

**INITIAL STATEMENT OF REASONS
FOR PROPOSED BUILDING STANDARDS
OF THE OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT
REGARDING THE 2019 CALIFORNIA ADMINISTRATIVE CODE
CALIFORNIA CODE OF REGULATIONS, TITLE 24, PART 1
(OSHPD 01/19)**

The Administrative Procedure Act (APA) requires that an Initial Statement of Reasons be available to the public upon request when rulemaking action is being undertaken. The following information required by the APA pertains to this particular rulemaking action:

STATEMENT OF SPECIFIC PURPOSE, PROBLEM, RATIONALE and BENEFITS

Government Code Section 11346.2(b)(1) requires a statement of specific purpose of each adoption, amendment, or repeal and the problem the agency intends to address and the rationale for the determination by the agency that each adoption, amendment, or repeal is reasonably necessary to carry out the purpose and address the problem for which it is proposed. The statement shall enumerate the benefits anticipated from the regulatory action, including the benefits or goals provided in the authorizing statute.

OSHPD's proposal for amending the 2019 California Administrative Code was presented to the Health Facilities (HF) Ad Hoc Code Advisory Committee (CAC) meeting on February 25, 2020. Each committee recommendation is listed below, accompanied by OSHPD's response.

Item Number 1

**CHAPTER 6 - SEISMIC EVALUATION PROCEDURES FOR HOSPITAL BUILDINGS
ARTICLE 1 - DEFINITIONS AND REQUIREMENTS**

Section 1.5.2 Delay in compliance.

Paragraph amended as the date to apply for an extension has passed. Amended for a project previously submitted and approved for an extension.

CAC Recommendation: The HF Ad Hoc Code Advisory Committee recommended Approve as Submitted (AS) to Item 1.

OSHPD Response: OSHPD agreed with the CAC recommendation.

Item Number 2

**CHAPTER 7 - SAFETY STANDARDS FOR HEALTH FACILITIES
ARTICLE 2 - DEFINITIONS**

Section 7-111. Definitions.

Added the definition of "Emergency Repair" to clarify that repairs can be made to essential equipment and systems to continue safe occupation and operation of a facility.

Amended the definition of "Hospital Building." Hospitals buildings do not include buildings separated from compliant hospital buildings now referred to as "freestanding" for consistency with defined terms in this code.

Added the definition of “Maintenance” to clarify that routine work can be completed to keep a facility in such a condition as its original, or designed, capacity and efficiency, and be maintained for its intended purpose. Editorial changes were made in response to CAC addendum. Repeated words were deleted from end of paragraph.

Added the definition of “Substantial Compliance” for clarification of the stage of construction where an owner may re-occupy a portion of a building altered in a building project. This stage is recognized with a Certificate of Substantial Compliance, similar to a Certificate of Occupancy, used as a specific date in other sections of Chapter 7.

CAC Recommendation: The HF Ad Hoc Code Advisory Committee recommended Approve as Submitted (AS) to Item 2, with the exception of Approve as Amended (AA) for the editorial correction to the definition of “Maintenance.”

OSHPD Response: OSHPD agreed with the CAC recommendation.

Item Number 3

CHAPTER 7 - SAFETY STANDARDS FOR HEALTH FACILITIES

Article 3 - APPROVAL OF CONSTRUCTION DOCUMENTS

Section 7-113. Application for plan, report or seismic compliance extension review.

Amended existing language to allow for submission for electronic review of construction documents.

CAC Recommendation: The HF Ad Hoc Code Advisory Committee recommended Approve as Submitted (AS) to Item 3.

OSHPD Response: OSHPD agreed with the CAC recommendation.

Item Number 4

CHAPTER 7 - SAFETY STANDARDS FOR HEALTH FACILITIES

ARTICLE 3 - APPROVAL OF CONSTRUCTION DOCUMENTS

Section 7-118 Building Energy Efficiency Program.

Amended existing language to provide a pointer to the California Energy Commission requirements.

CAC Recommendation: The HF Ad Hoc Code Advisory Committee recommended Approve as Submitted (AS) to Item 4.

OSHPD Response: OSHPD agreed with the CAC recommendation.

Item Number 5

CHAPTER 7 - SAFETY STANDARDS FOR HEALTH FACILITIES ARTICLE 3 - APPROVAL OF CONSTRUCTION DOCUMENTS

Section 7-125 Final review of construction documents – (e) Changes in Scope.

Paragraph amended as the date to apply for an extension has passed. Amended for a project previously submitted and approved for an extension.

Added new subsection to address changes in scope during Office review of final construction documents. Review documents that add to, or change the scope of, the project during office review require a re-review of the revised or proposed area of the project. If the changes proposed impact the original project scope that has previously been reviewed or is additional scope not considered as part of the plan review fee previously assessed, additional effort is required by staff to conduct this additional review. Changes of scope have previously required this work to be submitted as a separate project with its own review fees assigned. This amendment allows the option for this new review to be reviewed as an examination amending the existing project but subject to fees required by Section 7-133(q)(3) time and materials.

