

OSHDP Office of Statewide Health Planning and Development



Hospital Building Safety Board

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Attachment A

**HOSPITAL BUILDING SAFETY BOARD
Education and Outreach Committee**

**Wednesday, April 22, 2015
10:00 a.m. - 4:00 p.m.**

Office of Statewide Health Planning and Development

400 R Street, Suite 452
Sacramento, CA 95811
(916) 440-8453

and

Metropolitan Water District Headquarters

700 N. Alameda Street, Suite 2-546
Los Angeles, CA 90012
(213) 897-0166

Committee Members Present

John Donelan, Chair
Bert Hurlbut
Eric Johnson
Scott Karpinen

Joe La Brie, Consulting Member

OSHDP Staff

Paul Coleman, FDD Deputy Director
Gary Dunger
Diana Scaturro

HBSB Staff

Evelt Torres
Kathi Zamora, OSHPD

1 **1. Welcome and Introductions**

2 Mr. Donelan called the meeting to order. Those in attendance introduced themselves.

3

1 **2. Review and Approve March 5, 2015 Meeting Report / Minutes**

2

3 **MOTION:** (M/S/C/) [Hurlbut/La Brie]

4 The committee voted unanimously to adopt the March 5, 2015 meeting minutes.

5

6 **3. 2015 Seminar Planning & Development**

7 Mr. Donelan stated that the committee was considering two seminars for 2015: *Building*
8 *Relationships for a Successful Project* and *Inspector of Record (IOR) Training*.

9 • Subjects:

10 ○ Building Relationships for a Successful Project

11 ▪ Roles of the design professional

12 ▪ Roles of others – owner, builder/contractor, construction
13 manager/project manager, OSHPD FDD field staff

14 ▪ Roles of the Inspector of Record

15

16 Mr. La Brie stated that he had sent a draft agenda to Paul Coleman. Mr. La Brie wished
17 to discuss this draft, included below, with the committee.

18 1. Solicit participation in advance by means of a polling group comprised of industry
19 stakeholders, each of whom has a different role.

20 2. Create a list of questions for them (possibly anonymous). Questions would
21 concern project interaction, roles and responsibilities, authority of stakeholders,
22 relationship boundaries, conflicts of interest, stakeholder duties, and performance
23 constraints.

24 3. Analyze the results and produce a body of content for the seminar.

- 1 4. Identify case studies for the seminar.
- 2 5. Do an analysis of what the code says regarding responsibilities/who is supposed
- 3 to do what.
- 4 6. Identify acceptable areas of variability. Compare what we think, what we do, and
- 5 what the code says we are supposed to do.
- 6 7. Have a panel discussion about all of the prior content.

7
8 Mr. Karpinen asked how many people would be polled. Mr. La Brie replied that the
9 more the better; 100 or more would be great.

10
11 Ms. Scaturro asked if part of the questions would concern what we see in code that
12 varies from what actual practice wants to be. Mr. La Brie confirmed that they would.

13
14 Mr. La Brie felt that the questions could create positive buzz in the industry, with
15 everyone understanding each other's roles and contributions better.

16
17 Mr. Hurlbut suggested that everyone on the Board could talk to five business associates
18 from within their discipline. It could be a good way to reach out to people, even getting
19 them to explain their complaints about OSHPD.

20
21 Mr. Johnson asked how the poll would be conducted. Mr. La Brie responded that he did
22 not want to load up OHSPD staff with work from this committee. Committee members
23 could think in terms of their areas of expertise, and ask questions that would be

1 interesting to that demographic. Mr. La Brie acknowledged that much work would be
2 involved.

3

4 Mr. Karpinen suggested SurveyMonkey for anonymous questions.

5

6 Ms. Scaturro suggested having extended one-on-one conversations with stakeholders
7 in addition to providing them the survey. Mr. Donelan agreed.

8

9 Mr. Coleman felt that the seminar proposal was good. We need better feedback from
10 the industry about what the issues are. Also, there are some misconceptions about
11 roles; we need to get to the root of the causes.

12

13 Mr. Donelan noted that good will could be dispensed as the committee tries to
14 understand what stakeholders think. Mr. Coleman agreed that people like to feel
15 involved and to feel part of the process.

16

17 Mr. Donelan stated that hospitals do things differently from one to the next, so he had
18 added Acceptable Variability to the list. Mr. Coleman mentioned the factor of scalability
19 from small projects to large.

20

21 Ms. Scaturro noted that many seminars address delivery methods. This committee's
22 focus should be generic roles in the context of statute with enforcement by OSHPD. Mr.
23 Coleman agreed that regardless of the delivery method, each group has its own roles
24 and responsibilities; that's what we need to stress.

