location. • Minor duct work maintenance • If scope impacts life safety components, notification to FLSO required.
M-8	**DUCTS** Anchorage and supports of mechanical ducts, pipes that are not located at or in required exits	✓				• See CBC Section 1613A / ASCE/SEI 7-10.

PLUMBING (P)

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
P-1	**DOMESTIC WATER HEATER** replacement (same size, capacity, and fuel source)	✓				• Any replacement which decreases or increases size capacity or operation characteristics requires an office review. • Anti-scalding device and seismic bracing required. • See water heater replacement guide, Section X(i). • (SNF Only, see How-To-Guide #2 - Water Heater Replacement Expedited Building Permit).
P-2	**DOMESTIC HOT WATER** system piping replacement	✓				
P-3	**PLUMBING FIXTURES MAINTENANCE** Remove and reinstall existing faucets for maintenance		✓			• See Maintenance Criteria Section X(f). • Accessibility requirements must be maintained. • Disinfection required per CPC Sect.609.10. • See CBC, Section 105.2, Plumbing: 1. • Replacement in kind only.
P-4	**PLUMBING FIXTURES** Replacing or adding new Water Closets, Lavatories, Service, Sinks, Clinic Sinks, Janitor Sinks, or Faucets	✓				• Accessibility requirements must be reviewed.
P-5	**PLUMBING FIXTURES** Adding new Hot tubs, Hydrotherapy Tanks				✓	
P-6	**PLUMBING PIPING** "Complete" replacement of defective traps, drainpipe, vents, and piping damages below slab on grade	✓				• See CBC, Section 105.2 Plumbing: 1 • See Maintenance Criteria section X(f) for above slab grade and below slab grade criteria.
P-7	**GUTTER REPLACEMENT** Gutter and Downspout		✓	YES		• Single story, type V construction ONLY. • See CPC Chapter 11-Requirements.
P-8	**MOBILE DIALYSIS UNIT**	✓				• SNF Only, see How-To-Guide #9 - Mobile Dialysis Unit.

UTILITY CONNECTIONS (U)

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
U-1	**MAJOR UTILITY** Permanent connections to water, gas,electric & sewer	✓				• Evidence of approval from Authority having jurisdiction.
U-2	**UTILITY** Permanent connections between health facility & meter: water, gas, electrical	✓				
U-3	**UTILITY** Permanent connections from Health Facilities to accessory buildings or structures or other uses	✓				
U-4	**UTILITY (Temporary)** "Temporary" connections from Health Facilities to accessory buildings or structures or other uses	✓				• When actual construction and temporary equipment is involved for temporary utility shut down, OSHPD maintains jurisdiction, See CAN 2-108. • For change of use, function, service, system, etc. in an operating hospital when no construction and no temporary equipment is involved, CDPH maintains jurisdiction, not OSHPD.
U-5	**STORAGE** Fuel systems, Med-Gas systems, and associated equipment, components, and piping				✓	• See NFPA 99. • See CFC, Sect. 105.1.1, 105.1.5, 105.6.12

ELECTRICAL (E)

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
E-1	**ELECTRICAL CONNECTIONS** from the hospital for trailers containing non-essential services	✓				• Load calculations required.
E-2	**ELECTRICAL RECEPTACLES** Adding General Purpose New	✓				• Load calculations required.
E-3	**ELECTRICAL RECEPTACLES** Existing General Purpose Relocation / Replacement		✓			• Relocating general purpose receptacles within the same room, without causing non-conformance with the CAC 153 and CEC 210.8, 210.63, 210.64, 210.71, 517.18(B), 517.19(B)(1). • Replacing used, worn out receptacles (Listed Hospital Grade receptacles at patient care areas). See CEC 210.8, 517.19(B)(2). • Verify receptacle type including circuit identification EES vs normal power circuit.
E-4	**OVER CURRENT PROTECTION DEVICE (Breaker or fuse)** Normal Power		✓			• Non-Essential power only. • Not upstream of automatic transfer switch(s.) • Direct replacement only.
E-5	**OVER CURRENT PROTECTION DEVICE (Breaker or fuse)** Essential Power				✓	• New or connection to existing spare breaker or fuse. • Per PIN 70, electrical coordination study is required.
E-6	**LIGHT FIXTURES** Direct fixture Replacement		✓	YES		• **Non-essential electrical** system circuitry only. • One for one, unlimited in amount. • (Original location only). • VA for replacement fixture is less than or equal to fixture being replaced.
E-7	**LIGHT FIXTURES** Adding or complete fixture Replacement	✓				• **Essential electrical** system circuitry. • EEOR review required to verify functionality and adequate foot candle levels.

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
E-8	**LIGHT FIXTURES (RE-LAMPING)** Re-lamping existing fluorescent troffer or downlight luminaire with UL TYPE A LED Tubes while fixture body remains as original condition		✓	YES		• One for one tube replacement. • Internal luminaire wiring remains unchanged. • Fixture body is to remain as original condition due to if changed it could trigger support wiring change.
E-9	**LIGHT FIXTURES (RE-LAMPING)** Re-lamping existing fluorescent troffer or downlight with UL TYPE B LED tubes	✓				• One for one tube replacement. • Ballast is bypassed or removed. • Fixture body is to remain as original condition due to if changed it could trigger support wiring change.
E-10	**LIGHT FIXTURES (RE-LAMPING)** Re-lamping existing fluorescent troffer or downlight with UL TYPE C LED tubes	✓				• One for one tube replacement. • Ballast is replaced with LED driver. • Fixture body is to remain as original condition due to if changed it could trigger support wiring change.
E-11	**SYSTEM LOADS** Simple reduction of system loads		✓	YES		• Panel schedule / directory update required.
E-12	**SYSTEM LOADS** Addition of system loads	✓				• Load study required. • Electrical engineer review and panel schedule update required
E-13	**CONDUIT** Relocation / Replacement of existing conduits		✓	YES		• 10 feet or less in length. • 1 inch or less in diameter.

