

**Hospital Building Safety Board**

400 R Street, Suite 200
Sacramento, California 95811-6213
(916) 440-8453
Fax (916) 324-9118
<http://www.oshpd.ca.gov/Boards/HBSB/index.html>

June 17, 2011

A public meeting of the **Hospital Building Safety Board** (HBSB) will be held on:

Tuesday, June 28, 2011
10:00 a.m. to 4:00 p.m.

At the

Victim Compensation and Government Claims Board
400 R Street
Sacramento River Room (Suite 130)
Sacramento, CA 95811
(916) 440-8453

DIRECTIONS –**From the San Francisco Bay Area:**

- **Take Interstate 80 East;**
- east of Davis, continue on **US-50/Business 80;**
- Take **Interstate 5 North Exit** toward Redding;
- follow signs for **Q Street;**
- turn **right** at **2nd Street;**
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From the Sacramento International Airport:

- Exit the airport south and take the ramp to **Interstate 5 South;**
- Exit onto **Q Street;**
- Turn **right** onto **3rd Street;**
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PARKING: There are garages at 500 R Street and CalPERS Plaza. CalPERS Plaza has two entrances: one on Fifth Street, north of R Street; and another on Q Street, between Fourth and Fifth Streets. All three charge \$1.25/hour or \$12/day. There are also 10-hour parking meters around the perimeter of the building.

For assistance with lodging or travel arrangements, please contact the Board Staff at (916) 440-8453

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| | Tuesday, June 28, 2011 | |
| | 10:00 am – 4:00 pm | |
| | NOTE: Agenda order is tentative and subject to change without prior notice. | |
| | A lunch of approximately 60 to 90 minutes will be taken sometime during the day. | |
| 14 | Call to Order —Joseph La Brie, HBSB Chair | |
| | <ul style="list-style-type: none"> • Welcome and Introductions • Announcements • Review and approve February 15/16, 2011 HBSB Meeting Report • Discussion and Public Input • | 5 |
| 15 | OSHPD Update —Stephanie Clendenin, Director (acting) | 51 |
| | <ul style="list-style-type: none"> • Discussion an Public Input | |
| 16 | Senate Bill (SB) 499, Facilities Progress Reporting Committee— Robert Kain, Chair | |
| | <ul style="list-style-type: none"> • Review and approve February 18, 2011 Meeting Agenda and Report • Discussion and Public Input | 53 |
| | <ul style="list-style-type: none"> • Review and approve April 6, 2011 Meeting Agenda and Report • Discussion and Public Input | 63 |
| 17 | Education Opportunities Committee —Arlee Monson, Chair | |
| | <ul style="list-style-type: none"> • Review and approve March 15, 2011 Meeting Agenda and Report • Discussion and Public Input | 79 |
| | <ul style="list-style-type: none"> • Review and approve May 18, 2011 Meeting Agenda and Report • Discussion and Public Input | 93 |
| 18 | Standard Details Committee —Brian Spindler, Chair | |
| | <ul style="list-style-type: none"> • Review and approve March 16, 2011 Meeting Agenda and Report • Discussion and Public Input | 115 |

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| 19 | Senate Bill (SB) 90 Committee —John Donelan, Chair | |
| | <ul style="list-style-type: none"> • Review and approve June 9, 2011 Meeting Agenda and Report • Discussion and Public Input | 141 |
| 20 | FDD Update —Paul Coleman, FDD Deputy Director | 163 |
| | <ul style="list-style-type: none"> • Discussion and Public Input | |
| 21 | Codes and Regulations Update —Glenn Gall, FDD Building Standards Unit Supervisor | 165 |
| | <ul style="list-style-type: none"> • Discussion and Public Input | |
| 22 | Update on Consulting Members —Joseph La Brie, HBSB Chair | 167 |
| | <ul style="list-style-type: none"> • Appointment process • Latest Governor’s Executive Order on Travel Restrictions • Discussion and Public Input | |
| 23 | Progress Report: Board Goals for 2011 —Committee Chairs | 169 |
| | <ul style="list-style-type: none"> ○ Administrative Processes and Code Changes Committee ○ Board Procedures Committee ○ Education Opportunities Committee ○ Instrumentation Committee ○ SB 90 Committee ○ SB 499 Facilities Progress Reporting Committee ○ Standard Details Committee ○ Structural and Non-Structural Regulations Committee <ul style="list-style-type: none"> • Discussion and Public Input | |
| 24 | Information Items | |
| | <ul style="list-style-type: none"> • HBSB Membership • HBSB Roster • HBSB Consulting Members Roster • HBSB Committee List | 171 173 177 179 |

Comments from the Public/Board Members on Issues not on this

Agenda: The Board will receive comments from the public/members at this time on matters not on the agenda. Matters raised at this time will be taken into consideration for placement on a subsequent agenda.

Adjournment

REMINDER: Please call (916) 440-8453 on Monday, June 27, after 3:00 p.m. to confirm that the meeting will be taking place as scheduled. The recording will verify the meeting date and location.

NOTE: Meeting facilities and restrooms are accessible to the physically disabled. If any special accommodations (assistive listening device, sign language interpreter, etc.) are needed, please contact Board Staff at (916) 440-8453. Requests should be made as soon as possible but no later than 10 business days prior to the meeting.

Questions? Call Board Staff at the above phone number.



Office of Statewide Health Planning and Development

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A public meeting of the **Hospital Building Safety Board** (HBSB) will be held on:

Tuesday, February 15, 2011

10:00 a.m. to 4:00 p.m.

and

Wednesday, February 16, 2011

9:00 a.m. to 3:00 p.m.

at the

Victim Compensation and Government Claims Board

400 R Street

Sacramento River Room (Suite 130)

Sacramento, CA 95811

(916) 440-8445

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"Equitable Healthcare Accessibility for California"

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DAY ONE - Tuesday, February 15, 2011
10:00 a.m.—4:00 p.m.

NOTE: Agenda order is tentative and subject to change without prior notice.
A lunch of approximately 60 to 90 minutes will be taken sometime during the day.

XX Call to Order — Joseph La Brie, HBSB Chairman

- Welcome and Introductions
- Review and approve the November 9/10, 2010 HBSB Meeting Report
- Discussion and Public Input

XX OSHPD Update

David M. Carlisle, M.D., Ph.D., Director (or)
Stephanie Clendenin, OSHPD Chief Deputy Director (acting)

- Update
- Discussion and Public Input

XX Board Procedures Committee — Michael Foulks, Chair

- Review and approve the December 14, 2010 meeting report
- Discussion and Public Input
- Review and approve the January 25, 2011 meeting report
- Discussion and Public Input

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XX Leadership Training / Strategic Planning Session – Joseph La Brie

- The Board Chair will provide an overview presentation of the committee process, including:
 - Chairperson's role
 - Vice Chairperson's role
 - Committee Member's role
 - Consulting Member's role
 - Production Planning
 - Work Products
 - Final Recommendations
- Discussion and Public Input

XX Round Table Discussion – Joseph La Brie

- Discuss and determine Board goals and objectives for 2011
- Public Input

XX Committee Planning Breakout Sessions

The Board will convene the following three breakout sessions. Board members who have a conflict between two of the committees will choose which session to attend. Members of the public are welcome to attend any of the committee sessions. Board members who are not members of any of the committees listed below may participate in one of the sessions. Breakout sessions are an hour in length.

- Develop Committee goals for 2011
- Develop Committee deliverables for 2011
- Schedule Committee meetings for 2011
- Identify types of expertise the Committees may need for Consulting Members in 2011

Breakout Session #1

Administrative Processes and Code Changes
(Sacramento River Room)

Instrumentation
(Conference Room 207)

Standard Details
(Conference Room 111)

Breakout Session #2

Structural & Non-Structural Regulations
(Sacramento River Room)

SB 499, Facilities Progress Reporting
(Conference Room 207)

Education Opportunities
(Conference Room 111)

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- XX**
- Reconvene
 - Joe La Brie requests feedback on how the sessions went (official committee reports will occur on day two of the Board meeting)
 - Discussion and Public Input
 - Adjourn for the day

*****FIRST SESSION ENDS*****

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XX DAY TWO - Wednesday, February 16, 2011
9:00 a.m.—3:00 p.m.

NOTE: Agenda order is tentative and subject to change without prior notice.

Call to Order — Joseph La Brie, HBSB Chairman

- Welcome / Announcements

XX Statement of Economic Interests (Form 700) Presentation – Elizabeth Wied, OSHPD Chief Counsel

- Discussion and Public Input

XX FDD Update – Paul Coleman, FDD Deputy Director

- Discussion and Public Input

XX Update on Regulations, Code Application Notices, Frequently Asked Questions and Applications and Forms – Duane Borba, FDD Deputy Division Chief (Sacramento)

- Discussion and Public Input

XX Standard Details Committee

- Presentation by Dani Paxson (KPFF) on last year's progress of the Standard Details

Board Goals for 2011 – Joseph La Brie

- Review and approve the Board Goals for 2011
- Discussion and Public Input

XX Committee Reports from Yesterday’s Breakout Sessions

- Instrumentation
- Structural & Non-Structural Regulations
- Administrative Regulations and Code Changes
- Standard Details
- SB 499 Facilities Progress Reporting
- Education Opportunities
- Discussion and Public Input

XX Information Items

- HBSB Membership
- HBSB Roster
- HBSB Consulting Members Roster
- HBSB Committee List

XX Comments from the Public/Board Members on Issues not on this Agenda: The Board will receive comments from the public/members at this time on matters not on the agenda. Matters raised at this time will be taken into consideration for placement on a subsequent agenda.

Adjournment

Any questions may be directed to the Board Staff at (916) 440-8453. If Board Members or staffs are unable to attend this meeting please notify Board Staff within 48 hours of receipt of this agenda.

REMINDER: Please call (916) 440-8453 on Monday, February 14, 2011 after 3:00 p.m. to confirm that the meeting will take place as scheduled. The recording will verify the meeting date and location.

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**MEETING REPORT
HOSPITAL BUILDING SAFETY BOARD (HBSB)**

Tuesday, February 15, 2011

10:00 a.m. - 4:00 p.m.

and

Wednesday, February 16, 2011

9:00 a.m. to 3:00 p.m.

Victim Compensation and Government Claims Board
Sacramento River Room, 400 R Street, Suite 130
Sacramento, CA 95811

Board Members Present

Joe La Brie, HBSB Chairman
John Egan, HBSB Vice-Chairman
David Carlisle (2/15)
Paul Coleman
John Donelan
Michael Foulkes
Bert Hurlbut
Marguerite Jackson
Eric Johnson
Bob Kain
Scott Karpinen
Jeffrey Keaton
Trailer Martin (2/15)
Arlee Monson
Simin Naaseh (2/15)
Michael O'Connor
Michael Osur (2/15)
Carl Scheuerman
Brian Spindler
Chris Wills

OSHPD Staff

Kevin Bertrand
Duane Borba
Stephanie Clendenin, Chief Deputy Director
Glenn Gall
Elizabeth Wied, Chief Legal Counsel

HBSB Staff

Linda Janssen, Executive Director
Evet Torres



1 **Call to Order - Tuesday, February 15, 2011**

2 Mr. Joe La Brie, Board Chairman, called the meeting to order at 10:03 a.m.

3

4 **Welcome and Introductions**

5 Participants took turns introducing themselves, and Mr. La Brie welcomed everyone to
6 the meeting.

7

8 Mr. La Brie presented plaques recognizing the contributions of Board Members
9 Marguerite Jackson and Trailer Martin and he thanked them for their service.

10

11 **Review and Approve the November 9 and 10, 2010 HBSB Meeting Report**

12 Mr. La Brie reviewed highlights of the November 9 and 10 Board meeting.

13

14 **MOTION:** (M/S/C) [Martin/O'Connor]

15 The Board voted unanimously to approve the November 9 and 10, 2010 meeting report
16 as presented.

17

18 **OSHPD Update**

19 Dr. David Carlisle, OSHPD Director, announced that Governor Brown had appointed
20 Diana Dooley as the new secretary of the Health and Human Services Agency and
21 Peter Barth as the new assistant secretary.

22

1 Dr. Carlisle noted that all state agencies are facing substantial budget cuts in response
2 to the state's ongoing fiscal crisis. He said OSHPD is reducing expenses through staff
3 furloughs, leaving vacancies unfilled, and cutting back on overtime. He reported that
4 OSHPD fared well in recent hearings before Assembly and Senate budget committees,
5 but there may be further cuts in the future. Dr. Carlisle advised that the state plans to
6 borrow money from special funds to help cover the shortfall, with those funds being
7 repaid in the 2013/2014 fiscal year. He observed that there is considerable legislative
8 interest in the issue of seismic safety, and proposed cuts in health services and
9 programs have sparked public protests.

