FINAL STATEMENT OF REASONS FOR PROPOSED BUILDING STANDARDS OF THE DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION/ OFFICE OF STATEWIDE HOSPITAL PLANNING AND DEVELOPMENT REGARDING THE 2025 CALIFORNIA BUILDING CODE, CALIFORNIA CODE OF REGULATIONS, TITLE 24, PART 2 VOLUME 1 (OSHPD 02/25)

The Administrative Procedure Act requires that every agency shall maintain a file of each rulemaking that shall be deemed to be the record for that rulemaking proceeding. The rulemaking file shall include a Final Statement of Reasons. The Final Statement of Reasons shall be available to the public upon request when rulemaking action is being undertaken. The following are the reasons for proposing this particular rulemaking action:

UPDATES TO THE INITIAL STATEMENT OF REASONS:

Government Code Section 11346.9(a)(1) requires an update of the information contained in the Initial Statement of Reasons. If the update identifies any data or any technical, theoretical or empirical study, report, or similar document on which the state agency is relying that was not identified in the Initial Statement of Reasons, the state agency shall comply with Government Code Section 11347.1.

The Department of Health Care Access and Information (HCAI)/Office of Statewide Hospital Planning and Development (OSHPD) has not added any data (including technical, theoretical, or empirical studies, reports, or similar documents relied upon) that would necessitate an update of the information contained in the Initial Statement of Reasons.

MANDATE ON LOCAL AGENCIES OR SCHOOL DISTRICTS

Pursuant to Government Code Section 11346.9(a)(2), if the determination as to whether the proposed action would impose a mandate, the agency shall state whether the mandate is reimbursable pursuant to Part 7 of Division 4. If the agency finds that the mandate is not reimbursable, it shall state the reasons for the finding(s).

The Department of Health Care Access and Information (HCAI)/Office of Statewide Hospital Planning and Development (OSHPD) has determined that the proposed regulatory action would not impose a mandate on local agencies or school districts.

HCAI does not have authority to propose regulations that would impact local agencies or school districts.

OBJECTIONS OR RECOMMENDATIONS MADE REGARDING THE PROPOSED REGULATION(S).

Government Code Section 11346.9(a)(3) requires a summary of EACH objection or recommendation regarding the specific adoption, amendment, or repeal proposed, and an explanation of how the proposed action was changed to accommodate each objection or recommendation, or the reasons for making no change. This requirement applies only to objections or recommendations specifically directed at the agency's proposed action or to the procedures followed by the agency in proposing or adopting the action, or reasons for

making no change. Irrelevant or repetitive comments may be aggregated and summarized as a group.

The text with proposed code changes was made available to the public for a 45-day comment period from April 3, 2026 until May 18, 2026. There was no subsequent public comment period.

HCAI received one public comment letter during the 45-day Public Comment Period.

ITEM 4-1
Chapter 12 INTERIOR ENVIRONMENT
Section 1226.11 ALTERNATIVE BIRTHING CLINICS [OSHPD 3]

1226.11 ALTERNATIVE BIRTHING CLINICS.

Commenter(s) and Recommendation:

Sandra O. Poole, Policy Advocate, Western Center on Law & Poverty, with input from birth center owners, the California Association of Licensed Midwives, and the American Association of Birth Centers – California Chapter: We are concerned about the proposed terminology change from “Alternative Birth Centers” to “Alternative Birthing Clinics.” The previous terminology clearly distinguished these facilities from hospitals. We respectfully request clarification regarding the rationale for this change and whether it is intended to create a new clinic category, as the revised terminology may create confusion.

Agency Response:

HCAI acknowledges the public comment and will not be changing the Final Express Terms title from “Alternative Birthing Clinics” to “Alternative Birthing Centers”. In HCAI’s Initial Submittal to the California Building Standards Commission (CBSC), HCAI proposed a change to the section title as Alternative Birthing “Centers”. However, at the CBSC Health Facilities Code Advisory Committee (HF-CAC) meeting on January 28, 2026, the HF-CAC recommended a change to the section title to Alternative Birthing “Clinics” under Nine-Point Criteria, Health and Safety Code Section 18930(a)(8), for consistency with terms throughout the code. HCAI accepted the approved as amended recommendation and changed the section title to Alternative Birthing “Clinics”. HCAI also adds that the title is an established term in Title 24 and changing it would create confusion and inconsistencies within building code standards, as well as in statute in the Health and Safety Code.