EQUIPMENT (EQ)

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
EQ-1	**KITCHEN EQUIPMENT** Installing (new)	✓				• Equip. such as cooking stoves, kettles, etc.
EQ-2	**KITCHEN HOOD** Installing (new)				✓	
EQ-3	**KITCHEN HOOD** Exhaust fan and kitchen make-up air unit replacement				✓	• Refer to CAN 2- 102.6. • See Criteria Section X(d)
EQ-4	**KITCHEN COOKING** Appliances & Countertop Equipment "Complete" Replacement of mixers, meat slicers, toasters, coffee, urns	✓				• Anchorage review may be required. • Excluding appliance(s) below type 1 and 2 commercial hoods.
EQ-5	**KITCHEN GREASE TRAP** Kitchen grease traps "Complete" replacement or new grease trap	✓				
EQ-6	**KITCHEN REFRIGERATOR/FREEZER** "Complete" Replacement	✓				• Walk-in Refrigerators or Freezers built in place do not apply. Expedite review Project required.
EQ-7	**KITCHEN REFRIGERATOR/FREEZER COMPONENTS** Door, seals, light bulbs		✓			
EQ-8	**ICE MAKERS**	✓				• Domestic water backflow preventer required.
EQ-9	**DISHWASHING EQUIPMENT COMPONENTS** Valves, piping, spray nozzles, hoses, etc.		✓			
EQ-10	**DISHWASHER REPLACEMENT** "Complete" Replacement"	✓				• See section X(d).
EQ-11	**LAUNDRY EQUIPMENT** "Complete" Replacement: Laundry Washers and Dryers less than 400 lbs.	✓				• See PIN 68 Support/Attachment.
EQ-12	**LAUNDRY EQUIPMENT** Installing laundry washer and dryer each unit weighing more than 400 lbs.				✓	• Requires Anchorage. • See PIN 68 Support/Attachment.
EQ-13	**LAUNDRY EQUIPMENT COMPONENTS** Door switches, controls, electric motors, hoses, gas vents and linttraps.		✓			• Any replacement of components which will decrease or increase size, capacity or operational characteristic requires a field review.

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
EQ-14	**EQUIPMENT, DIAGNOSTIC** Exact replacement of a "single" component same as original item on previously approved equipment.		✓	YES		• Replacement must not change mechanical or plumbing services, increase electrical loads, or modify any previously approved structural anchoring.
EQ-15	**EQUIPMENT** "Complete" replacement of equipment	✓				• May be referred to the office.
EQ-16	**EQUIPMENT** Installing equipment weighing less than 400 lbs.	✓				• See PIN 68 Support/Attachment.
EQ-17	**EQUIPMENT** Installing equipment weighing more than 400 lbs.				✓	• See PIN 68 Support/Attachment.
EQ-18	**VENDING MACHINES** not in corridor and not open to an exit.	✓				• May require anchorage. • See PIN 68 Support/Attachment. • Provide GFCI protection (CEC 422.5(A)).
EQ-19	**MOBILE EQUIPMENT** means equipment, with or without wheels or rollers, that is typically used in a different location than where it is stored and moved from one location in the building to another during ordinary use.		✓			• See CBC Section 1617A.1.18. • See PIN 68 Support/Attachment.
EQ-20	**MOVEABLE** means equipment that is directly attached to the building and/or directly connected to a service distribution system/utility, with or without wheels or rollers, that typically remains in one fixed location during its service life or use but is required to be periodically moved to facilitate cleaning or maintenance.	✓				• Requires attachment. • See CBC Section 1617A.1.18. • See PIN 68 Support/Attachment.
EQ-21	**SNF EMERGENCY GENERATOR** SNF Only, see How-To-Guides,	✓				• #6 – Full building Backup, • #7 – Emergency Backup, • #8 – Installing Temporary Generator. • See CAN 2-108.

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
EQ-22	**TEMPORARY GENERATOR EQUIPMENT** (Contractor tool use only)		✓	YES		• Not connected to facility power in any manner. • Contractor tools and equipment use only (i.e., lights, space heater). • Unoccupied spaces only • See Criteria section X(f).

COMMUNICATIONS/INFORMATION SYSTEMS (CI)

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
CI-1	**COMPUTERS & MONITORS** (Not including medical recordsystems)		✓			• See Communication / Information System Criteria, Section X(a).
CI-2	**NURSE CALL SYSTEMS**	✓				• For minor alterations only. • See Communication / Information Systems Criteria, Section X(a).
CI-3	**PAGING SYSTEMS**		✓	YES		• Except systems which incorporate nurse call systems. • See Communication / Information Systems Criteria, Section X(a).
CI-4	**PAGING SYSTEM** used for emergency notification				✓	• Office review required. • See Communication / Information Systems Criteria, Section X(a).
CI-5	**Technology and Telecommunication Equipment**	✓				• See Communication / Information Systems Criteria System anchorage to be reviewed, Section X(a).
CI-6	**TV AND DISTRIBUTION SYSTEMS**	✓				• See Communication / Information Systems Criteria, Section X(a). • (SNF Only See How-To-Guide #3 – Wall Mounted TV/Monitor).
CI-7	**MUSIC SYSTEMS**		✓			• See Communication / Information Systems Criteria, Section X(a).