10

11 **Board Procedures Committee**

12 Mr. Michael Foulkes, Committee Chair, reported that the Board Procedures Committee
13 met on December 14 and January 25, and many of the issues discussed at those
14 meetings would be addressed as part of later agenda topics.

15

16 Mr. Foulkes said the committee recognizes that budget constraints affect OSHPD
17 staffing and programs, so committee members spent time at the December meeting
18 talking about ways to assist OSHPD by focusing on key priorities and easing the staff's
19 workload. The committee emphasized the importance of leadership development to
20 ensure continuity and encourage greater involvement by Board members. Mr. Foulkes
21 stated that the committee also discussed the role of consulting members, setting goals
22 and objectives, changing the Board's committee structure, establishing an expedited
23 appeal process for SB 499 issues.

24

1 Mr. Foulkes noted that at the January 25 meeting, the committee recommended making
2 Board meetings less formal and more interactive to encourage better participation. The
3 committee recommends expanding the Educational Opportunities Committee, updating
4 OSHPD's best practices manual, and providing more opportunities for informal social
5 interaction when there are two-day Board meetings. Mr. Foulkes added that Board
6 members were invited to a gathering that evening at his house in Sacramento for that
7 purpose. He said the breakout sessions at this meeting were an attempt to maximize
8 committee time and give Board members a chance to familiarize themselves with
9 various issues and activities.

10

11 Mr. Foulkes advised that the committee spent considerable time discussing the role of
12 consulting members. He said consulting members were originally appointed to provide
13 committees with specific kinds of expertise that would otherwise be lacking, but the
14 Board has since expanded, leading some people to question the need to have
15 consulting members on every committee. Committee members discussed the pros and
16 cons of either formalizing the appointment process or phasing out the positions
17 altogether. Mr. Foulkes indicated that the committee eventually decided to make some
18 minor changes this year, gather feedback, and then reevaluate the issue at the end of
19 the year. The committee voted to implement two changes this year: to limit consulting
20 members' terms to one year and to establish an attendance requirement.

21

22 Mr. Carl Scheuerman proposed a correction to the January 25 meeting report:

23 Referring to Page 5, Line 22, he noted the reference to removing Title 22 provisions

1 from OSHPD's jurisdiction should be changed to removing Title 24 provisions from
2 CDPH's jurisdiction.

3

4 **MOTION:** (M/S/C) [Kain/Nasseh]

5 The Board voted unanimously to approve the December 14, 2010 and January 25, 2011
6 Board Procedures Committee meeting reports.

7

8 Mr. Brian Spindler asked if the Board would vote separately on the motions contained
9 within the meeting reports. Mr. Foulkes responded that the Board's practice has been
10 to approve the meeting reports and then to take up individual actions separately.

11

12 Mr. Foulkes stated that motion passed by the committee on January 25 was to
13 recommend that the Board adopt Items 1 and 6 as policies pertaining to consulting
14 members. He explained that Item 1 provides for a one-year term expiring on December
15 31 of each year, and Item 6 is the attendance requirement, allowing removal of
16 consulting members who miss more than one meeting without a good excuse.

17

18 Mr. Spindler asked about formalizing the appointment process for consulting members.

19 Mr. La Brie explained that the committee favors keeping the current appointment
20 process this year and then considering changes in the future. He said he proposed
21 allowing committee chairs, the executive director, and the Board chair to make
22 decisions on consulting members. Mr. Foulkes advised that some committee members
23 advocated a less formal process so consulting members could be added on an as-

1 needed basis, while others favored a more formal application, screening, and selection
2 process.

3
4 Mr. Dave Foley said he understood that the purpose of having consulting members was
5 to assist ad hoc committees by providing a specialized level of expertise. He expressed
6 his opinion that the committee chair should have the ability to select particular
7 consulting members without a formal application process. Mr. La Brie commented that
8 many committee members supported this approach. He said the committee was unable
9 to reach consensus on some issues, but there was general agreement regarding Items
10 1 and 6.

11
12 **MOTION:** (M/S/C) [Martin/O'Connor]
13 The Board voted unanimously to implement two changes to the consulting member
14 positions on HBSB Committees—limit consulting members' terms to one calendar year,
15 ending December 31st, and to institute the following attendance requirement: two
16 unexcused absences will result in termination of the consulting member appointment.

17
18 **Leadership Training/Strategic Planning Session**

19 Mr. La Brie gave an overview the HBSB committee structure. He said the Board's
20 committees carry out the work needed for the HBSB to carry out its mission and
21 properly advise OSHPD. He noted that his presentation was developed with input from
22 industry representatives, Board members, the Deputy Director, and the Board
23 Procedures Committee.

24

1 Mr. La Brie reviewed the Board's goals for 2011: evaluating the SB 499 reporting
2 process and identifying improvements for the next report deadline; developing standard
3 construction details to contribute to uniformity and reduce processing time,
4 disseminating information about educational opportunities and best practices. He
5 showed a list of the Board's current committees and their members and displayed a
6 proposed schedule of committee meetings. He invited Board members to let him know
7 if they wanted to change their committee assignments or meeting dates.

8
9 Mr. La Brie explained and discussed the respective roles of committee chairs, vice
10 chairs, members, and consulting members. He discussed how committees plan their
11 work, including developing problem statements and solutions, describing deliverable
12 work products, identifying necessary action items, making assignments, establishing
13 milestones for progress, and setting a schedule. He said committee work products
14 should take the form of a written report that includes data and research, analyzes the
15 issues, and proposes a recommendation to OSHPD. Mr. La Brie said all committee
16 recommendations will be presented to the full Board for approval and forwarding to
17 OSHPD.

18
19 Mr. La Brie welcomed questions and discussion.

20
21 Mr. Kain asked about the possibility of teleconference meetings. Ms. Elizabeth Wied,
22 OSHPD Chief Counsel, said public meeting laws provide a mechanism for telephone
23 and videoconferencing, but making the arrangements can be cumbersome. She stated
24 that public notice and public access must be provided, and a Board member must be

1 present at each teleconferencing site. She recommended using conferencing
2 technology sparingly.

3

4 Mr. Gale Bate observed that it is more difficult for participants to interact with each other
5 in teleconference meetings. Mr. Wills agreed, but noted that conferencing can be
6 effective for small groups and in situations where members are unable to travel.

7

8 **Round Table Discussion**

9 Mr. La Brie drew attention to the draft goal statement identifying OSHPD's key priorities
10 for the coming year. He encouraged Board members to discuss and determine the
11 Board's goals for 2011. He noted that the Board's committees should set their own
12 goals and tasks. He added that the committees need to be flexible enough to refocus
13 their activities as new issues arise.

14

15 Mr. La Brie advised that the Structural and Non-Structural Regulations will be combined
16 in a single committee. He asked if Board members had recommendations for any new
17 committees.

18

19 Mr. Spindler applauded the Board for supporting OSHPD's mission. He observed that
20 the transition from a prescriptive to a performance-based building code has created a
21 need for guidance about using and implementing the building code in the field. He
22 noted that seismic certification of building systems is also becoming a major issue for
23 design professionals. He suggested establishing a committee to advise inspectors,

1 architects, and engineers and listen to their concerns. Mr. La Brie encouraged the
2 Education Opportunities Committee to tackle these issues.

3

4 Mr. La Brie asked Board members to formulate problem statements to define particular
5 issues so they can be assigned to appropriate committees.

6

7 Mr. Carl Scheuerman indicated that revisions to Title 22 should also be a key focus for
8 the coming year. He said the California Department of Public Health (CDPH) is
9 revisiting the clinical code in Title 22 pertaining to the operation of hospitals. He noted
10 that these provisions have not been revised since 1976, so the revision process
11 provides an opportunity to harmonize and consolidate Titles 22 and 24 in a way that
12 better reflects present conditions. Mr. Scheuerman advised that many of the provisions
13 in Title 22 would be more appropriate in Title 24. He said the California Hospital
14 Association (CHA) is working to identify the operational provisions, and he invited Mr.
15 Roger Richter to talk about that effort.

16

17 Mr. Richter stated that CHA has formed a work group to review Title 22, and both Mr.
18 Coleman and Mr. Glenn Gall are participating. Mr. Scheuerman encouraged all Board
19 members interested in hospital operations to look at Title 22 and forward comments and
20 suggestions to the CHA work group. He welcomed input from the American Institute of
21 Architects and other professional groups as well.

22

23 Mr. Gall reported that CDPH held an initial public health hearing earlier that day. He
24 agreed with Mr. Scheuerman that the Title 22 revision process presents a long-awaited

1 opportunity to create a better code. Mr. Scheuerman commented that the initial hearing
2 focused on the administrative provisions; another hearing will be held in April on Articles
3 3 and 6, which deal with basic services, and a third hearing will take place in June on
4 the post-construction provisions dealing with the building itself.

5
6 Mr. La Brie recommended that OSHPD publicize the link to the CHA Website so more
7 people are aware of the revision process. He offered the assistance of the Board and
8 the Administrative Code Committee to help OSHPD review the Title 22 provisions and
9 identify possible changes.

10

11 At 12:05 p.m., the meeting was recessed for lunch.

12

13 **Committee Planning Breakout Sessions**

14 Mr. La Brie reconvened the meeting at 1:15 p.m. He explained that the purpose of the
15 breakout sessions was for each committee to develop its 2011 goals, define committee
16 deliverables, set a meeting schedule, and determine if consulting members with specific
17 types of expertise should be added.

18

19 Administrative Processes and Code Changes

20 Mr. Hurlbut convened the meeting of the Administrative Processes and Code Changes.

21 He welcomed suggestions as to committee goals.

22

23 Participants talked about ways to promote better communication between OSHPD and
24 design professionals at early stages in a construction project.

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Mr. Gall advocated developing a set of standards or guidelines to help design professionals interpret Title 24 code requirements.

Participants recognized the distinction between OSHPD’s role and the role of licensing and acknowledged the challenges in reconciling the two perspectives. They emphasized the need to involve both OSHPD and licensing authorities early in the collaborative review process. Committee members also noted that aligning Title 22 and Title 24 would be an important step in creating a workable collaborative process.

Mr. Duane Borba recommended reviewing and updating the OSHPD 3 clinical requirements as well, and committee members agreed.

Mr. Gall noted that updating regulations to reflect new code provisions should be an ongoing task for the committee. He suggested looking at the green building code and reviewing CAN’s and PIN’s as they are released. He also proposed that the committee develop guidelines for temporary construction.

Participants noted that systems for electronic medical records and other new hospital technology should be reviewed and addressed in regulations. There was discussion about whether this task was more appropriate for this committee or the Structural and Non-Structural Regulations Committee.

1 After some discussion, the committee decided to focus its efforts on the following goals:
2 defining the collaborative review process, reviewing and updating OSHPD 3
3 amendments, developing a comprehensive document for temporary construction,
4 analyzing the green building code in relation to Title 24, and aligning Title 22 and Title
5 24.

6
7 Mr. Hurlbut drew attention to the proposed meeting schedule and welcomed comments.

8
9 Participants noted that the Title 22 revision schedule and the next code cycle should be
10 considered when determining meeting dates.

11
12 After some deliberation, committee members agreed to meet on April 27, July 12, and
13 August 12.

14
15 Mr. Hurlbut recommended that Mr. Gall be assigned as the OSHPD liaison person for
16 this committee.

17
18 Instrumentation

19 Mr. Jeffrey Keaton convened the meeting the Instrumentation Committee, and
20 participants took turns introducing themselves.

21
22 Mr. Keaton reviewed the goals of the Instrumentation Committee: review the status of
23 existing instruments in hospital buildings, consider new candidate buildings for
24 instrumentation, and recommend a prioritized list for new instruments. He noted that

1 there are enough funds in the California Strong Motion Instrumentation Program
2 (CSMIP) to install instruments in two or three new facilities each year and maintain
3 existing instruments. Participants recalled that the committee had discussed the need
4 for vertical motion sensors as well as instruments on certain pieces of equipment to
5 validate design criteria and shake-table testing results. They recognized that funds
6 were limited, so instrumenting equipment was not an immediate priority. Committee
7 members expressed support for considering equipment instrumentation at some later
8 point. Ms. Naaseh advocated focusing now on building a robust database of different
9 types of instrumented buildings.

10

11 Mr. Keaton observed that when selecting new candidates and recommending priorities,
12 the committee has flexibility to consider a variety of factors, including proximity to major
13 faults, geologic site conditions, type of construction, structural systems, foundations,
14 and anticipated ground motion levels.

15

16 Mr. Keaton said the committee's primary deliverable is a prioritized list of recommended
17 facilities to accompany the CSMIP annual report. Mr. John Egan recommended
18 developing a cover memo highlighting significant ground motion records and interesting
19 findings obtained from instrumented facilities. After some discussion, committee
20 members expressed support incorporating a concise summary in the meeting minutes.