ASSOCIATED SECTIONS TO ITEM 5:

Represents section that may be impacted by this proposed code change item – Refer to those items in parentheses for related changes.

(ITEM 8) Chapter 7, SAFETY STANDARDS FOR HEALTH FACILITIES, *Section 7-153*

CAC Recommendation: The HF Ad Hoc Code Advisory Committee recommended Approve as Submitted (AS) to Item 5.

OSHPD Response: OSHPD agreed with the CAC recommendation.

Item Number 6

CHAPTER 7 - SAFETY STANDARDS FOR HEALTH FACILITIES ARTICLE 3 - APPROVAL OF CONSTRUCTION DOCUMENTS

Section 7-133 Fees – (d) Preliminary review.

Amending existing section to designate that preliminary review fees are non-refundable. 10% of total fee is currently charged for a preliminary review. This 10% is deducted from the full project once it is submitted for final review. If the project does not go forward beyond the preliminary, the fee is being requested to be refunded in which case the Office loses the fee for services already rendered. This amendment will make the preliminary fee non-refundable but will still be deducted from the final fee if the project moves beyond preliminary review.

7-133 Fees – (h) Phased submittal and collaborative review.

Amending existing section to designate that the fee structure for when a Phased Submittal Review or Collaborative Review is requested. 10% of total fee is charged for a Phased Submittal Review or Collaborative Review. This 10% is deducted from the full project review fee. If the project does not go forward after the review has started, the fee is being

requested to be refunded in which case the Office loses the fee for services already rendered. This amendment will make the preliminary fee non-refundable but will still be deducted from the final fee if the project moves beyond preliminary review.

CAC Recommendation: The HF Ad Hoc Code Advisory Committee recommended Approve as Submitted (AS) to Item 6.

OSHPD Response: OSHPD agreed with the CAC recommendation.

Item Number 7

CHAPTER 7 - SAFETY STANDARDS FOR HEALTH FACILITIES ARTICLE 3 - APPROVAL OF CONSTRUCTION DOCUMENTS

Section 7-134 Fee Refund

Clarified existing language that a refund may be issued one year from the date of Certificate of Occupancy or Substantial Compliance rather than when the project is closed.

CAC Recommendation: The HF Ad Hoc Code Advisory Committee recommended Approve as Amended (AA) to Item 7. A committee member recommended amending the word “of” to “from” in Items b and c.

OSHPD Response: OSHPD agreed with the CAC recommendation. Editorial changes were made in response to CAC recommendation to approve as amended. The word “of” was changed to “from” in Items b and c.

Item Number 8

CHAPTER 7 - SAFETY STANDARDS FOR HEALTH FACILITIES ARTICLE 4 - CONSTRUCTION

Section 7-153 Changes to the approved work – (d) Changes in scope.

Amended construction documents that change the scope of the project require a new review of the proposed area of the project. The changes proposed may or may not impact the original project scope. If the scope of the change was not previously reviewed and not considered as part of the plan review fee previously assessed or has extensive revisions to the current scope requiring a re-review of efforts already made, the Office should be compensated for the additional time for this review. Changes of scope have previously required this work to be submitted as a separate project with its own review fees assigned. This amendment allows the option for this new review to be reviewed as an examination amending the existing project but subject to fees required by Section 7-133(q)(3) time and materials.

ASSOCIATED SECTIONS TO ITEM 8:

Represents section that may be impacted by this proposed code change item – Refer to those items in parentheses for related changes.

(ITEM 5) Chapter 7, SAFETY STANDARDS FOR HEALTH FACILITIES, *Section 7-125(e)*

CAC Recommendation: The HF Ad Hoc Code Advisory Committee recommended

Approve as Submitted (AS) to Item 8.

OSHPD Response: OSHPD agreed with the CAC recommendation.

Item Number 9

CHAPTER 7 - SAFETY STANDARDS FOR HEALTH FACILITIES ARTICLE 19 - CERTIFICATION AND APPROVAL OF HOSPITAL INSPECTORS

Section 7-204 Minimum qualification for examination.

(b) Minimum qualifications for Class "B" Hospital Inspector Exam:

Amended to clarify the minimum requirements also require high school graduation and two years experience involved in building projects as an architect's, engineer's, owner's, local building official's or general contractor's representative in technical inspection for a Class B Hospital Inspector. This language should have been supplemental to certification alone to align with the other classes of certification.

CAC Recommendation: The HF Ad Hoc Code Advisory Committee recommended Approve as Submitted (AS) to Item 9.

OSHPD Response: OSHPD agreed with the CAC recommendation.