FIRE AND LIFE SAFETY (F)

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
F-1	**FIRE SPRINKLERS** 5 or less minor head relocation(s)		✓	YES		• FLSO to visit facility to determine placement and contractor's qualifications.
F-2	**FIRE SPRINKLER** Additional Heads (5 or less)	✓				• More than 5 heads require office review.
F-3	**FIRE SPRINKLER** 50-year test		✓	YES		• See Maintenance X(f). • FLSO notification required.
F-4	**FIRE ALARM** 5 or less device(s) relocation notification (chime strobes) appliances	✓				• FLSO review to determine placement and wiring method.
F-5	**FIRE ALARM** 5 or less new initiating (smoke detection) device(s)	✓				• FLSO review to determine placement and wiring method.
F-6	**KITCHEN HOOD FIRE PROTECTION** New or replacement Fire Protection system (for hood & duct)	✓				• Pre-Engineered kitchen fire systems only.
F-7	**HEAD OF WALL JOINT(S)** Maintenance of existing fire-resistive head of wall		✓	YES		• FLSO consult required to confirm design submittal and method used.
F-8	**FIRE STOPPING** Maintenance of minor holes and damage of existing fire stop system protection of rated walls, partitions, ceilings, and floors		✓			• Contact FLSO to discuss method and material to be used. • Special inspection may be required. • See FLSO standard detail for rated wall penetration blowout patch (FR3.06).
F-9	**FIRE RATED DOOR** Replacement of up to 5 Fire rated door(s) only (does not include frame, integrated hardware, and glazing). Damaged door and hardware in smoke partitions, fire barriers, and firewalls.		✓	YES		• FLSO to visit facility to confirm rating. • Only non-integrated hardware allowed (Not connected to automated controls, openers, closers, etc.)
F-10	**FIRE RATED DOORS** Replacement of up to 5 rated doors and door frames, including hardware, and fire rated glazing	✓				• FLSO to visit facility to confirm. More than five doors require office review. • Hardware can be integrated.

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
F-11	**FIRE DAMPERS** NEW fire damper (10 or less), Fire/smoke damper (5 or less) or smoke dampers detector operated	✓				
F-12	**FIRE RESISTIVE PROTECTION** Minor maintenance of existing fire-resistive protection of rated walls, partitions, ceilings, floors, and structural members.		✓	YES		• Approval not required but FLSO to visit facility to confirm design and method used. • For Mold mitigation notify CO and FLSO for consultation required. • For damages to rated Gypsum board, see Criteria section X(c).
F-13	**FIRE RESISTIVE PROTECTION (Walls)** Major repair of existing fire-resistive protection of rated walls, partitions, ceilings, and floors and structural members.	✓				• FLSO to determine project submittal for maintenance of major holes and damage of existing.
F-14	**TEMPORARY CONSTRUCTION BARRIER FOR DUST/FUMES** For **non-fire rated** assemblies		✓	YES		• For construction barriers used for dust or fumes control only, rated plastic barriers may be used with OSHPD field staff consultation.

Item #	Category/Item	FR= Field Review	E= Excluded	(E Only) Form 102	ER= Expedited (Office) Review	Remarks
F-15	**TEMPORARY CONSTRUCTION BARRIER(S)** To maintain **fire rated** assembly.	✓				• See CAN 9-3301. • In occupied buildings, where temporary construction barriers are required to be installed during the construction or reconstruction of fire-resistance-rated assemblies, temporary construction shall meet the same fire-resistance rating as would the permanent partition. Use of plastic or vinyl dust barriers in lieu of fire-resistance-rated separations is prohibited. Temporary construction barriers are not required where adequate fire-resistance-rated separations can be demonstrated to exist between occupied areas and construction areas. Smoke compartments and refuge areas in compliance with CBC Section 407 shall be maintained throughout the period of construction. Existing means of egress need not be maintained where approved temporary means of egress systems and facilities are provided. Required means of egress shall be maintained at all times during construction, demolition, remodeling or alterations and additions to any building. A horizontal exit shall not be destroyed unless and until a substitute. • OSHPD CO and FLSO to be consulted prior to any installation or demolition.

SECTION X: CRITERIA

This section offers more specific guidance on selected types of projects.

X: (a) COMMUNICATIONS/INFORMATION SYSTEMS CRITERIA

(Excluded from Permit)

Computers and monitors, paging systems, telephone systems, TV distributions systems, low voltage camera systems and music systems generally are excluded from OSHPD review. A field confirmation is needed to ensure compliance with applicable codes and penetration requirements shown below. If the field confirmation process reveals a review is required, a review may be performed. If the scope of the project is extensive, the Compliance Officer may require the project be submitted for an Expedited Review.

NOTE: For Workstation On Wheels (WOW), see PIN 68 for mobile equipment requirements.

The addition and/or modification of information systems equipment to be mounted in or on an existing OSHPD approved project cabinet, telecom rack (5'-9" or less in height), or equipment are excluded from OSHPD review. This type of work must utilize existing power outlet and circuits and not modify the electrical distribution system. The information system may not control any part of the equipment or devices it is monitoring and only issue data.

The following are NOT Excluded Work:

- Alarms and alerting systems. See CEC Article 517.
- Nurse call systems, fire alarm systems, infant monitoring systems or systems installed within the exiting system. The CO is to contact the FLSO when cables for these systems run either vertically or horizontally through fire rated floors and/or walls.
- Wi-Fi distribution antenna systems.
- Minor maintenance of nurse call system can be field reviewed as determined by OSHPD field staff.
- Types of cables used shall be in accordance with the CEC. Low Voltage Cabling through fire-resistive construction must have approved penetration protection per the CBC.
- Systems when used for emergencies shall be connected to the life safety branch and may require review in the Office.
- Wall-mounted Electronic Medical Records (EMR) systems and electronic timeclocks are not included in this section and require OSHPD field or office review. Compliance with a 4" maximum projection into an accessible path (CBC Section 11B-307.2) and reach ranges (CBC Section11B-308) for interface

elements are required. Compliance with a 1-1/2” maximum projection into a corridor (CBC Section 1003.3.3.1) is also required.