21

22 Mr. Keaton advised that the next committee meeting was scheduled for Tuesday,
23 October 18, in Sacramento. He pointed out that October is a better time to meet than
24 August because the budget is usually established by then.

1 Participants agreed that Chris Tokas and Mohammad Karim should attend committee
2 meetings. They proposed continuing to invite Moh Huang and Don Jephcott to attend
3 as consulting members.

4
5 Ms. Naaseh remarked that it might be helpful to have someone representing the
6 building owner's perspective.

7
8 Mr. Egan observed that as ground motion instruments have become smaller and more
9 responsive over time, more building owners may be willing to have them installed.

10 Other participants pointed out that modern instruments still need to be attached to a
11 structure and require a power source, so the process is somewhat disruptive. Mr. Egan
12 offered to gather feedback from facility owners to identify what can be done to address
13 their concerns.

14
15 Ms. Naaseh suggested developing an educational piece explaining the benefits of
16 instrumentation to hospital owners. Other participants noted that CSMIP might already
17 have materials of this nature. Ms. Naaseh volunteered to contact Mr. Huang to find out.

18
19 Ms. Naaseh raised the possibility of incorporating remotely monitored sensors in
20 buildings to identify potential post-earthquake structural performance problems.

21 Committee members talked about the movement toward "smart" buildings with built-in
22 sensors to monitor and control ventilation, temperature, air quality, and other factors.

23

1 Mr. Egan observed that California has not yet had any large earthquakes to test the
2 usefulness of the ground motion data being collected through the instrumentation
3 program.

4
5 There being no further business, the committee meeting was adjourned.

6
7 Standard Details

8 Mr. Spindler reported that the committee had already submitted CAD drawings of
9 standard details to OSHPD for review and approval, the implementation rules and
10 process had been defined, but there still needs to be a mechanism for adding new
11 standard details in the future. He noted the committee has not yet been charged with
12 this task.

13
14 Mr. Coleman indicated that OSHPD plans to roll out the standard details by the second
15 quarter of 2011. He said the drawings were forwarded to design professionals for
16 review and feedback before they are approved and adopted by OSHPD. He advised
17 that Mr. La Brie had drafted a set of instructions explaining how to implement standard
18 details in the field. He added that OSHPD still needs to provide guidance as to proper
19 application of the details.

20
21 Mr. Spindler urged OSHPD to define what kind of documentation will be required to
22 implement standard details and ensure they are used appropriately.

23

1 Mr. Dave Ring recommended establishing best practices for incorporating standard
2 details into building plans to expedite the plan review process.

3
4 Mr. Arlee Monson agreed, and noted that the focus should be on the application of
5 standard details rather than the details themselves. He said when his firm began using
6 standard details, designers simply referred to the details in the plans, but OSHPD
7 reviewers asked that the details themselves be included in the documentation. OSHPD
8 plan reviewers also requested the engineering calculations to back up the standard
9 details, a process that seemed time-consuming and duplicative.

10
11 Mr. Spindler observed that OSHPD needs to trust and empower design professionals to
12 implement the standard details appropriately. He expressed concern about creating an
13 unnecessary layer of review.

14
15 Mr. La Brie recalled that the committee had already developed a proposed
16 implementation process that addressed both plan review and application of standard
17 details in the field. He said Mr. Michael O'Connor then drafted a PIN for OSHPD's
18 consideration, and that document was still being considered.

19
20 Mr. Coleman advised that all PIN's and CAN's go through OSHPD's Building Standards
21 Unit, but the staff there may not be aware of which items have a high priority. He
22 recommended alerting him and Mr. Borba about specific issues that warrant immediate
23 attention. Mr. La Brie urged OSHPD to make sure the PIN and the standard details are
24 evaluated as soon as possible. Mr. Coleman confirmed that OSHPD intended to

1 complete this task by June 30. He said he understood the staff was waiting for KPFF to
2 complete its review.

3

4 Mr. Coleman observed that the purpose of allowing standard details is to streamline the
5 plan review process and ease the staff's workload, so having a workable process in
6 place should be a high priority. He said he would follow up with KPFF.

7

8 Mr. Coleman noted that OSHPD will develop a process for adding and revising details in
9 a timely and efficient manner.

10

11 Mr. La Brie said he hoped that eventually OSHPD would publish pre-approved details
12 on the Website that people can download and use.

13

14 Mr. Coleman cautioned that there are always certain people who do not follow the rules,
15 so OSHPD needs to have the ability to check their work to make sure the standard
16 details have not been altered. Participants acknowledged that there were individual
17 designers, engineers, and inspectors who will cut corners when they can. Mr. Coleman
18 said there are ways to lock drawings so they cannot be changed. Mr. Ring noted that
19 plan reviewers should check the drawings against their standard details.

20

21 Mr. La Brie recommended using a review process similar to that used for OPA's. He
22 said even pre-approved features need to be reviewed for compatibility on the building
23 site, but the review process can be streamlined because of the level of advanced review

1 that takes place, making more intense scrutiny unnecessary. Other participants
2 expressed support for this approach.

3

4 Mr. Coleman said he envisioned a process in which plan reviewers would check
5 drawings to verify that approved details were being used, and field reviewers would
6 approve modifications to pre-approved details that do not materially alter the work.
7 Modifications that are material would require an additional amended construction
8 document review step.

9

10 Mr. Coleman said the PIN should be completed by the end of April so the wall framing
11 details can be rolled out by June 30. Mr. Spindler stated that he would send Mr.
12 Coleman a copy of the PIN. Mr. La Brie made a commitment to work with the staff to
13 complete all ceiling details for submission to OSHPD by July 1 and approval by
14 December 31.

15

16 Participants talked about the process for adding and updating standard details. They
17 agreed that interested parties should have the ability to propose new details for
18 OSHPD's consideration. Mr. Coleman said OSHPD will need to establish formatting
19 standards to make the details widely usable. Mr. Monson emphasized the importance
20 of educating design professionals about how to use standard details appropriately.

21

22 Committee members decided to meet on March 16 to discuss a mechanism for
23 updating standard details and have additional meetings on April 19, May 16, and
24 October 20.

1 Participants proposed using videoconferencing for all committee meetings.

2

3 There was general consensus that KPFF and KHS&S representatives should be invited
4 to join the committee as consulting members.

5

6 Structural & Non-Structural Regulations

7 Ms. Naaseh convened the meeting of the Structural and Non-Structural Regulations
8 Committee. She asked OSHPD to indicate areas where the committee's assistance
9 would be helpful, and she suggested establishing goals consistent with OSHPD's
10 needs. She observed that the committee could serve an important role in clarifying
11 NPC requirements for hospitals.

12

13 Mr. La Brie recommended that the committee focus its efforts on NPC compliance. He
14 remarked that some hospitals with exemptions are not aware that they still have to
15 comply with egress requirements. Mr. Borba confirmed that compliance with egress
16 has been an issue. Participants acknowledged that the ability for hospitals to obtain
17 exemptions took many of the nonstructural requirements off their radar screens. They
18 pointed out that exempt buildings still need to comply with NPC requirements if they
19 take egress or utilities from noncomplying buildings.

20

21 Mr. Borba advised that OSHPD is considering eliminating the NPC 5 provision that
22 allows a water hookup. He explained that the current code allows either a 72-hour
23 water storage tank or a hookup, but hookups may not work if roads are damaged after
24 earthquakes. He also questioned whether 72 hours of storage was adequate.

1 Mr. Borba said clarifying seismic certification requirements is another area the
2 committee could tackle. He stated that seismic certification is not required for
3 equipment installed in noncomplying buildings, but certification is required for equipment
4 that serves conforming buildings.

5
6 Mr. Borba also recommended clarifying Section 1224 with respect to substantiating no
7 adverse impacts in situations where utilities pass through nonconforming buildings.

8
9 Participants agreed that designers and hospitals would benefit from more clarification
10 with respect to other requirements that apply to buildings with NPC exemptions.

11
12 Mr. Martin indicated that Mr. Chris Tokas had concerns about special foundation
13 systems. He proposed that the committee develop guidelines to determine which
14 systems can be considered alternate means of compliance. He volunteered to research
15 this issue in more detail.

16
17 On this issue, Mr. Borba suggested establishing two goals for the committee: approving
18 alternate methods of compliance between code cycles, and then developing language
19 to submit to the Building Standards Commission to eliminate the need for alternate
20 methods of compliance for foundation systems.

21
22 Ms. Naaseh noted that Mr. Coleman had also mentioned the need to clarify SPC-1
23 requirements. Committee members talked about ways the committee can support
24 OSHPD in dealing with voluntary seismic improvements.

1 Mr. Borba commented that the committee could assist OSHPD by identifying lessons
2 learned from seismic certification so far and proposing modifications.

3
4 Ms. Naaseh asked if the list of frequently asked questions should be expanded to clarify
5 these points. Mr. Borba recommended that the committee first clarify the issues, and
6 the decide whether they are best addressed through PIN's, CAN's, frequently asked
7 questions, or new code language.

8
9 Mr. La Brie proposed clarifying requirements that apply to hospitals taking acute-care
10 facilities out of service. Mr. Borba said CAN 2-3406A already answers some of these
11 questions. He observed that it might be helpful to have this committee or the
12 Administrative Regulations and Code Changes Committee review and update that CAN.

13
14 Ms. Naaseh summarized the issues for the committee to address:

- 15 • Compliance requirements for exempt buildings that use systems or utilities from
16 noncomplying buildings;
- 17 • Alternative foundation systems;
- 18 • Voluntary seismic improvements;
- 19 • Seismic certification;
- 20 • CAN 2-3406A update.

21 Ms. Naaseh said she would meet later with Mr. Coleman and Mr. Tokas to better define
22 the scope of each issue and narrow the committee's focus.

23

1 Ms. Naaseh drew attention to the proposed meeting schedule and noted that the
2 committee would meet again on March 22 and September 12.

3

4 SB 499 Facilities Progress Reporting

5 Mr. Bob Kain convened the meeting of the SB 499 Facilities Progress Reporting
6 Committee, and participants took turns introducing themselves.

7

8 Mr. Kain noted the committee's focus was already narrowly targeted, and he invited Mr.
9 Coleman to provide a brief introduction.

10

11 Mr. Coleman explained that SB 499, passed last year, required all acute-care hospitals
12 with one or more SPC-1 buildings to file a report with OSHPD by November 1, 2010.

13 He said OSHPD developed a uniform format so the data could be transferred easily to a
14 statewide database. He reported there are 224 hospitals with 677 SPC-1 buildings, and
15 all of them submitted reports by the November 1 deadline, an outstanding response.

16 Mr. Coleman advised that the reporting hospitals also indicated they had another 1,040
17 buildings rated SPC-2 through SPC-5.

18

19 Mr. Coleman noted the committee will be meeting on Friday, February 18, to review the
20 report results, and then OSHPD will create summaries. He advised that OSHPD has
21 developed a series of flow charts to assist with interpreting the information from the
22 reports. He said hospitals must comply with SB 1953 by 2013, 2015, 2020, or beyond,
23 depending on their individual ratings and exemption status. He added that the OSHPD

1 will eventually need to determine how many hospitals are potentially compliant and
2 noncompliant based on what was reported.

3

4 Mr. Coleman stated that at least three bills pertaining to SB 499 reporting are likely be
5 presented to the Legislature this year, including one that will add penalties for false
6 reporting. He said other bills may address next year's reporting requirements, how
7 hospitals are screened, how the reported information is used, and applying the lessons
8 learned.

9

10 One participant commented that the way SB 499 was written caused considerable
11 confusion for hospital owners. He noted that the reports would be more useful if the
12 legislative staff could agree to a more streamlined interpretation of the statute. Mr.
13 Coleman said modifications and interpretations should be addressed through the
14 legislative process. He noted that OSHPD staff provides ongoing technical assistance
15 to bill authors, so it might be possible to recommend clean-up language to resolve some
16 of the problematic issues.

17

18 Mr. Richter pointed out that unless changes are introduced as emergency legislation,
19 new provisions would not go into effect until January 1, 2012.

20

21 A participant asked how OSHPD plans to use the information being gathered from
22 hospitals. Mr. Coleman replied that OSHPD can use the reported information to
23 calculate the number and type of patient beds available and to analyze impacts of major
24 earthquakes on the state's healthcare capacity.

1 Ms. Noella Tabladillo expressed interest in joining the committee as a consulting
2 member. Committee members supported her addition.

3

4 Mr. Coleman indicated that Mr. Brett Beckman would be the OSHPD liaison for the
5 committee.

6

7 Mr. Kain referred to the proposed meeting schedule and welcomed suggestions. After
8 some discussion, committee members agreed to meet on February 18, April 5, and
9 June 7.

10

11 Mr. Coleman indicated it would be helpful if the committee could recommend a process
12 for hospitals to update or amend the information reported.