ITEM 4-3
Chapter 12 INTERIOR ENVIRONMENT
Section 1226.11 ALTERNATIVE BIRTHING CLINICS [OSHPD 3]

1226.11 ALTERNATIVE BIRTHING CLINICS.
1226.11.1 Birthing service space.
1226.11.1.3 Nurse call system. Exception.

Commenter(s) and Recommendation:

Sandra O. Poole, Policy Advocate, Western Center on Law & Poverty, with input from birth center owners, the California Association of Licensed Midwives, and the American

Association of Birth Centers – California Chapter: The reference to a “nurse call system” may create confusion because ABCs are not typically staffed by nurses. In birth centers, healthcare providers generally monitor patients directly within birthing rooms rather than from centralized nursing stations. We appreciate the exception allowing ABCs with three or fewer birthing rooms to use alternative call methods approved by CDPH. We recommend that this exception also be clearly reflected in the Health Facility Checklist under Section 1226.11, Alternative Birthing Clinics.

Agency Response:

HCAI acknowledges the public comment and will not be making changes to the Final Express Terms. This section was amended to add an exception that allows Alternative Birthing Clinics with three or fewer birthing rooms to use an alternative nurse call system based on proposed alternative methods and appropriateness as approved by CDPH.

The Health Facility Checklists are not incorporated into Title 24 because they are nonregulatory and are intended only as tools to assist designers, building officials, and clinic operators in applying OSHPD 3 requirements to specific clinic functions. HCAI appreciates the feedback and will evaluate the Alternative Birthing Clinic Checklist (available at https://hcai.ca.gov/document/alternative-birthing-clinics-checklists/) for possible future updates.

ITEM GENERAL

Commenter(s) and Recommendation:

Sandra O. Poole, Policy Advocate, Western Center on Law & Poverty, with input from birth center owners, the California Association of Licensed Midwives, and the American Association of Birth Centers – California Chapter: Section 1226.4.13.3 — Clean Utility Room. Although no revisions are currently proposed for this section, birth center owners have identified a need for clarification regarding whether ABCs with three or fewer birthing rooms are required to maintain a separate soiled utility room. Such a requirement could impose significant financial burdens on small facilities despite the limited volume of waste generated.

Agency Response:

HCAI acknowledges the public comment and will not be making changes to the Final Express Terms. There is no code change proposed in the 2025 Intervening Code Cycle for Section 1226.4.13.3 Clean utility room and further changes cannot be introduced at this point in the Intervening Code Cycle process.

DETERMINATION OF ALTERNATIVES CONSIDERED AND EFFECT ON PRIVATE PERSONS

Government Code Section 11346.9(a)(4) requires a determination with supporting information that no alternative considered would be more effective in carrying out the purpose for which the regulation is proposed, or would be as effective and less burdensome to affected private persons than the adopted regulation, or would be more

cost-effective to affected private persons and equally effective in implementing the statutory policy or other provisions of law.

HCAI has determined that no alternative would be more effective in carrying out the purpose for which the regulation is proposed or would be as effective and less burdensome to affected private persons than the adopted regulation. The proposed regulations will not have a cost impact to private persons.

REJECTED PROPOSED ALTERNATIVE THAT WOULD LESSEN THE ADVERSE ECONOMIC IMPACT ON SMALL BUSINESSES:

Government Code Section 11346.9(a)(5) requires an explanation setting forth the reasons for rejecting any proposed alternatives that would lessen the adverse economic impact on small businesses, including the benefits of the proposed regulation per 11346.5(a)(3).

HCAI has determined that the proposed regulations will not have an adverse economic impact on small businesses. The proposed regulations are technical modifications that will provide clarification and consistency within the code.