- Systems connected to internal communication servers, routers, and switches where failure could impair the continued operation of the facility. When located in OSHPD 1 & 4 buildings shall have special seismic certification per CBC 1705A.13.3.1.

X: (b) ASBESTOS CRITERIA

(Excluded from Permit)

Asbestos abatement and related work are under the jurisdiction of the California Department Industrial Relations/Division of Occupational Safety and Health and shall be performed in accordance with Title 8 of the California Code of Regulations. Authorization and permits from the regulatory authority for asbestos abatement/removal, transportation and disposal shall be obtained and OSHPD may request a copy of the permit and abatement report forOSHPD permitted projects where asbestos abatement/removal has occurred.

Projects involving only asbestos removal or encapsulation do not require OSHPD review or abuilding permit issued by OSHPD.

The Division of Licensing and Certification, State Department of Health Services, should benotified regarding any asbestos removal or encapsulation project.

Projects involving the replacement of fire rated materials are subject to OSHPD plan review and building permit process.

X: (c) FINISHES-FLOOR, WALLS, AND CASEWORK

(Excluded from Permit)

General Requirements:

See FREER Project Table:

- Carpet and other flooring, wall coverings, and casework finishes. See A-14
- Acoustical Ceiling Tile replacement. See A-4
- Painting / caulking and sealants. See A-15
- See CBC Sections 803 thru 808 for wall, ceiling, and floor finishes listed below.

All work for wall and flooring finishes and ceiling tile replacements when deemed Excluded is unlimited in amount.

NOTE: For some Excluded work requests, submit to OSHPD field staff HCAI-OSH-102 form per the FREER Project Table in this document. The HCAI-OSH-102 form is required for excluded work items if "YES" is in the "(E Only) Form 102" column.

Dietary Service area finishes

- Due to joint jurisdiction with CDPH and Local Health departments dietary service area finishes work will not qualify as Excluded and will require submission of a functional program and regular plan review.
- See California Retail Food Code (CRFC).
- HCAI A-3 Dietetic Design and Review Checklist.
- HCAI PIN 40 - Dietary and Food Services within Health Facilities.

CBC, Interior Environment Locations:

Section 1224-OSHPD 1-Hospitals

Section 1225-OSHPD 2-Skilled Nursing and Intermediate facilities

Section 1226-OSHPD 3-Clinics

Section 1227-OSHPD 4-Correctional treatment centers

Section 1228 OSHPD 5-Acute Psychiatric Hospitals

The request must include the following items: (For Excluded work, design professional plans are NOT required to be submitted)

1. A simple drawing or sketch made by the facility with OSHPD Building Number, showing the areas of proposed work and use(s) is acceptable.
2. Detail any temporary construction barriers needed during construction and if any effect on smoke detectors or sprinkler.
3. Detail how exiting will be maintained during construction.
4. Detail how the construction area will be maintained in a negative air relationship from adjacent areas to avoid any impact to patient care and safety from noise, dust, and fumes.
5. A manufacturers specification sheet for each type of finish materials.

Minimum Specifications for INTERIOR WALL and CEILING FINISHES:

All interior wall and ceiling finishes are required to comply with CBC Sections listed below:

- CBC, Section 808 - Acoustical Ceiling Systems
- CBC, Section 803
- For interior acceptable ceiling and wall locations see: CBC, Table 1224.4.11

Finishes and coverings shall comply with the following:

- CBC Section 803.1.1 - Interior wall and ceiling finish materials in accordance with NFPA 286
- CBC Section 803.1.1.1 - Acceptance criteria for NFPA 286
- CBC Section 803.1.2 - Interior wall and ceiling finish materials tested in accordance with ASTM E84 or UL 723.Such finish materials shall be grouped in the following classes in accordance with their flame spread and smoke developed indices listed below:

  Class A = Flame spread index 0-25; smoke developed index 0-450
  Class B = Flame spread index 26-75; smoke developed index 0-450
  Class C = Flame spread index 76-200; smoke developed index 0-450

Minimum specifications for CASEWORK finishes in health facilities:

All interior casework finish materials are required to comply with CBC, Sections listed below:

- CBC Section,2604.1 - Interior finish, and trim
- CBC Section 2605.1 - Plastic Veneer
- CBC Sections 803.1, 803.1.1.1, 803.1.2, 803.11, 803.12, 803.13

Minimum specifications for INTERIOR FLOOR finishes in health facilities:

CBC Section 804

Classification requirements - CBC Section 804.2:
Interior floor finish and floor coverings required by section 804.4.2 to be of Class I or Class II materials shall be classified in accordance with ASTM E648 or NFPA 253. Class 1, 0.45 watts/cm2 or greater, Class 2, 0.22 watts/cm^2 or greater.

Testing and Identification Requirements - CBC Section 804.3:
Interior floor finish and floor covering materials shall be tested by an agency in accordance with ASTM E648 or NFPA 253 and identified by a hang tag or other suitable method to identify the manufacturer or supplier and style and shall indicate the interior floor finish or floor covering classification in accordance with CBC, Section 804.2. Carpet- type floor coverings shall be tested as proposed use, including underlayment.