13

14 The committee determined that the appeal process should be addressed by the Board
15 Procedures Committee.

16

17 Mr. Coleman said another task the committee could undertake would be development of
18 a PIN or CAN clarifying the requirements to obtain an SB 1661 extension from 2013 to
19 2015. After some discussion, the committee concluded that this should be handled by
20 the Administrative Regulations and Code Changes Committee.

21

22 There was general consensus that the committee should develop guidance for hospitals
23 so they understand the intent and context of the reporting requirements and the kind of
24 information they need to provide.

1 Mr. Kain identified the following tasks for the committee: reviewing and evaluating the
2 reports submitted by hospitals, responding to any legislative changes, identifying
3 lessons learned, clarifying what constitutes false reporting, providing support to the staff
4 in legislative hearings, and creating a written narrative outlining the intent of the
5 reporting requirements.

6

7 Education Opportunities

8 Mr. Monson convened the meeting of the Education Opportunities Committee.

9 Participants took turns identifying themselves.

10

11 Ms. Janssen asked if the committee wanted to change its name to “Educational
12 Opportunities.” Participants decided to address this question after establishing the
13 committee’s goals.

14

15 Mr. Monson welcomed suggestions regarding possible 2011 goals. He noted that one
16 of the major purposes of the Education Opportunities Committee is to ease OSHPD’s
17 workload by shifting more tasks away from the staff to Board members.

18

19 Ms. Jackson stated that the Board’s previous Education and Seminars Committee dealt
20 primarily with developing informational seminars and training sessions to help educate
21 hospital owners and design professionals on code changes and OSHPD processes.

22 She said the subsequent budget crisis put these efforts on hold and the committee was
23 disbanded. She pointed out that education is not part of OSHPD’s primary mission.

24

1 Ms. Janssen advised that OSHPD is establishing a list server that could be very useful
2 to the committee. She suggested that the committee consider developing guidelines
3 about how OSHPD can promote and advertise training events. She recommended
4 publicizing training opportunities offered by other organizations rather than creating new
5 OSHPD programs. Ms. Janssen said interested consumers can sign up to receive
6 email notifications from the listserve.

7
8 Committee members asked about posting links OSHPD's Website. Ms. Janssen
9 expressed reservations about posting links because they might be construed as
10 endorsements by OSHPD. She said OSHPD would have to include a disclaimer to
11 clarify that the events were not being sponsored by OSHPD. Participants
12 recommended posting links to events OSHPD will be sponsoring or attending. They
13 noted it would also be helpful to post links to continuing education classes. They talked
14 about the possibility of recording and posting presentations made by OSHPD staff and
15 internal training sessions on the Website.

16
17 Committee members talked about establishing a mechanism to filter out unwanted
18 email notifications. Ms. Janssen said she envisioned a system that would allow users to
19 select particular topics of interest to them. One participant suggested creating separate
20 categories for design professionals, IORs, hospital owners. Ms. Janssen noted that
21 there could be a subcategory of educational opportunities for each group of users, and
22 participants indicated they liked that idea. She said the contract with the listserve
23 developer limits the number of emails and the number of categories.

24

1 The committee discussed establishing a speakers bureau as a central contact point for
2 people to request OSHPD speakers and presentations at conferences. There was
3 general consensus that this should be part of the committee's goals for 2011.
4

5 Committee members noted that OSHPD's best practices manual is posted as a link on
6 the CHA Website. They discussed reviewing and updating the manual and posting it on
7 OSHPD's Website. Ms. Jackson suggested dividing the best practices manual into
8 sections and assigning them to their original authors for review and updating. Ms.
9 Janssen said she would contact the CHA Healthcare Foundation to obtain source files
10 for the manual in Word format.
11

12 Ms Janssen indicated that she would email a link to the .pdf version of the best
13 practices manual to committee members for a preliminary review, and then specific
14 review assignments can be made at the next meeting.
15

16 Mr. Monson drew attention to the proposed meeting schedule. Committee members
17 agreed to schedule the next meeting for March 15, hold a meeting on July 26, and use
18 videoconferencing for members who are unable to travel on that date. They decided to
19 meet every other month and decided to set dates later for meetings in May and
20 September.
21

22 Mr. Monson advised that the Instrumentation Committee wants to develop an
23 educational document for hospital owners explaining the value of instrumentation. He

1 noted that this would be something else that could be posted and disseminated through
2 the Website.

3

4 Ms. Jackson volunteered to help review informational material on seismic certification of
5 equipment.

6

7 **Reconvene**

8 Mr. La Brie reconvened the full Board. He thanked Board members for participating in
9 the breakout sessions and welcomed their feedback. He noted that more detailed
10 reports would be presented the following day.

11

12 Board members commented that they found the breakout sessions focused and
13 effective. They expressed appreciation to Mr. La Brie for his introductory presentation
14 that set the stage and outlined his expectations.

15

16 Ms. Linda Janssen suggested that OSHPD appoint a staff liaison person to work with
17 each committee.

18

19 Mr. Coleman said meeting with Board members was helpful to OSHPD staff. He
20 thanked the Board for providing concrete help in a number of different areas.

21

22 Mr. Bert Hurlbut observed that a smaller room would have made the breakout sessions
23 easier. Other Board members noted that it would have been nice to have water and
24 coffee.

1 **Recess**

2 **MOTION:** (M/S/C) [Spindler/Scheuerman]

3 The Board voted unanimously to recess until the following day.

4

5 There being no further business, the meeting was recessed at 4:00 p.m., to be
6 reconvened at 10:00 a.m. the following morning, February 16, 2011.

7

8 **Reconvene - Call to Order - Wednesday, February 16, 2011**

9 Mr. La Brie reconvened the meeting at 10:00 a.m. on Wednesday, February 16, and
10 welcomed everyone. Participants took turns identifying themselves.

11

12 **Statement of Economic Interests (Form 700) Presentation**

13 Ms. Elizabeth Wied, OSHPD Chief Counsel, presented a PowerPoint presentation on
14 the Statement of Economic Interests (Form 700). Board members are required to
15 complete and submit this form on an annual basis by April 1st. Penalties in the amount
16 of \$10.00 per day may be assessed for missing or incomplete forms. The Fair Political
17 Practices Commission will consider requests to waive the payment of a late fine if the
18 request is based on “good cause.”

19

20 **FDD Update**

21 Mr. Paul Coleman, FDD Deputy Director, presented an update on FDD’s Plan Review
22 trends, update on the new Logbook project, impact of furloughs on plan review
23 turnaround goals, and FDD’s goals for 2011, etc.

24

1 **Update on Regulations, Code Application Notices, Frequently Asked Questions**
2 **and Applications and Forms**

3 Mr. Duane Borba, FDD Deputy Division Chief (Sacramento), provided an update on the
4 success of FDD's new Rapid Review Unit; gave a brief overview of CAN 2-107.4
5 Amended Construction Documents; PIN 46 Minimum Non-refundable Application Filing
6 Fee; PIN 48 School District Fee Compliance; and other PINs and CANs that are being
7 drafted.

8

9 **Standard Details Committee**

10 Ms. Dani Paxson, KPFF, gave a presentation on the history of Standard Details which
11 were first introduced by Kaiser Permanente and finalized through OSHPD. These
12 Standard Details are being updated by the Standard Details Committee in accordance
13 with current code requirements. The Committee will focus on Partition Details; once
14 those are finalized and approved the Committee will begin working on Ceiling Details.

15

16 At 12:00 noon, the Board recessed for lunch.

17

18 **Board Goals for 2011**

19 Mr. La Brie reconvened the meeting at 1:00 p.m. He proposed deferring the discussion
20 of Board goals until after the committee reports on the breakout sessions.

21

22 **Committee Reports from February 15 Breakout Sessions**

23 Mr. La Brie asked committee chairs to give brief reports on what they accomplished
24 during the previous day's breakout sessions. He noted that the committees were

1 supposed to identify goals, plan their work for the coming year, identify product
2 deliverables, determine whether they needed consulting members, and set meeting
3 dates.

4

5 Instrumentation

6 Mr. Keaton reported that the goals of the Instrumentation Committee are to review the
7 status of existing instruments in hospital facilities, review newly proposed candidate
8 hospital buildings for instrumentation, and recommend a prioritized list of hospital
9 buildings for new instruments. He said the committee identified instrumentation of
10 equipment and instrumentation of structural elements as long-term future goals.

11

12 Mr. Keaton stated that the committee's primary deliverable is the prioritized list of
13 hospitals for future instrumentation, and a second deliverable would be meeting
14 minutes. He noted that committee members suggested including in the minutes an
15 overview statement to capture highlights for Board members. He indicated that the
16 committee also discussed developing an educational piece for hospital owners
17 explaining the benefits of instrumentation.

18

19 Mr. Keaton said the committee felt no need to add consulting members because the
20 Board members on the committee have sufficient expertise. The committee wants to
21 continue to invite representatives from the California Strong Instrumentation Program
22 and the California Geological Survey, and a hospital owner representative might also be
23 helpful. Mr. Keaton noted that Mr. Don Jephcott has done considerable background

1 work to help the committee prepare for meetings, and the committee would welcome his
2 continued presence.

3

4 Mr. Keaton advised that the committee meets once a year, and the next meeting is
5 scheduled for October 18. He added that the date can be moved if Mr. Chris Tokas and
6 Mr. Mohammad Karim are unable to attend. Mr. La Brie suggested that the Standard
7 Details Committee consider meeting on October 19 if necessary.

8

9 One participant asked if the committee planned to develop a standard memorandum of
10 understanding (MOU) agreement for instrumenting hospitals. Mr. Keaton said he
11 understood the MOU was being crafted by OSHPD.

12

13 Mr. Tokas stated that the MOU will be presented to the committee for review at the next
14 meeting.

15

16 Mr. La Brie thanked Mr. Keaton for his report.

17

18 Structural & Non-Structural Regulations

19 Mr. Scott Karpinen summarized the committee's discussion at the February 15 breakout
20 session. He said the committee's goals include clarifying compliance requirements
21 pertaining to NPC-3 exempt buildings with egress or utilities from nonconforming to
22 conforming buildings, clarifying NPC-5 requirements, helping OSHPD establish a
23 process for dealing with voluntary seismic improvements, assessing implementation of
24 seismic certification, and identifying criteria for acceptable alternate foundation systems.

1 Mr. Karpinen reported that the committee did not feel a need for adding consulting
2 members at this time. He said committee members approved the meeting schedule as
3 proposed.

4

5 Administrative Regulations and Code Changes

6 Mr. Hurlbut stated that the committee's goals for 2011 are to define the collaborative
7 review process, review and update OSHPD 3 amendments, develop a comprehensive
8 document for temporary construction, evaluate the green building code and other new
9 code provisions with respect to Title 24, and align Title 22 and Title 24.

10

11 Mr. Hurlbut said the committee plans to meet on April 27, July 12, and October 12. He
12 requested that Mr. Gall be assigned as the staff support person for the committee.

13

14 Standard Details

15 Mr. Spindler reported that the committee goals include completing and approving the
16 standard details for wall framing and the PIN by April 15. He said ceiling details will be
17 submitted to OSHPD for review by July 1 so they can be approved for use by December
18 31.

19

20 Mr. Spindler noted that the next committee meeting is scheduled for March 16. At that
21 meeting, the committee will discuss a process for updating existing standard details and
22 adding new ones and create a work plan for developing standard details for ceilings.

23 Mr. Spindler advised that more committee meetings are scheduled for April 19, May 16,

1 June 14, August 16, October 18, and November 15. He proposed changing the
2 October meeting to October 20 to avoid conflicting with the Instrumentation Committee.

3
4 Mr. Spindler said the committee plans to take advantage of videoconferencing facilities
5 at the Los Angeles OSHPD office so members will not have to travel to meetings.

6
7 Mr. Spindler proposed adding Ms. Dani Paxson, from KPFF, and Mr. Kale Wisnia,
8 KHS&S, as consulting members.

9
10 Mr. La Brie said that if any other committees want consulting members, they should
11 contact those individuals and ask them to submit a letter of interest along with a
12 résumé. He stated the he, Ms. Janssen, and committee chairs would evaluate and
13 select consulting members based on need.

14
15 Mr. La Brie thanked Mr. Spindler for his report.

16
17 SB 499 Facilities Progress Reporting

18 Mr. Kain noted there has been considerable interest in the SB 499 reporting process, as
19 evidenced by the number of people who attended the breakout session. He said the
20 committee's kickoff meeting will be held on Friday, February 18.

21
22 Mr. Kain proposed adding Ms. Noella Tabladillo as a consulting member and appointing
23 Mr. Brett Beckman to serve as the OSHPD liaison.