1 Mr. La Brie noted that the challenges associated with each different approach would no
2 doubt come out.

3
4 He answered a question from Mr. Karpinen about survey format: it should be both
5 multiple choice and long answer. Mr. La Brie volunteered to map out a seminar
6 development process.

7
8 Ms. Scaturro suggested having a seminar work plan ready for the full Board meeting on
9 May 6. Mr. La Brie volunteered to create a PowerPoint for the meeting; the group
10 agreed to submit this as a specific agenda item.

11
12 Mr. Donelan clarified the objective: for Mr. La Brie to develop the work plan for
13 presentation at the May 6 Board meeting – the work plan being development of the
14 portion of the seminar on building relationships for a successful project.

15
16 Mr. Hurlbut suggested for Mr. La Brie to send a draft out to the committee members a
17 week before the meeting so they could comment. He agreed.

18
19 Mr. Karpinen asked about a target date for the seminar. Mr. Coleman surmised that to
20 hold a seminar in October, the surveys need to be disseminated by the end of May to
21 have the results by the middle of June.

22

23

1 Mr. La Brie requested the committee members send him questions for inclusion on the
2 survey. The next committee meeting is scheduled for June 3; the committee will finalize
3 the survey then.

4

- 5 ○ Buildings Removed from Acute Care Services

6 Mr. Donelan noted that some specific issues have come up on this topic.

7

- 8 ○ Materially Alter
 - 9 ■ Criteria

10 Mr. Donelan mentioned that this topic is always very popular.

11

- 12 ○ Inspection Service Unit Training
 - 13 ■ Topic development

14 Mr. Donelan has received input from Mike Hooper, who has recently been appointed to
15 the Board.

16

17 Mr. Coleman felt that Materially Alter does fit with the topic of Building Relationships for
18 a Successful Project. There are many different roles involved in determining Materially
19 Alter.

20

21 He continued that currently there are many issues that OSHPD is sorting out regarding
22 Buildings Removed from Acute Care Services. Inspection Service Unit Training is a
23 specific topic; the delivery methods would also be significant – webinars, videos, and so
24 on.

1 Mr. Donelan shared items for additional IOR training that Mr. Hoover had given:

- 2 ○ General Code Training
- 3 ○ CAN 2-107.4 Amended Construction Documents
- 4 ○ PINs 38, 55, and 58.
- 5 ○ How to successfully utilize the FREER Manual
- 6 ○ “Hospital Remodel Projects”
- 7 ○ “Observations by the Office”

8

9 Mr. Coleman observed that some of the items would actually fit the Building
10 Relationships for a Successful Project seminar. They could be included as separate
11 training perhaps done by OSHPD’s Inspection Services Unit.

12

- 13 • Schedule

14 Mr. Donelan stated that the seminar target dates were September or October,
15 depending on how long the development process was going to take.

16

- 17 • Delivery methods

18 The group considered panel discussions to be effective. Mr. Coleman said that a panel
19 could be comprised of speakers from the different entities involved, with each giving a
20 presentation on their role. Afterward there would be interaction with the audience.

21

- 22 • Venues

23 Mr. Donelan stated that further into the process the committee would talk about venues.

24

1 • Discussion and Public Input

2 Mr. Karpinen suggested that a survey question could be to ask what kind of delivery
3 method people prefer.

4

5 The group discussed having breakout sessions. Mr. Coleman noted that they can
6 complicate a seminar because of the need for extra rooms and equipment.

7

8 Mr. Donelan requested the group to send him any additional ideas for how to go
9 forward.

10

11 **4. Comments from Committee Members and the Public on Issues Not on This**

12 **Agenda**

13 An Interested Party suggested the topic of shake testing that manufacturers go through.
14 It makes for an interesting presentation, and many people with the hospital facilities and
15 design groups are not aware of what goes on behind the scenes.

16

17 Mr. Coleman commented that this topic could fit into the IOR section.

18

19 An Interested Party asked about field staff training for OSHPD – frequency of meetings,
20 peer group meetings, formalized training. Mr. Coleman answered that in Los Angeles
21 they hold meetings every two months; in Sacramento they hold them quarterly. The
22 meetings have a training component as well as an issues component that establishes
23 methods of dealing with them consistently. The meetings are open to the public.

24

1 The Interested Party felt that there would be benefit to having field staff attend the
2 seminars. Mr. Coleman responded that it's been done successfully in the past;
3 availability of space can be a factor. He was open to trying this. The Interested Party
4 suggested having field staff occasionally attend the IOR meetings, with a section of the
5 meetings devoted to general training.

6

7 Mr. Coleman announced upcoming training opportunities on the topic of SPC 4D.

8

9 **5. Adjournment**

10 Mr. Donelan adjourned the meeting at 11:19 a.m.

11