Test Requirement - CBC Section. 804.4.1:
In all Occupancy's, Interior floor finish and Interior floor covering materials shall comply with the requirements of ASTM Standard E648 Having a specific optical density smoke rating not to exceed 450 per ASTM E662.

Minimum critical radiant flux requirements - CBC, Section 804.4.2:
In all Occupancies, interior floor finish and floor covering materials in enclosures for stairways and ramps, exit passageways, corridors and rooms or spaces not separated from corridors by partitions extending from the floor to the underside of the ceiling shall withstand a minimum critical radiant flux. The minimum critical radiant flux shall not be less than Class I in groups I-2, I-3 areas where restraint is not used and R-2.1 and not less than Class II in groups A, B, E, H, I-2.1, I-4, M, R-1, R-2, R-2.2 and S.

EXCEPTION: Where a building is equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1 or 903.3.1.2, Class II materials are permitted in any area where Class I materials are required, and materials complying with ASTM Standard E648, and having a specific optical density smoke rating not to exceed 450 per ASTM E662 are permitted in any area where Class 2 materials are required.

For Group I-3 and Group I-2 where patients are restrained (see Section 804.4.3 below):

Group I-2 and Group I-3 Occupancy Floor Surfaces - CBC Section 804.4.3:
Interior floor finish and floor coverings occupied by inmates or patients whose personal liberties are restrained shall be non-combustible.

EXCEPTION: Carpet or other floor covering materials may be used in areas protected by an automatic sprinkler system installed throughout in accordance with Section 903.3.1.1. Carpet or other floor coverings shall comply with the requirements of ASTM Standard E648; the minimum critical radiant flux shall be not less than Class I and has a critical radiant flux limit of not less than 0.45 watt per square centimeter. The carpeting and padding shall be identified by a hang tag or other suitable method as to manufacturer and style and shall indicate the classification of the material based on the limits set forth above.

In patient corridors and other heavy traffic areas including areas subject to rolled equipment or furniture, carpet should be of maximum density to provide minimum resistance to rollers. For safety, only level loop and/or low-level dense pile styles shouldbe selected. The maximum pile height variation shall be no more than 0.125 inches.

NOTE: Flame spread ratings for carpet other than under 3-hour fire doors, are not a requirement of the State, but are a requirement for facilities seeking participation in the Federal Title XVIII and XIX programs (Medicare/Medicaid) which require compliance with NFPA 101.

CBC Section 11B-302.2 has additional accessibility requirements for flooring installation.

Minimum specifications for DECORATIVE MATERIALS and TRIM in health facilities:
CBC SECTION 806

GENERAL – CBC Section 806.1:
The following requirements shall apply to all Occupancies:

1. Furnishings or Decorative materials of an explosive or highly flammable character shall not be used.
2. Fire retardant coatings in existing buildings shall be maintained to retain the effectiveness of the treatment under service conditions encountered in actual use.
3. Furnishings or other objects shall not be placed to obstruct exits, access there to, egress therefrom or visibility thereof.
4. The permissible amount of decorative vegetation and noncombustible decorative materials shall not be limited.

Combustible decorative materials - CBC Section 806.2:

In groups A, B, E, I, M AND R-1 and in dormitories in group R-2, Curtains, draperies, fabric hangings and similar combustible decorative materials suspended from walls or ceilings shall comply with section 806.4 and shall not exceed 10 percent or the specific wall or ceiling area to which such materials are attached.

The 10 percent limit shall not apply to curtains, draperies, fabric hangings and similar combustible decorative materials used as window coverings.

Fixed or movable walls and partitions, paneling, wall pads and crash pads applied structurally or for decoration, acoustical correction, surface insulation or other purposes shall be considered as interior finish and shall comply with section 803 and is not to be considered decorative materials or furnishings.

For damages to rated Gypsum board such as for removal and replacement of glued on wall paneling, wall pads, crash pads for decorative or other uses, the Gypsum board shall be incompliance to Gypsum Association Standard for Repair of Fire-Rated Gypsum Panel Product Systems (GA-225 most current edition). If damage covers more than 100 sq.in. in 100 sq. ft. of wall area or ceiling area, all materials in the damaged area must be removed back to the original framing to make the repair. The gypsum board the paneling was adhered to shall have its assembly listing maintained. See Item # F-12 in FREER Project Table.

NOTE: Items such as white board(s), dry erase board(s), clocks, artwork, and similar wall mounted with positive attachment items and less than 20 pounds shall comply with CBC Chapter 8, Sections 803, 806 and CBC Chapter 11B. If electrified, requires field review.

Occupancy based requirements – CBC Section 806.3:

Occupancy based requirements for combustible decorative materials, other than decorative vegetation, not complying with section 806.4 shall comply with Sections 807.5.1 through 807.5.6 or the California Fire Code.

Acceptance criteria and reports – CBC Section 806.4:

Where required to exhibit improved fire performance, curtains, draperies, fabric hangings and similar combustible decorative materials suspended from walls or ceilings shall be tested by an approved agency and shall be flame resistant in accordance with the provisions set forth in CCR, Title 19, Division 1, Chapter 8. Reports of test results shall be prepared in accordance with the test method used and furnished to the building official on request.

Interior Trim - CBC Section 806.7:

EXCEPTION: Interior trim materials that comply with Section 806.7.

Material, other than foam plastic used as interior trim, shall have a minimum Class B flame spread and 450 Smoke develop index in group I-3 and for all other Occupancies Class C flame spread and smoke development index tested in accordance with ASTM E84 or UL 723 as described in Section 803.1.2 Combustible trim , Excluding handrails and guardrails, shall not exceed 10 percent of the specific wall or ceiling area to which it is attached.