24

1 Mr. Kain indicated that the committee's first task will be to review and evaluate the 224
2 reports submitted by hospitals by the November 1, 2010 deadline and help OSHPD
3 extract pertinent information to include in a summary. For the future, the committee will
4 respond to legislative changes and make recommendations for future reporting cycles.
5 Deliverables will include a compilation of lessons learned, a clarification of what
6 constitutes false reporting, a recommendation for mechanical and structural changes,
7 support for legislative hearings, and a written narrative clarifying the intent of the
8 reporting requirements. Mr. Kain noted that the committee determined that the Board
9 Procedures Committee or the Administrative Regulations and Code Changes
10 Committee should deal with the appeal process.

11
12 Ms. Janssen requested input from the SB 499 Committee on the proposed appeal
13 process for reporting hospitals. Mr. La Brie suggested that the committee review the
14 appeal process at its next meeting.

15
16 Mr. Kain said the committee will meet on February 18, April 5, and June 7, and a fourth
17 meeting will probably be held later in the year. He added that the committee decided to
18 move its meeting schedule forward to better prepare for legislative hearings and any
19 bills on SB 499 that will be introduced this session.

20
21 Mr. La Brie observed that the committee might need to schedule additional meetings to
22 keep up with its workload. Mr. Kain said the committee will keep that possibility open.

23

24 Education Opportunities

1 Mr. Monson said the committee plans to disseminate information about educational and
2 training events offered by other organizations. OSHPD will be launching a listserver to
3 send email notifications and links about programs and presentations of interest to users.

4 Mr. Monson noted that the committee goals include monitoring listserver activity and
5 making recommendations about possible subcategories, establishing a speaker's
6 bureau as a central contact point for requesting OSHPD speakers, posting recordings of
7 presentations and training sessions on the Website, and updating the best practices
8 manual.

9
10 Mr. Monson stated that the next committee meeting will take place on March 15. The
11 committee will schedule additional meetings in May, July, and September.

12
13 Mr. Monson said he did not believe any consulting members were needed at this time
14 for this committee.

15
16 **Board Goals for 2011**

17 Mr. La Brie led a discussion about the draft Board Goals for 2011 and how the
18 Committee Goals would support the Board's three established goals, in addition to
19 establishing particular committee goals toward the committee's primary purpose.

20
21 **MOTION:** (M/S/C) [Keaton/Spindler, with friendly amendment by Mr. Chris Wills] to
22 approve the Board Goals as initially drafted by Mr. La Brie, with the friendly amendment
23 of listing the long-term priorities and short-term, higher priorities separately.

24

1 **Information Items**

2 Mr. La Brie drew attention to the informational materials in the meeting packet.

- 3 • HBSB Membership
- 4 • HBSB Roster
- 5 • HBSB Consulting Members Roster
- 6 • HBSB Committee List

7

8 **Comments from the Public/Board Members on Issues not on this Agenda**

9 There were no additional issues brought to the attention of the Committee.

10

11 **Adjournment**

12 **MOTION:** (M/S/C) [Spindler/Scheuerman]

13 The Board voted unanimously that the meeting be adjourned. There being no further
14 business, the meeting was adjourned at 3:00 p.m.

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Office of Statewide Health Planning and Development



Hospital Building Safety Board

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Place holder for the

OSHPD Update — Stephanie Clendenin, Director (acting)



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HOSPITAL BUILDING SAFETY BOARD
Ad Hoc Committee on Senate Bill (SB) 499,
Facilities Progress Reporting

MEETING NOTICE**Friday, February 18, 2011****10:00 a.m. — 3:30 p.m.**

at the

Office of Statewide Health Planning and Development

400 R Street, Suite 317

Sacramento, CA 95811

(916) 440-8446

Board Members: Bob Kain, Chair; Eric Johnson; Scott Karpinen; Poki Namkung; Michael O'Connor; Michael Osur; Carl Scheuerman

Consulting Members: None at this time

OSHPD Staff: Brett Beekman; Chris Tokas

HBSB Staff: Linda Janssen, Executive Director; Evett Torres

MEETING AGENDA

NOTE: Agenda order is tentative and subject to change without prior notice.

All times are approximate and subject to change.

A one-hour lunch will be taken sometime during the day.

1. Welcome and Introductions**2. Overview of Today's Committee Work – Paul Coleman**

- Review hospitals' submitted SB 499 reports for preparation of FDD analyses and summaries to ensure that they reflect the intent of the hospitals to the extent possible.
- Discussion and public input



3. Comments from the Public/Board Members on Issues not on this Agenda:

The Board will receive comments from the public/members at this time on matters not on the agenda. Matters raised at this time will be taken under consideration for placement on a subsequent agenda.

4. Adjournment

If Committee Members or OSHPD staff are unable to attend this meeting please notify us within 48 hours of receipt of this agenda. Any questions may be directed to Board Staff at (916) 440-8453.

REMINDER: to verify the meeting date and location, call (916) 440-8453 Thursday, February 17, 2011 after 3:00 p.m.

NOTE: Meeting facilities and restrooms are accessible to the physically disabled. If you require special accommodations (assistive listening device, sign language interpreter, etc.), contact Board Staff at (916) 440-8453. Make requests as soon as possible but no later than 10 business days prior to the meeting.

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Office of Statewide Health Planning and Development



Hospital Building Safety Board

400 R Street, Suite 200
Sacramento, California 95811-6213
(916) 440-8446
Fax (916) 324-9118
<http://www.oshpd.ca.gov/Boards/HBSB/index.html>

**MEETING REPORT
HOSPITAL BUILDING SAFETY BOARD (HBSB)**

Senate Bill (SB) 499, Facilities Progress Reporting Committee

**Friday, February 18, 2011
10:00 a.m. - 3:30 p.m.**

Office of Statewide Health Planning and Development
400 R Street, Suite 317
Sacramento, CA 95811

Committee Members Present

Bob Kain, Committee Chair
Eric Johnson, Committee Vice-Chair
John Egan
Scott Karpinen
Joe La Brie
Michael Osur
Carl Scheuerman
Matt Melcher, Consulting Member

OSHDP Staff

Brett Beekman
Paul Coleman, Deputy Director
Roy Lobo
Patrick Rodgers
Chris Tokas
Elizabeth Wied, Chief Counsel

HBSB Staff

Linda Janssen, Executive Director
Evelt Torres

1 Welcome and Introductions

- 2 Mr. Eric Johnson, Committee Vice-Chair, called the meeting to order at 10:05 a.m. and
- 3 welcomed everyone. He noted that he would be chairing the meeting until Mr. Bob
- 4 Kain, Committee Chair, arrived. Participants took turns introducing themselves.



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Overview of Committee Work

Mr. Paul Coleman, OSHPD Deputy Director, said the primary purpose of the meeting was to review the SB 499 reports submitted by hospitals to help the Facilities Development Division analyze and summarize the information they contain. He indicated that the staff would provide a brief background and discuss what the reports are supposed to contain, and then the committee would review the reports and discuss how best to analyze and summarize them so OSHPD can assess the status of hospitals' seismic compliance.

Mr. Coleman expressed his appreciation to Mr. Brett Beekman and the staff for their hard work. Mr. Beekman acknowledged the important contributions of Mr. Roy Lobo, Mr. Patrick Rodgers, and Mr. Chris Tokas.

Mr. Tokas showed a PowerPoint presentation explaining the background leading to SB 499, the contents of the reports submitted by hospitals, how the staff plans to evaluate hospitals' compliance, and projected impacts on hospital services.

Mr. Tokas explained that in 2001, 323 hospitals submitted reports that identified 1,027 buildings rated SPC-1. The deadline set by SB 1661 for seismic compliance was 2008 unless an extension was granted. Of the 323 hospitals reporting, 81 upgraded all their SPC-1 buildings to SPC-2 or better by the 2008 deadline; 18 more hospitals brought all their SPC-1 buildings into compliance by the November 1, 2010 SB 499 reporting deadline, leaving 224 hospitals with 677 SPC-1 buildings.

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Mr. Tokas said the November 1, 2010 reporting deadline applied to all hospitals with SPC-1 buildings, and owners were required to report on the status of compliance for each building. Owners were to identify whether the building would be retrofitted or replaced, the applicable project numbers, projected dates for starting and completing construction, current status, and the number and types of patient beds affected. For buildings to be removed from acute care service, owners had to specify dates of removal from service, planned uses, inpatient services currently housed in the buildings, number and types of patient beds, and the specific buildings to which acute care services and beds would be relocated. Finally, hospital owners were required to report the final configurations of all buildings on their campuses, showing how each building would comply with SPC-5/NPC-4 or -5 requirements and the type of services provided in each general acute care hospital building.

Mr. Tokas stated that OSHPD posted the reports online, and the staff is in the process of analyzing the data provided. He showed a diagram forecasting the progress of hospitals' seismic compliance by 2013, 2015, and 2020 based on the data submitted in response to the SB 1661 reports. He displayed pie charts depicting the number and types of beds in SPC-1 buildings in Northern and Southern California. Mr. Tokas presented graphs projecting the number of beds and SPC-1 buildings that will be removed from service by 2013 and the number of buildings that are slated to be retrofitted.

1 Participants remarked that the analysis shows that many skilled nursing beds are likely
2 to be eliminated from hospitals, raising a policy issue for the state.

3

4 Mr. Tokas noted that SB 499 was passed in order to determine the status of hospital
5 compliance and analyze the impact on beds and services in California if hospitals were
6 forced to close because of noncompliance. He said that based on the data submitted
7 by hospitals in response to the SB 1661 reports, the staff concluded that 576 buildings
8 are likely to comply, 104 are possibly compliant, and 139 are potentially noncompliant.

9

10 Mr. Coleman questioned whether hospitals will actually be able to meet the 2013
11 deadline, given the pace of construction so far and the availability of design
12 professionals and construction firms. He said the staff needs to assess the accuracy of
13 the information in SB 499 reports to arrive at a more realistic estimate of compliance.

14

15 Mr. Johnson welcomed Mr. Kain, Mr. Michael Osur, and Ms. Jackie Vinkler to the
16 meeting.

17

18 Mr. Tokas reviewed the algorithms and methodology developed by the staff to analyze
19 compliance status in 2013 based on the SB 499 reports. He said the factors involved
20 include whether the building has been classified using HAZUS, whether a specific
21 project has been defined, plan approval and building permit status, and whether work is
22 proceeding in a timely fashion. He indicated that with this methodology, the staff will
23 identify the number of buildings likely to comply, possibly compliant, and potentially
24 noncompliant by 2013.

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Participants proposed tightening the names of the categories to make them more definitive. Mr. Coleman said the terms “likely to comply,” “possibly compliant,” and “potentially noncompliant” were chosen because they were flexible. He pointed out that the staff’s resulting analysis would be a forecast, not an accurate accounting of future compliance. Mr. Tokas observed that there could be movement between categories as work progresses.

Ms. Elizabeth Wied cautioned about using more absolute terms and recommended leaving the categories flexible.

Mr. Joe La Brie asked how many voluntary seismic improvement (VSI) projects there were, and Mr. Tokas replied that 55 buildings had been upgraded voluntarily. Mr. Coleman stated that some building owners have decided to target certain collapse-hazard features for seismic upgrades as a more cost-effective approach than a complete retrofit or building replacement.

Mr. Tokas drew attention to the flow charts illustrating the steps to be used in analyzing each building to be retrofitted, replaced, or removed from service. He went through examples of different types of projects to demonstrate how the flow charts would be used by the staff. Participants recommended disseminating the flow charts so people understand the assessment methodology.

1 Ms. Noella Tabladillo recommended clarifying whether HAZUS 2007 or HAZUS 2010
2 will be used. Mr. Tokas indicated that although some buildings had already been
3 submitted for HAZUS review, more will probably come later, so different versions of
4 HAZUS may be used. Mr. Coleman observed that OSHPD expected more than 300
5 buildings to be screened with HAZUS, but that number has not materialized, perhaps
6 due in part to the failure of legislation last year that would have allowed an additional
7 extension of time.

8

9 Participants discussed the possibility that some hospitals may be eligible for extensions
10 to 2015. Mr. Tokas noted that certain criteria must be met to qualify for an extension,
11 and the deadlines for some of those criteria have already passed. He added that some
12 of the information provided in the reports could be updated in the future, resulting in a
13 change in compliance category. Participants recommended annotating the SB 1661 list
14 to clarify which hospitals are eligible for a 306 extension.

15

16 Mr. Carl Scheuerman observed that there are some factors outside the control of
17 hospital owners. For example, he said, local jurisdictions are responsible for conducting
18 environmental impact reviews and authorizing construction to proceed, so it could be
19 difficult to predict completion dates in some circumstances.

20

21 Mr. Scheuerman pointed out that there may be some situations when SPC-1 buildings
22 will be replaced, but services and beds could still be eliminated or reduced in the
23 replacement building. Participants discussed the distinction between the replacement
24 and removal, and they concluded that the wording of the legislation was unclear. Mr.