TECHNICAL, THEORETICAL, AND EMPIRICAL STUDY, REPORT, OR SIMILAR DOCUMENTS

Government Code Section 11346.2(b)(3) requires an identification of each technical, theoretical, and empirical study, report, or similar document, if any, upon which the agency relies in proposing the regulation(s).

Response: There are no formal studies, reports or documents to be identified as the basis for the proposed amendments.

STATEMENT OF JUSTIFICATION FOR PRESCRIPTIVE STANDARDS

Government Code Section 11346.2(b)(1) requires a statement of the reasons why an agency believes any mandates for specific technologies or equipment or prescriptive standards are required.

Response: The proposed amendments do not contain any mandates for specific technologies or equipment or prescriptive standards.

CONSIDERATION OF REASONABLE ALTERNATIVES

Government Code Section 11346.2(b)(4)(A) requires a description of reasonable alternatives to the regulation and the agency's reasons for rejecting those alternatives. In the case of a regulation that would mandate the use of specific technologies or equipment or prescribe specific action or procedures, the imposition of performance standards shall be considered as an alternate. It is not the intent of this paragraph to require the agency to artificially construct alternatives or describe unreasonable alternatives.

Response: There were no alternatives for consideration by OSHPD. Proposed amendments will provide clarification and consistency within the code and are in alignment with national standards.

REASONABLE ALTERNATIVES THE AGENCY HAS IDENTIFIED THAT WOULD LESSEN ANY ADVERSE IMPACT ON SMALL BUSINESS

Government Code Section 11346.2(b)(4)(B) requires a description of any reasonable alternatives that have been identified or that have otherwise been identified and brought to the attention of the agency that would lessen any adverse impact on small business.

Response: The Office of Statewide Health Planning and Development did not identify any reasonable alternatives to the proposed regulations that would lessen adverse impact on small business.

Small businesses will not be adversely impacted by the proposed adoption, amendments or repeal of code requirements.

FACTS, EVIDENCE, DOCUMENTS, TESTIMONY, OR OTHER EVIDENCE OF NO SIGNIFICANT ADVERSE IMPACT ON BUSINESS

Government Code Section 11346.2(b)(5)(A) requires the facts, evidence, documents, testimony, or other evidence on which the agency relies to support an initial determination that the action will not have a significant adverse economic impact on business.

Response: The Office did not identify any cost to comply with the proposed rulemaking. The proposed amendments will provide clarification within the code and repeal outdated requirements.

ASSESSMENT OF EFFECT OF REGULATIONS UPON JOBS AND BUSINESS EXPANSION, ELIMINATION OR CREATION

Government Code Sections 11346.3(b)(1) and 11346.5(a)(10)
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT has assessed whether or not and to what extent this proposal will affect the following:

- A.** The creation or elimination of jobs within the State of California.
Response: The Office of Statewide Health Planning and Development did not identify any amended regulation that would lead to the creation or elimination of jobs.
- B.** The creation of new businesses or the elimination of existing businesses within the State of California.
Response: The Office of Statewide Health Planning and Development did not identify any amended regulation that would lead to the creation of new businesses or the elimination of existing businesses within the State.
- C.** The expansion of businesses currently doing business within the State of California.
Response: The Office of Statewide Health Planning and Development did not identify any amended regulation that would lead to the expansion of businesses currently doing business within the State of California.
- D.** The benefits of the regulation to the health and welfare of California residents, worker safety, and the state's environment.
Response: Clarification of existing language and lessening the requirements for compliance to items critical to functioning of the hospital post-earthquake will directly benefit the health and welfare of California residents. The Office of

Statewide Health Planning and Development did not identify any amended regulation that would directly benefit worker safety, and the state's environment.

ESTIMATED COST OF COMPLIANCE, ESTIMATED POTENTIAL BENEFITS, AND RELATED ASSUMPTIONS USED FOR BUILDING STANDARDS

Government Code Section 11346.2(b)(5)(B)(i) states if a proposed regulation is a building standard, the initial statement of reasons shall include the estimated cost of compliance, the estimated potential benefits, and the related assumptions used to determine the estimates.

Response: OSHPD did not identify any cost to comply with the proposed adoption and amendments. The proposal includes minor technical and editorial modifications that will provide clarification and consistency within the code.

DUPLICATION OR CONFLICTS WITH FEDERAL REGULATIONS

Government Code Section 11346.2(b)(6) requires a department, board, or commission within the Environmental Protection Agency, the Resources Agency, or the Office of the State Fire Marshal to describe its efforts, in connection with a proposed rulemaking action, to avoid unnecessary duplication or conflicts with federal regulations contained in the Code of Federal Regulations addressing the same issues. These agencies may adopt regulations different from these federal regulations upon a finding of one or more of the following justifications: (A) The differing state regulations are authorized by law and/or (B) The cost of differing state regulations is justified by the benefit to human health, public safety, public welfare, or the environment.

Response: The proposed regulations do not duplicate or conflict with federal regulations.