Interior floor-wall base – CBC Section 806.8:

Interior floor-wall base that is 6 inches or less in height shall be tested in accordance with Section 804.2 and shall not be less than Class 2. Where a Class 1 floor finish is required, the floor wall base shall be Class 1.

X: (d) DISHWASHER REPLACEMENT CRITERIA

(Field Review)

Design Criteria

Anchorage
Anchorage shall be designed to resist the seismic forces required by the California Building Code for Structural Design and anchorage of non-structural components. See CBC Section 1617A.1.18. See PIN 68 - Support and Attachment Requirements for Fixed, Interim, Mobile, Movable, Other and Temporary Equipment.

Scope CBC Section 1617A.1.18. Every structure, and portion thereof, including nonstructural components that are permanently attached to structures and their supports and attachments, shall be designed, and constructed to resist the effects of earthquake motions.

Mechanical anchors, post-installed anchors and specialty anchors shall comply with the load, installation, and testing criteria of Title 24 for Structural Design. The dishwasher equipment shall be mounted on a concrete floor slab on grade for FREER projects.

Plumbing
Plumbing connection and installation shall comply with the California Plumbing Code (CPC). Typically rinse water temperature measured at the automatic dishwashing equipment shall be 180 degrees (F) Fahrenheit except where chemical rinse is approved by Department of Health Service, Licensing and Certification.

Appliances equipped with pumps, drips, or drainage outlets may be drained by indirect wastepipes discharging into an approved type, open receptor in accordance with the CPC.

The use of the existing plumbing system is acceptable provided the existing system complieswith the CPC.

Mechanical
Hoods shall be installed at or above dishwashing machines in accordance with the California Mechanical Code (CMC).

NOTE: If a hood needs to be installed, plans must be submitted for an expedited review.

Electrical
For load additions, drawings will need to be submitted for an expedited review. Equipment revisions and/or load capacity verification, will be required to show compliance with the California Electrical Code Article 220. See OSHPD PIN 38 - Electrical Load Capacity Verification Guideline for documentation requirements.

X: (e) HANDRAIL REPLACEMENT CRITERIA

(Field Review)

Design Criteria

Where required in healthcare facilities, handrails shall be adequate in strength and attachment in accordance with Title 24 for Structural Design.

Handrails replaced in public, patient or common use areas shall comply with the requirementsof CBC Section 11B-505. This includes mounting height, clearances, gripping surface, fittings, and extensions.

For Skilled Nursing Facilities, see How-To-Guide #3 for Expedited Building Permit.

X: (f) MAINTENANCE CRITERIA

(Excluded from Permit)

There are many maintenance items which do not require an OSHPD building permit and you are encouraged to contact the OSHPD field staff assigned to your area for clarification.

OSHPD field staff may consult with the RCO for clarification of the requested item. Exemption from the requirement for an OSHPD permit shall not be deemed to grant authorization for the work to be done in violation of the provisions of the California Building Standards Codes.

NOTE: For some excluded work requests, submit to OSHPD field staff form HCAI-OSH-102 per the FREER Project Table in this document. The HCAI-OSH-102 Form is required for excluded work items if "YES" is in the "(E Only) Form 102" column.

The following items are examples of what would be considered maintenance. If unsure after review of the FREER Project Table item number that is applicable, contact your OSHPD field staff to confirm that the work is excluded from permit:

- Replacement of burned-out motors or compressors with other of the same horsepower, voltage, etc.
- For common breaker or fuse failures, replacement in kind of circuit breaker(s) or fuses(s) for non-essential power only when item is not upstream of automatic transfer switch. See item # E-3 in FREER Project Table.
- Ordinary repair and maintenance of Plumbing and Mechanical Equipment. Replacement of a plumbing fixture for maintenance that does not alter its original approval including accessibility requirements and is in accordance with other applicable requirements of the code. See item #'s P-3, P-4, P-5, and P-6 in FREER Project Table.
- Painting, caulking, and sealant replacements are considered Maintenance. See item # A-15 in FREER Project Table.
- Replacement of wallpaper or flooring or ceiling tiles are considered maintenance. See: Finishes section in this manual for acceptance criteria. See item # A-14 in FREER Project Table.
- Replacement of damaged door; the facility must be sure to replace rated doors with fire rated doors with the same rating and approved assemblies; door hardware must comply with CBC 11B-404.2.7 and closer, if provided, with 11B-404.2.8 and 11B-404.2.9. See item #'s A-9 and F-9 in FREER Project Table.
- Replacement of a defective light fixture; however, this does not include a total replacement of light fixtures for energy conservation or upgrading of the lighting. See item #'s E-6, E-7, E-8, and E-9 in FREER Project Table.
- Sprinklers that have been in service for 50 or more years must be replaced or representative samples tested per current **NFPA 25**. The OSHPD FLSO will review the proposed testing program for the following elements: Sprinklers are eligible for testing in lieu of replacement. Firewatch is implemented while sprinkler system is inoperative. Local Fire Department has been notified. Replacement heads are

appropriate. System is properly restored. See item # F-3 in FREER Project Table.

- **Plumbing (Above slab on grade)**, the clearing of stoppages, including the removal and reinstallation of water closets, or the repairing of leaks in pipes, valves, or fixtures, provided such repairs do not involve or require the replacement or rearrangement of valves, pipes, or fixtures is considered Excluded work. HCAI-OSH-102 form not required.
- **Plumbing (Below slab on grade)**, the stopping of leaks in drains, soil, waste, or vent pipe. Replacement of defective traps, drainpipe, soil, waste, or vent pipe shall be considered new work and is subject to OSHPD review and permitting. See item # P-6 in FREER Project Table.