1 Tokas said OSHPD will provide better definitions of the terms for the next reporting
2 cycle to eliminate the confusion.

3

4 Mr. Tokas said the end result of the staff's analysis will be an estimate of the number of
5 hospitals likely to comply with statutory deadlines by 2013 and 2015. Mr. Coleman
6 emphasized that the purpose of the summary is to apprise the Legislature of the status
7 of hospitals' compliance efforts and a forecast of impacts on the number of hospital
8 beds and services that will be available to consumers.

9

10 **Discussion and Public Input**

11 Mr. Kain welcomed comments from participants. There was general consensus that the
12 algorithms and categories were sound and defensible, and participants commended
13 OSHPD for developing an effective methodology to analyze the reports.

14

15 Mr. Scheuerman recommended developing criteria for each box on the flow charts. Mr.
16 Coleman remarked that the staff will refine the algorithms and flow charts as the reports
17 are analyzed. He indicated that the staff would send updated versions to committee
18 members for their review.

19

20 Mr. Coleman said OSHPD hopes to have some initial assessments and summaries
21 completed in early March.

22

23 Mr. Kain noted that the committee would meet again on April 5 and June 7 to review
24 and discuss the results of the staff's analysis. Mr. Coleman welcomed the committee's

1 assistance in identifying improvements and changes for future reporting cycles. He
2 observed that new legislation might modify some of the reporting requirements. He
3 noted that there has been some discussion about adding penalties for false reporting.

4

5 Mr. Kain proposed that the committee devote time at future meetings to identifying
6 lessons learned and developing a survey for respondents.

7

8 One committee member noted that the draft minutes of the committee's May 13, 2010
9 meeting had been posted on the Website, and he asked if the committee had approved
10 those minutes. Ms. Wied pointed out that approval of minutes had not been agenda-
11 rized for this meeting, and she recommended deferring action until the April meeting. Ms.
12 Janssen said she would check on whether the full Board had already approved the May
13 13 minutes.

14

15 **MOTION:** (M/S/C) [Scheuerman/Karpinen]

16 The committee voted unanimously to approve the algorithms developed by the staff to
17 analyze compliance status.

18

19 **Adjournment**

20 **MOTION:** (M/S/C) [Scheuerman/Johnson]

21 There being no further business, the committee voted unanimously that the meeting be
22 adjourned. The meeting was adjourned at 12:27 p.m.

Hospital Building Safety Board

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www.oshpd.ca.gov/fdd/hbsb

HOSPITAL BUILDING SAFETY BOARD **SB 499 Facilities Progress Reporting Committee**

MEETING NOTICE

Wednesday, April 6, 2011

10:00 a.m. — 4:00 p.m.

at the

Office of Statewide Health Planning and Development

400 R Street, Suite 317

Sacramento, CA 95811

(916) 440-8453

Board Members:

Bob Kain, Chair; Eric Johnson, Vice-Chair;
Scott Karpinen; Poki Namkung; Michael O'Connor;
Michael Osur; Carl Scheuerman

Consulting Member:

Robert Omens; Noella Tabladillo

OSHPD Staff:

Brett Beekman; Roy Lobo; Chris Tokas; Kevin Bertrand

HBSB Staff:

Linda Janssen, Executive Director; Evett Torres

MEETING AGENDA

NOTE: Agenda order is tentative and subject to change without prior notice.

All times are approximate and subject to change. A 30-minute
to one-hour lunch will be taken sometime during the day.

- 1. Welcome and Introductions**
- 2. Review and Approve the February 18, 2011 Meeting Report**
 - Discussion and public input
- 3. Review proposed Policy Intent Notice 47: Expedited Appeals**
 - Discussion and public input
- 4. Result of the SB 499 Reports to date:**
 - Discuss the trends forecasting Seismic Compliance inferred as the SB 499 database is being analyzed
 - Discussion and public input



5. Additional SB 499 Report Information:

- Discuss the acquisition of additional report information required per legislative mandate to meet the statutory intent which is primarily two fold:
 - a) Determine the status of hospital compliance and/or proposed compliance with the seismic safety mandates
 - b) Determine the impact on beds and services in California if hospitals are closed down because of non-compliance
- Discussion and public input

6. Next Report Format/Lessons Learned:

- Discuss the format of the next report while utilizing the existing 2010 report data as a starting point.
- In conjunction with the next report format, discussion of the lessons learned would also be incorporated into said format.
- Discussion and public input

7. Comments from the Public/Board Members on Issues not on this Agenda:

The Board will receive comments from the public/members at this time on matters not on the agenda. Matters raised at this time will be taken under consideration for placement on a subsequent agenda.

8. Adjournment

REMINDER: Please call (916) 440-8453 on Tuesday, April 5, 2011, after 3:00 p.m. to confirm that the meeting will be taking place as scheduled. The recording will verify the meeting date and location.

NOTE: Meeting facilities and restrooms are accessible to the physically disabled. If any special accommodations (assistive listening device, sign language interpreter, etc.) are needed, please contact Board Staff at (916) 440-8453. Requests should be made as soon as possible but no later than 10 business days prior to the meeting.

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Questions? Call Board Staff at the above phone number.



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**MEETING REPORT
HOSPITAL BUILDING SAFETY BOARD (HBSB)**

SB 499 Facilities Progress Reporting Committee

**Wednesday, April 6, 2011
10:00 a.m. - 4:00 p.m.**

Office of Statewide Health Planning and Development
400 R Street, Suite 317
Sacramento, CA 95811

Committee Members Present

Eric Johnson, Committee Vice-Chair
Scott Karpinen
Joe La Brie
Poki Namkung
Michael O'Connor
Michael Osur
Carl Scheuerman

OSHPD Staff

David Carlisle, M.D., Director
Brett Beekman
Roy Lobo
Patrick Rodgers
Chris Tokas
Elizabeth Wied, Chief Legal Counsel

Consulting Members Present

Robert Omens
Noella Tabladillo

HBSB Staff

Evelt Torres
Veronica Yuke

1 Welcome and Introductions



1 Mr. Eric Johnson, Committee Vice Chair, called the meeting to order at 10:05 a.m. and
2 welcomed everyone. Participants took turns introducing themselves.

3

4 **Review and Approve the February 18, 2011 Meeting Report**

5 Mr. Johnson reviewed highlights of the February 18 meeting report.

6

7 **MOTION:** (M/S/C) [Johnson/La Brie]

8 The committee voted unanimously to approve the February 18 meeting report as
9 presented.

10

11 **Review Proposed Policy Intent Notice 47: Expedited Appeals**

12 Ms. Elizabeth Wied noted Board had some discussion about the appeals process last
13 fall, but all hospitals complied with the reporting deadline, so there were no issues
14 pertaining to penalties for late filing. She recommended that the Board establish an
15 expedited appeal process to deal with penalty issues in the future.

16

17 Ms. Wied advised that the Board Procedures Committee reviewed the draft PIN and
18 expressed concern about the selection of appeal panel members; there was general
19 agreement that a panel of volunteers should be solicited, and then the Board chair
20 would appoint two individuals to hear each appeal. She welcomed feedback from
21 committee members. She added that the next step will be to draft implementation
22 guidelines.

23

1 Mr. Joe La Brie expressed support for putting a process in place and issuing the PIN.
2 He pointed out that changes and adjustments can be made in the future as the appeals
3 process is implemented.

4

5 Mr. Johnson clarified that the key change in this draft was using volunteers rather than a
6 random draw. Ms. Wied said the Board Procedures Committee felt it would be best to
7 use people willing and able to hear appeals. She added that the panels will have
8 guidelines and access to legal counsel throughout the process.

9

10 Mr. Johnson noted that hearings would be recorded, but the private deliberations of
11 panel members would not be recorded. Ms. Wied agreed and suggested incorporating
12 this point in the guidelines.

13

14 Ms. Wied stated the hearings will be conducted informally, and strict rules of evidence
15 would not apply. Instead, any relevant evidence can be considered.

16

17 Mr. Johnson welcomed Mr. Michael O'Connor and Committee Chair Bob Kain to the
18 meeting. Mr. O'Connor apologized for his late arrival.

19

20 Ms. Wied noted that references to "tape recording" in the fourth paragraph of the PIN
21 will be changed to "recording."

22

23 Committee members asked what would happen if the two panel members disagreed.

24 Ms. Wied replied that the disagreement should be reported to the Chair, and the

1 ultimate decision would come back to the SB 499 Facilities Progress Reporting
2 Committee. Ms. Wied pointed out the language in the last sentence.

3
4 Mr. Johnson proposed that this committee draft some proposed implementation
5 guidelines. After some discussion, committee members agreed that OSHPD should
6 move forward with the PIN immediately and develop guidelines as soon as possible.

7
8 A participant recommended citing the specific penalty section of SB 499.

9
10 Committee members suggested having the Board Procedures Committee review the
11 guidelines before they are presented to the Board. Mr. O'Connor volunteered to work
12 with the staff to draft a preliminary set of guidelines, and he proposed asking Mr. Bob
13 Kain to help.

14
15 **MOTION:** (M/S/C) [Osur/O'Connor]

16 The committee voted unanimously to recommend approval of PIN 47 with the
17 amendments discussed.

18
19 **MOTION:** (M/S/C) [Scheuerman/Namkung]

20 The committee voted unanimously to have a two-person task force work with the staff to
21 develop guidelines.

22
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24

1 **Result of the SB 499 Reports to Date**

2 Mr. Chris Tokas gave a presentation on the results of the SB 499 reports and what they
3 show. He explained that hospitals were required to submit their SB 499 reports by
4 November 1 detailing their compliance plans for SPC-1 buildings. He said 84 hospitals
5 will still not be in full compliance by the January 1, 2013 deadline, leaving 258 SPC-1
6 buildings. Another 56 hospitals report they intend to meet the 2015 deadline, leaving
7 103 noncompliant SPC-1 buildings by that date. Other hospitals intend to meet the
8 January 1, 2020 deadline.

9
10 Mr. Tokas identified the number of inpatient beds in SPC-1 buildings, representing 53
11 percent of the bed inventory in those 224 hospitals. He showed a breakdown of the
12 number of SPC-1 beds in Northern and Southern California. Mr. Tokas said hospitals
13 with SPC-1 buildings have three options available: removal from service, replacement,
14 or retrofit. Even though replacement is the only option to postpone the compliance
15 deadline until 2020, some hospitals are still indicating they plan to retrofit the buildings,
16 and others have not decided exactly what they will do.

17
18 Mr. Tokas displayed a chart showing the number of beds in SPC-1 buildings. He
19 estimated there were a total of 24,000 beds in 677 SPC-1 buildings, and he showed a
20 breakdown of the number of beds in different kinds of services. He advised that the
21 reports indicate that 10 percent of all skilled nursing beds are proposed to be removed,
22 and about 12 percent of all beds. He noted that intermediate care will be affected more
23 than other types, and most of the cuts will take place in 2013.

24

1 Mr. Tokas commented that the SB 499 reports produced some very interesting data for
2 OSHPD pertaining to the number of SPC-1 buildings housing emergency services,
3 surgery, and other critical functions. He said the studies identify specific buildings that
4 will be removed and replaced as well as approximate dates.

5
6 Mr. Tokas said the SB 499 reports are supposed to provide useful data for two
7 purposes: determining the status of hospital compliance with seismic safety mandates
8 and determining the impacts of hospital closures due to noncompliance on beds and
9 services. He presented charts prepared by the staff based on the number of facilities
10 likely to comply with specific targeted deadlines, those who may possibly comply, and
11 the potentially noncompliant group. He explained that the staff used specific algorithms
12 to analyze the status of each hospital's compliance, considering the hospital's eligibility
13 for extensions and the current status of its projects.

14
15 Mr. Tokas presented tables showing the status of compliance on a building basis and
16 hospital basis. He pointed out that these tables represent projections, and some
17 potentially noncompliant hospitals might accelerate their efforts and actually meet the
18 deadlines. He showed maps identifying the compliance status of hospitals in each
19 county. Mr. Tokas pointed out that most potentially noncompliant buildings are located
20 in coastal areas with high population densities, and counties with limited facilities are
21 more seriously affected than counties with multiple facilities.

22
23 Looking at different types of hospitals, Mr. Tokas observed that UC facilities are
24 progressing well, with 88 percent likely to comply and 13 percent possibly compliant. Of

1 the district hospitals, 16 percent are likely to comply, 47 will possibly comply, and 38
2 percent are potentially noncompliant, a result that is consistent with the SB 1661
3 reports. Mr. Tokas reviewed compliance statistics for other hospitals.

4
5 Mr. Scheuerman emphasized the need to make facilities aware of these findings.