Emergency Power Supply Systems

- NFPA 110, Chapter 4 - Level 1 EPSS: Shall supply a transfer of power to an alternate power system within a 10 second period.
- NFPA 110, Chapter 8: Routine Maintenance and Operational testing.
    - Section 8.1.1: The routine maintenance and operational testing shall be based on the following:
        - Manufacturer's recommendations
        - Instruction manuals
        - Minimum requirements of NFPA 110, Chapter 8
        - The authority having jurisdiction - CDPH is the authority having jurisdiction and whom shall be notified for any alternate requests beyond the code requirements listed in this section.

NOTE: See item # EQ-22 in FREER Project Table.

Generator Maintenance - Tests and Maintenance - CEC 700.3:

Tested Periodically - CEC 700.3 (B): Systems shall be tested periodically on a schedule acceptable to the authority having jurisdiction to ensure the systems are maintained in proper operating condition (OSHPD 1, 1R, 2, 5 and any facility licensed by CDPH) the authority having jurisdiction is Department of Public Health, Licensing and Certification (CDPH).

Time limits - NFPA 110 8.1.2: If time limits for restoration of emergency power is going to be delayed beyond the required 10 seconds, consideration shall be given to temporarily providing a portable or alternate source whenever the emergency generator is out of service.

Temporary Generator for Contractor Tool Use Only

- Setback and clearance requirements per CAN 2-108 shall apply.
- Not connected to facility power in any manner.
- For purpose of contractor tool and equipment use only (i.e., lights, space heater).
- Unoccupied patient spaces only.

NOTE: See item # EQ-23 in FREER Project Table.

Special Construction

Temporary structure and uses - OSHPD CAN 2-108: This CAN details the requirement for facilities to bring on temporary generators and equipment. OSHPD is the authority having jurisdiction for permits of temporary equipment. See item # SC-3 in FREER Project Table.

X: (g) RE-ROOFING CRITERIA

(Field Review)

This can be done electronically through the e-Services Portal (https://esp.oshpd.ca.gov) or if online submission is not available, required paper documents may be submitted to the OSHPD regional office serving your facility.

Submittal must include:

1. Application for New Project (SNF Only, see How-To-Guide #5 – Re-roofing).
2. Application for Inspector of Record (IOR).
3. Current IOR workload report.
4. Reviewed and stamped Testing, Inspection & Observation (TIO) Program (paper submittal only).
5. Drawings (may be done on 8½ X 11) which indicate (paper submittal only):
    a. Plan view with area to be re-roofed indicated.
    b. Slope or pitch of roof of all sections of the roof.
    c. Remodel of existing roof or roofing over and number of existing layers.
    d. Name and address of facility.
6. Specifications (UL Class A or B Fire Retardant) Roofing System including UL design numberor system number specifically approved for re-roofing.
7. Demolition plan (removal of existing roof) if the combination of the existing roofing material and the new roofing material will invalidate the UL listing of the new material.
8. Sheathing nailing (for diaphragm action) and replacement of sheathing for wood where applicable.

All work must comply with Title 24.

The drawings and roofing specifications will be stamped and reviewed by OSHPD.

The following shall be inspected on site by the IOR:

- Roofing materials and application.
- Condition of surface and supporting structure.
- Seismic separations.
- Flashings, counter flashings, and roof jacks.
- Insulation and vapor barrier, where applicable.
- Smoke barrier walls.
- Attic access, if required Draft stops.
- Ventilation, attic, and roof.
- Roof drains and drainage to an approved location.

When equipment weighing more than 400 pounds such as HVAC Units are removed during theprocess, the equipment shall be seismically anchored when replaced and an electrical disconnect switch installed if not already provided. Structural calculations for the remounting are required.

Patching of a roof to prevent leaks must not exceed three squares (300 square feet). The material used must meet the requirements and may be approved by the CO. Reroofing over 300 square feet requires a building permit. Adding sealant or repairing sealant, contact the CO and FLSO for concurrence with applicability. Existing roof system shall be provided along with product information qualifying its acceptable use. See How-to-Guide # 5—Re Roofing expedite building permit for single story SNFs.

At the completion of the project, verified reports shall be provided in accordance with the approved TIO for the project. Additionally, the owner shall submit a final verified cost of theproject.

The OSHPD CO will provide final inspection and clearance.

The Office will close in compliance the project upon receipt of all required documents, clearances, and fees. See Section VIII.

X: (h) SHELVING CRITERIA

(Field Review) and (Excluded)

Anchorage (Cabinets/Furniture/Shelving)

Excluded from permit and review

Floor supported shelving, storage cabinets, wire shelving, or bookshelves with the upper storage level **under 6 ft. high** and installed in storage areas shall be excluded from review, provided they are not installed within one-hour rated corridors or within the accessible public way or within patient area. Manufacturer specifications may require anchorage.

See item # A-28 in FREER Project Table.

Field review, permit required

Floor supported shelving, storage cabinets, wire shelving, or bookshelves **more than 6 ft.** in height need to be OSHPD reviewed for location and anchorage requirement(s).

All cabinets and shelving located in nurse stations exposed to exit corridors shall meet the allowable combustion loading criteria of the CBC, Section 407.2.2.

Storage cabinets and shelving in accessible areas shall comply with CBC Section 11B-225.2 and include the clear floor space, reach ranges and operable parts required by CBC, Section 11B-811.

See item # A-29 in FREER Project Table.

X: (i) WATER HEATER REPLACEMENT CRITERIA

(Field Review)

Permits and Inspection

Refer to the California Plumbing Code (CPC), Sections 502 and 503.