6
7 Ms. Tabladillo asked when noncompliance notifications would be sent out. Mr. Tokas
8 clarified that his presentation was a forecast based on the information submitted
9 already. He said OSHPD intends to issue notices prior to the deadline.

10
11 Committee members asked if the results of the SB 499 reports had been posted. Mr.
12 Tokas replied that OSHPD was scrutinizing the reports again before posting the
13 information. He added that OSHPD can also provide detailed information to facility
14 owners who have questions about how their status was determined.

15
16 Mr. La Brie expressed reservations about posting information that was so speculative.

17 Mr. Tokas clarified that there was no requirement to post the report results. Committee
18 members discussed the sensitivity of the information and noted it could be best utilized
19 in discussions between OSHPD and facility owners. Mr. Tokas observed that showing
20 OSHPD's analysis of the reports will make facility owners take the report more seriously
21 and provide more complete data next time.

22
23 Ms. Wied stated that OSHPD will make the SB 499 report analysis and underlying
24 documents available to facility owners and members of the public who request them.

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Mr. Tokas displayed charts and graphs showing compliance rates for different kinds of hospital facilities in California.

Mr. La Brie asked committee members if they found any of the results surprising. He commented that hospitals could be reporting status information accurately. Committee members indicated they were not surprised with the outcome. Mr. Tokas pointed out the numbers are similar to those in the SB 1661 reports. Mr. La Brie said he had no reason to question the validity of the algorithms used or the data. Mr. Scheuerman agreed, and noted that the study validates what the industry is seeing.

Additional SB 499 Report Information

Mr. Tokas suggested discussing what improvements can be made in the next report. He proposed taking existing tools and making them better, incorporating lessons learned, and soliciting more feedback on the ease and usefulness of the reports.

Mr. Roger Richter said Mr. Paul Coleman has been talking about the SB 499 report results in recent presentations. Mr. Tokas clarified that OSHPD only interprets what is submitted, but facility owners need to gather appropriate data, fill in the reports, and submit the information, and the quality of the reports varies considerably.

Mr. Richter commented that the governor is considering urgency legislation now that provides additional extensions, but the legislative staff requested further data before moving forward.

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Mr. Scheuerman recalled that the purpose of SB 499 was to advise the Legislature so they are better able to consider future legislation pertaining to extensions. He noted that the issue becomes moot if SB 90 is adopted in its current form. He asked of what value the information was to the Legislature in considering additional extension legislation.

Mr. Tokas said the primary focus of SB 499 is determining the status of compliance.

Mr. Scheuerman pointed out that knowing the status was supposed to inform legislators' decisions on future extension proposals like SB 90. Ms. Wied observed that SB 90 indicates that hospitals will still need to comply with the reporting requirements of SB 499.

Mr. La Brie asked if the committee should take some action in response to the information submitted. Mr. Brett Beekman indicated that he would be discussing some potential tasks for the committee as part of his presentation.

Committee members thanked Mr. Tokas for his presentation.

Mr. Beekman said his presentation would focus on potential enhancements to the report, changes in the report format, and additional lessons learned that should be incorporated in the next reporting cycle.

1 Mr. Beekman said OSHPD is concerned that some hospitals reported on plans for
2 projects that will not be completed on time unless substantial progress is made. To
3 ensure that hospital projects move forward at a reasonable pace, staff recommends
4 requiring hospitals to meet certain milestones and timelines. He noted that with this
5 data, the algorithms could be adjusted to better define the potentially compliant group.
6 Mr. Beekman acknowledged that this capability is lacking in VSI or HAZUS-based
7 projects.

8
9 Mr. Tokas commented that knowing the actual compliance status allows a more
10 beneficial and appropriate classification for each building.

11
12 Committee members expressed support for specifying milestones. Mr. Beekman
13 indicated that OSHPD will use standard milestones and timelines similar to those in SB
14 499 and SB 1661. Mr. La Brie indicated he was less comfortable with fixed timelines
15 than with milestones.

16
17 Mr. Michael Osur commented that hospitals should have an opportunity to report
18 addition of new beds to offset bed losses in SPC-1 buildings. Mr. Tokas clarified that
19 SB 499 does not require hospitals to report new beds. Committee members noted that
20 overall trends would show whether the number of beds increases or decreases over
21 time.

22
23 Mr. Schaefer pointed out that OSHPD will not be setting fixed timelines as much as
24 estimating how long various phases of a project are likely to take. Mr. Beekman noted

1 this information would be asked for each project number identified in the report.
2 Committee members agreed that OSHPD should request data about milestones and
3 timelines in the next report.
4

5 Mr. Beekman observed that the reports called for 2008, 2009, and 2010 data, but the
6 submission deadline was November 1, so the 2010 data was incomplete. To correct
7 this in the next report cycle, he said, the staff suggests using current service and unit
8 data, skipping a year, and then asking for 2011 data in 2012. Mr. Scheuerman
9 expressed support for this idea.
10

11 Mr. Beekman said he would have the draft changes ready for the committee's review at
12 the next meeting. He suggested that the committee view the entire report online.
13

14 **Next Report Format/Lessons Learned**

15 Mr. Beekman said reporting facilities will find their draft reports already populated with
16 the data they provided before, and users can update or modify fields as they choose.
17

18 Mr. Beekman advised that OSHPD was in the process of changing its bookkeeping from
19 old log books to a new Acella system, and the building numbering system will be
20 changed as a result. He said the system will show both old and new numbers.
21

22 Mr. Beekman noted that based on feedback from users, OSHPD changed the report
23 format to allow overwriting of data, locking data at certain stages, adding or removing

1 buildings, updating of contact lists, and clearer definitions of Building Resolution
2 terminology.

3

4 One participant advocated more OSHPD staff preparation and communication before
5 issuing the new format. Mr. Beekman recognized that OSHPD needs to provide more
6 extensive instructions in its “Help” pages.

7

8 Mr. Scheuerman recommended providing hospital owners with OSHPD’s analysis of
9 each facility before they prepare their next reports.

10

11 Committee members agreed to finish the agenda without taking a lunch break.

12

13 Mr. Tokas said the next version of the report will be much easier for users. He noted
14 data can be replaced and modified numerous times before submitting the final report.
15 He advised that the staff will be reviewing the reports to check data and identify
16 discrepancies, so the quality of the data will improve in the second cycle.

17

18 Mr. Tokas and Mr. Beekman welcomed committee feedback on the proposed
19 augmentations to the SB 499 reports. Committee members expressed general support
20 for the changes identified.

21

22 One individual recommended some targeting beta-testing of the next report before
23 circulating it widely. Mr. Tokas confirmed that OSHPD plans to follow that course.

24

1 Committee members thanked Mr. Beekman for his presentation.

2

3 Mr. Tokas advised that OSHPD staff will demonstrate the revised report at the next
4 meeting.

5

6 **Comments from the Public/Board Members on Issues not on this Agenda**

7 There were no other issues brought to the committee's attention.

8

9 Committee members expressed their appreciation to the staff for their excellent work.

10

11 **Adjournment**

12 **MOTION:** (M/S/C) [Karpinen/La Brie]

13 There being no further business, the committee voted unanimously that the meeting be
14 adjourned. The meeting was adjourned at 12:17 p.m.

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Office of Statewide Health Planning and Development

Hospital Building Safety Board

400 R Street, Suite 200
Sacramento, California 95811-6213
(916) 440-8446
Fax (916) 324-9118
<http://www.oshpd.ca.gov/Boards/HBSB/index.html>



March 4, 2011

HOSPITAL BUILDING SAFETY BOARD **Education Opportunities**

MEETING NOTICE

Tuesday, March 15, 2011**10:00 a.m. — 4:00 p.m.**

at the

Office of Statewide Health Planning and Development

400 R Street, Suite 452

Sacramento, CA 95811

(916) 440-8453

And, at the

Metropolitan Water District Headquarters

700 N. Alameda Street, Suite 2-546

Los Angeles, CA 90012

(213) 897-0166

Board Members:

Arlee Monson, Chair; Jay Elbettar, Vice-Chair;
John Donelan; Eric Johnson; Jeffrey Keaton; Poki Namkung;
Brian Spindler

OSHPD Staff:

Kevin Bertrand

HBSB Staff:

Linda Janssen, Executive Director; Evett Torres

MEETING AGENDA

NOTE: Agenda order is tentative and subject to change without prior notice.

All times are approximate and subject to change. A 30-minute
to one-hour lunch will be taken sometime during the day.

1. Welcome and Introductions

2. Review the “Best Practices for Project Management, Design, and Construction of Buildings Under OSHPD Jurisdiction” (Best Practices) manual (Download manual here: <http://www.calhospital.org/sites/chadocuments.org/files/file-attachments/HospitalBuildingBestPractices.pdf>)
 - Discussion and public input
3. Discuss needed updates and improvements to the “Best Practices” manual
 - Discussion and public input
4. Determine preliminary agenda for the next meeting of the Education Opportunities Committee
5. **Comments from the Public/Board Members on Issues not on this Agenda:**
The Board will receive comments from the public/members at this time on matters not on the agenda. Comments must be limited. Matters raised at this time will be taken into consideration for placement on a subsequent agenda.
6. **Adjournment**

REMINDER: Please call (916) 440-8453 on Monday, March 14, 2011, after 3:00 p.m. to confirm that the meeting will be taking place as scheduled. The recording will verify the meeting date and locations.

NOTE: Meeting facilities and restrooms are accessible to the physically disabled. If any special accommodations (assistive listening device, sign language interpreter, etc.) are needed, please contact Board Staff at (916) 440-8453. Requests should be made as soon as possible but no later than 10 business days prior to the meeting.

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Office of Statewide Health Planning and Development



Hospital Building Safety Board

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**MEETING REPORT
HOSPITAL BUILDING SAFETY BOARD (HBSB)**

Education Opportunities Committee

**Tuesday, March 15, 2011
10:00 a.m. - 4:00 p.m.**

Office of Statewide Health Planning and Development
400 R Street, Suite 452
Sacramento, CA 95811

and

Metropolitan Water District Headquarters
700 N. Alameda Street, Suite 2-546
Los Angeles, CA 90012

Committee Members Present

Arlee Monson, Committee Chair
Jay Elbettar, Committee Vice-Chair
John Donelan
Eric Johnson
Joe La Brie
Poki Namkung
Brian Spindler

OSHPD Staff

Kevin Bertrand
Gordon Oakley
David Neou

HBSB Staff

Eve Torres
Veronica Yuke

1 Welcome and Introductions



1 Mr. Arlee Monson, Committee Chair, called the meeting to order at 10:00 a.m. and
2 welcomed everyone. Participants in Sacramento and Los Angeles took turns
3 introducing themselves.

4

5 **Review the “Best Practices for Project Management, Design, and Construction of**
6 **Buildings Under OSHPD Jurisdiction” (Best Practices) Manual**

7 Mr. Monson proposed a two-tiered review process: first identifying essential edits that
8 should be made before disseminating the Best Practices Manual, and then discussing
9 more extensive revisions that will take more time.

10

11 Mr. Brian Spindler emphasized the importance of getting the document out so people in
12 the field can use it as soon as possible. He suggested posting the manual on the
13 OSHPD Website so users can download it. Mr. Spindler said he reviewed the manual
14 and noted that the section on the inspector of record does not appear to need much
15 revision at this point. He recommended making sure the references to code sections
16 and forms are correct and current.

17

18 Mr. Joe La Brie asked if OSHPD had obtained permission from California Healthcare
19 Foundation to edit and publish the manual. Mr. Roger Richter stated that he provided
20 Ms. Linda Janssen with the name of a contact person at the California Healthcare
21 Foundation about two weeks ago. He suggested developing a formal written release
22 clarifying that OSHPD has the rights to use the document. Mr. Richter said he was not
23 sure if Ms. Janssen had obtained an editable version of the manual yet. Mr. Monson
24 asked the staff to follow up with Ms. Janssen to confirm these details.

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Mr. Monson proposed deciding on an approach for compiling the edits and producing a revised document. After some discussion, committee members agreed to submit suggested edits to OSHPD staff for finalization.

Mr. Dave Foley noted that OSHPD's Website and electronic portal already provide considerable information on processes and procedures, so it might be helpful to build on that format and update it regularly. Mr. La Brie remarked that the Best Practices Manual could be published in sections dealing with various topics rather than as an entire book. Mr. Monson observed that the Best Practices Manual is currently in book form, and he suggested reviewing the document as a whole. He agreed that there were a variety of ways the information can be disseminated once the document is ready.

Ms. Noella Tabladillo said OSHPD will eventually be able to combine the Best Practices Manual with its electronic portal. She agreed with Mr. Monson that at this point, however, the committee should focus on creating an updated document for OSHPD to disseminate.

Mr. Monson recalled that at the last Board meeting, Mr. Paul Coleman expressed interest in having the committee update the manual to reflect the FDD programs and the processes that have changed since 2006. He suggested posting links in each section to provide more connectivity to OSHPD's Website information.