"It shall be unlawful for any person to install, remove, or replace any water heater without first obtaining a permit from the Authority Having Jurisdiction to do so."

Inspection of the water heater installation is required by CPC Section 503.2.

For SNF, see How-To-Guide #2 – Water Heater Replacement. See item # P-1 in FREER Project Table.

Design Criteria

Anchorage for water heaters shall be designed to resist a lateral seismic force equal to 20% of the equipment weight, full of water, acting concurrently with the total vertical load for Skilled Nursing Facilities and Intermediate Care Facilities and 30% for hospital buildings.

The equipment shall be mounted on a concrete floor slab on grade to be eligible for field review.

Expansion anchors: Identify the manufacturer, type, diameter, and minimum embedment. The expansion anchor used shall have allowable load values for shear and tension indicated.

See Seismic Provisions CPC Section. 507.2.

Plumbing changes in equipment and/or piping size for existing health facilities shall require a mechanical engineer's stamped approval of drawings of the exact installation and does not qualify for How-To-Guide (Expedited Permit). Consideration of all code requirements for equipment, pipe size on distribution, anti-scalding, combustion air requirements and venting shall be outlined in detail on the mechanical engineer's stamped and approved drawings.

The use of the existing plumbing system is acceptable when field confirmed, or plan reviewed that the existing system complies with CPC Section 102.2.

For PEX Plastic tubing, joints and fittings see CPC Sections 605.9 and 605.9.1. PEX tubing for hot water use shall meet or exceed the requirements of ASTM F876-2015a or an equivalent or more stringent standard.

For required dielectric insulator see CPC Section 507.1.

Clearances

Un-insulated water heaters shall not be located closer than six inches to unprotected combustible construction nor closer than three inches to protected combustible construction.

Insulated water heaters shall not be installed closer than one inch to one hour rated fire walls.

Insulated water heaters shall not be located closer than two inches to unprotected combustibleconstruction nor closer than one inch to protected combustible construction.

No water heater which depends on the combustion of fuel for heating shall be in any room used or designed to be used for sleeping purposes, bathroom, clothes closet, or other confined space opening into any bath or bedroom.

Water heaters shall be protected from damage per requirements of CPC Section 507.3. For SNF, see How-To-Guide #2 – Water Heater Replacement.

Every water heater shall be accessible for inspection, repair, or replacement per requirementsof CPC, Chapter 5.

Every water heater designed to be vented shall comply with the provisions of CPC, Chapter 6, required temperature and amounts shall be in accordance with CPC Table 613.19.

At least two pieces of water-heating equipment shall be provided to supply hot water for dishwashing and minimum patient services such as handwashing and bathing. The arrangement of water-heating equipment shall be based on the capacity and capability of the equipment to provide the required hot water during periods of breakdown or maintenance of any one water heater. Booster heaters for 125 degrees F (Fahrenheit) to 180 degrees F (52 degrees Celsius to 82 degrees Celsius) water are acceptable as a second piece of equipment for dishwashing. Where storage tanks are separate from the water heater, at least two independent storage tanks shall be provided. See CPC Section 613.2.

Water storage tanks shall be fabricated of corrosion-resistant materials or lined with corrosion-resistant materials. See CPC Section 613.4.

Temperature control valve shall be provided to automatically regulate the temperature of hotwater delivered to plumbing fixtures used by patients to a range of 105 degrees F minimum to 120 degrees F maximum. A high temperature alarm set at 125 degrees F shall be provided. See CPC Section 613.5.

Hot-water distribution system serving patient care areas shall be under constant mechanical recirculation to provide continuous hot water at each hot water outlet. Non-recirculated fixture branch piping shall not exceed 25 feet (7.62 Meters) in length. Dead-end piping (risers with no flow, branches with no fixture) shall not be installed. In renovation projects, dead-end piping shall be removed in the area of renovation. Empty risers, mains, and branches installed for future use shall be permitted. See CPC Section 613.6.

All fixtures where water exceeding 125 degrees F is accessible to patients or personnel, warning signs in letters at least 2 inches high shall be posted above the

fixtures. See CPC Section 613.7.

Gas Fired

Gas piping shall comply with CPC Chapter 12.

New or reconditioned gas fired water heaters shall bear a label of an approved testing agency,certifying and attesting that such equipment has been tested and inspected and meets the required standards.

Combustion air shall be provided in accordance with CPC Section 506.0.

Water heater vent shall be provided in accordance with CPC Section 509.0.

Unfired domestic hot water generators (heat exchangers) supplied with steam, boiler water, solar water or other non-potable fluids shall comply with CPC 603.5.4 requiring double tube-wall (or equivalent) construction in the heat exchanger or shall comply with CPC 505.4.1 for single wall.

Electrical

Each storage or instantaneous type water heater shall be equipped with a temperature-limitingmeans in addition to its control thermostat to disconnect all ungrounded conductors, and such means shall be: (1) installed to sense maximum water temperature and (2) either a trip-free, manual reset type or a type having a replacement element. Such water heaters shall be marked to require the installation of a temperature and pressure relief valve.

See Listing Requirements for Relief Valves and Automatic Gas Shutoff Devices for Hot WaterSupply Systems. See CPC Section 504.6.

EXCEPTION:
Water heaters with supply water temperatures of 82 degrees Celsius (180 degrees Fahrenheit) or above and a capacity of 60kw or above and identified as being suitable for this use; and water heaters with a capacity of 1 gallon or less and identified as being suitable for such use.

Storage type water heaters: All fixed storage type water heaters having a capacity of 120 gallons or less shall have a branch circuit rating not less than 125% of the nameplate rating ofthe water heater. For branch circuit sizing, see the California Electrical Code.