1 Mr. Spindler recommended setting immediate goals and long-term goals for the update
2 process. He proposed including a series of links at the beginning of each chapter so
3 users can find more details on specific topics.

4

5 **Discuss Needed Updates and Improvements to the Best Practices Manual**

6 Mr. Monson noted that the first section of the Best Practices Manual provides basic
7 information about OSHPD. Mr. La Brie suggested designating Mr. David Neou as the
8 liaison between the committee and OSHPD, and he asked Mr. Neou to edit the first
9 section. Mr. Neou said he would work with Mr. Gordon Oakley to update this portion of
10 the manual.

11

12 Mr. Monson observed that a good starting point would be to compare the verbiage in
13 this section to the wording on the OSHPD Website. He recommended expanding the
14 explanation of the plan review process.

15

16 A committee member noted there were some misspellings in the first section.

17

18 Mr. La Brie suggested adding brief descriptions of recent legislative changes such as
19 SB 499 and SB 1661.

20

21 The committee discussed how often the manual should be updated. Mr. Monson
22 cautioned that OSHPD has limited resources, so it would be helpful to have this work
23 done by the committee.

24

1 One participant recommended updating the manual every three years in conjunction
2 with code cycles. Mr. Monson remarked that more frequent updates might be helpful at
3 the start. Ms. Tabladillo said the most frequent changes would probably be legislation,
4 and those references could be updated by OSHPD staff as they happen.

5
6 After some discussion, the committee agreed to update the manual as needed. There
7 was general consensus that committee members and other individuals can make
8 suggestions for needed improvements as they arise, and they can either be handled by
9 OSHPD staff or referred to the committee for consideration. Mr. La Brie said he viewed
10 the Best Practices Manual as a long-term dynamic document.

11

12 Mr. Monson encouraged Mr. Neou to incorporate more information from the OSHPD
13 Website, including an explanation of the rapid review process, the electronic portal, and
14 links to frequently asked questions.

15

16 Mr. La Brie commented that OSHPD's structure was currently being reorganized, so
17 some of that description may change in the near future. Mr. Monson recommended a
18 simple and broad update of the information about OSHPD's structure, and he
19 suggested conferring with Mr. Coleman about that section.

20

21 Mr. La Brie drew attention to the second sentence under Section 1.6 on Page 1-4 and
22 questioned the need to refer to Title 22. He suggested keeping the emphasis on Title
23 24 and making as few references to Title 22 as possible. Other committee members
24 agreed. Mr. Richter noted there are additional references to Title 22 in the section on

1 licensing and accreditation, and he recommended replacing those with more general
2 statements and links to the code. One participant noted it would be helpful to explain
3 the importance of complying with both OSHPD and licensing regulations. Another
4 person commented that there are additional life safety requirements imposed by
5 Medicare and Medicaid that users need to be understand.

6
7 Mr. La Brie suggested assigning particular people to review each section of the manual.
8 Committee members expressed support for this approach. Mr. La Brie cautioned that
9 no more than two committee members should meet at a time to avoid problems with
10 open meeting laws.

11
12 Ms. Poki Namkung asked if the editors had to be committee members. Mr. Richter
13 described how the original document was developed by subcommittees. Mr. Monson
14 said he envisioned small groups reviewing each section and submitting edited versions
15 that could be posted electronically so other interested people can submit their own
16 comments and suggestions.

17
18 Mr. La Brie volunteered to help Mr. Neou and Mr. Oakley with the revisions to Section 1.

19
20 Mr. Monson and Mr. La Brie offered to help with Section 2, dealing with design and
21 plan review. Mr. Johnson said he would assist with life safety aspects of that section.
22 Mr. Richter recommended including comments on structural requirements in the design
23 section.

24

1 Mr. La Brie commented that there was a Hospital Building Safety Board committee a
2 few years that produced a document on pre-approvals of equipment. He offered to
3 send Mr. Monson a copy of that document. Mr. Monson observed that the updated
4 manual should include information on seismic certification, standard details, and pre-
5 approvals.

6

7 Mr. Spindler and Mr. John Donelan volunteered to review Section 3, pertaining to
8 inspectors of record.

9

10 Participants suggested involving Mr. Brian Coppick and Mr. Gary Dunger in the review
11 of particular sections. Committee members noted that OSHPD representatives should
12 participate in editing provisions pertaining to OSHPD policies.

13

14 Mr. La Brie offered to edit Section 4, dealing with testing, inspection and observation
15 best practices. He said he had a copy of the original version of this section to use as a
16 basis for editing. Mr. Spindler volunteered to help.

17

18 Mr. Spindler volunteered to help edit Sections 5 and 6. Mr. La Brie offered to assist with
19 Section 5. Mr. Richter suggested asking Mr. Carl Scheuerman to help edit Section 6.

20 Ms. Tabladillo recommended involving Mr. Scott Bell as well.

21

22 Mr. La Brie asked Mr. Neou to help incorporate information on special seismic
23 certification.

24

1 **Determine Preliminary Agenda for the Next Meeting of the Education**

2 **Opportunities Committee**

3 Mr. Monson noted that a draft version of the updated Best Practices Manual should be
4 ready for the committee to review at the next meeting. He asked the members of the
5 working groups to confer and discuss proposed changes for each section to submit to
6 OSHPD for compilation.

7
8 Mr. Monson reviewed the individuals assigned to review each section:

9 Section 1: Mr. Neou, Mr. Oakley, Mr. La Brie, Mr. Donelan

10 Section 2: Mr. Monson, Mr. Johnson, Mr. La Brie, Mr. Neou, Mr. Donelan

11 Section 3: Mr. Spindler, Mr. Donelan, Mr. Dunger, Mr. Riley

12 Section 4: Mr. Spindler, Mr. La Brie, Mr. Riley

13 Section 5: Mr. Spindler, Mr. La Brie

14 Section 6: Mr. Scheuerman, Mr. Bell, Mr. Riley

15

16 Mr. Monson said he would follow up with Ms. Janssen to arrange for OSHPD to obtain
17 an editable copy of the manual and legal publication rights.

18

19 Mr. Monson noted the next committee meeting was scheduled for May 18. He said the
20 staff will make the necessary arrangements and send confirmation emails to all
21 participants.

22

23 Committee members discussed future plans for releasing and promoting the updated
24 Best Practices Manual.

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Mr. La Brie reported that he received an email notification from LinkedIn about an OSHPD Best Practices working group. He suggested finding out more about this group and enlisting its help in disseminating information.

Mr. La Brie suggested formulating some overall goals for the editing process. He proposed using as few words as possible. Ms. Namkung said she liked the idea of keeping the manual short and easy to read. Mr. La Brie agreed, and he proposed keeping the bulleted format and incorporating graphics wherever possible. Mr. Monson recommended using links to other sources of information; he noted that OSHPD’s Website should provide details and information not spelled out in the Best Practices Manual.

Mr. La Brie questioned the need to include a list of people who worked on the document. Mr. Richter expressed his opinion that the recognition in the original document served that purpose. Mr. La Brie proposed identifying the document as a joint product of the Hospital Building Safety Board, OSHPD, and interested public members who participated.

Comments from the Public/Board Members on Issues not on this Agenda

Mr. La Brie asked if the recent earthquake and tsunami in Japan presented any educational opportunities the committee should publicize for California hospitals. Mr. Monson said he was working closely with Degenkolb engineers to obtain data from Japan that would help structural engineers better understand the performance of high-

1 rise buildings. He added that he had a couple reports from past earthquakes that might
2 be useful in outreach efforts.

3
4 Ms. Namkung stated that public health people in California have been inundated with
5 calls from the public asking for advice about protection from radiation. She noted that
6 counties with nuclear reactors are required to have detailed response plans and
7 stockpiles of potassium iodide, but other counties might consider developing safety
8 plans as well. She clarified that potassium iodide will only protect people within a 12-
9 mile radius of a nuclear reactor. For this reason, Ms. Namkung recommended not siting
10 hospitals within 30 miles of any nuclear reactors.

11
12 Mr. La Brie observed that significant tsunami damage was reported in Santa Cruz and
13 Crescent City, but it is uncertain as to whether any hospitals were impacted. He
14 suggested looking at OSHPD's provisions pertaining to hospital safety to make sure
15 these kinds of hazards are addressed.

16
17 Ms. Namkung commented that it might be prudent for California hospitals to develop
18 plans for mass decontamination, an issue for OSHPD's consideration.

19
20 Mr. La Brie offered to talk with Mr. Coleman about whether the Board could play a role
21 in disseminating information on this topic.

22

1 Mr. Richter noted that the California Department of Public Health distributed a list of
2 frequently asked questions to provide advice to hospitals and local public health
3 departments regarding radiation exposure.

4

5 Mr. Richter said that based on conversations with engineers in California, it appears that
6 Japanese hospitals remained standing after the earthquake, although some functionality
7 was impaired. He added that Japan does not focus on nonstructural components in
8 hospitals or schools, but structural standards are higher than OSHPD's.

9

10 Mr. Johnson reported hearing about failures of backup generators and fuel supplies
11 because of tsunami inundation. He noted that California's backup requirements are
12 intended to provide seismic safety, but they might not address other hazards.

13

14 Mr. Monson said he heard a radio report about Japan's well developed emergency
15 plans. He observed that it will be interesting to learn how well the plans were
16 implemented in the wake of the recent disasters.

17

18 Committee members expressed interest in finding out more about the performance of
19 Japanese hospitals and the lessons they learned. Mr. La Brie offered to confer with Mr.
20 Coleman about ways the committee might help. He commented that California's
21 requirements are probably rigorous enough right now, but enforcement could be
22 improved.

23

1 Mr. Spindler said he spoke at a seminar recently and solicited suggestions about what
2 OSHPD could do to facilitate education and training. He noted that one idea was for
3 OSHPD to have regular Podcasts highlighting new policies and programs. Mr. Monson
4 expressed support for this idea.

5

6 **Adjournment**

7 **MOTION:** (M/S/C) [Johnson/La Brie]

8 There being no further business, the committee voted unanimously that the meeting be
9 adjourned. The meeting was adjourned at 12:00 noon.



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5/6/11

HOSPITAL BUILDING SAFETY BOARD
Education Opportunities Committee Meeting**MEETING NOTICE****Wednesday, May 18, 2011****10:00 a.m. — 4:00 p.m.**

at the

Office of Statewide Health Planning and Development

400 R Street, Suite 452

Sacramento, CA 95811

(916) 440-8453

And, at the

Metropolitan Water District Headquarters

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Los Angeles, CA 90012

(213) 897-0166

Board Members:Arlee Monson, Chair; Jay Elbettar, Vice-Chair;
John Donelan; Eric Johnson; Jeffrey Keaton; Poki Namkung;
Brian Spindler**OSHPD Staff:**

Gary Dunger; David Neou; Gordon Oakley

HBSB Staff:

Linda Janssen, Executive Director; Evett Torres

MEETING AGENDA**NOTE:** Agenda order is tentative and subject to change without prior notice.All times are approximate and subject to change. A 30-minute
to one-hour lunch will be taken sometime during the day.

- 1. Welcome and Introductions**
- 2. Review the March 15, 2011 Meeting Report**
 - Discussion and public input

3. **Best Practices Manual- Section 1: Introduction —Joseph La Brie**
 - Review and discussion of proposed revisions
 - Discussion and Public Input
4. **Best Practices Manual- Section 6: Hospitals —Bob Reilly**
 - Review and discussion of proposed revisions
 - Discussion and Public Input
5. **Best Practices Manual- Section 3: IOR —Brian Spindler**
 - Review and discussion of proposed revisions
 - Discussion and Public Input
6. **Best Practices Manual- Section 4: Test, Inspection and Observation —Joseph La Brie and Brian Spindler**
 - Review and discussion of proposed revisions
 - Discussion and Public Input

Lunch Break

7. **Discussion about Best Practices Manual format and organization**
 - Discussion and Public Input
8. **Best Practices Manual- Section 5: Field Staff —Bob Reilly and Joseph La Brie**
 - Review and discussion of proposed revisions
 - Discussion and Public Input
9. **Best Practices Manual- Section 2: Plan Design and Approval**
 - a. General and Architectural —Arlee Monson
 - b. Fire and Life Safety —John Donelan
 - c. Structural and SSC —Joseph La Brie and David Neou
 - d. MEP —Eric Johnson
 - Review and discussion of proposed revisions
 - Discussion and Public Input
10. **Best Practices Manual- Glossary and References**
 - Review and discussion of proposed revisions
 - Discussion and Public Input
11. **Summary of Action Items and determine agenda for the next Education Opportunities Committee meeting**
 - Discussion and Public Input

12. Comments from the Public/Board Members on Issues not on this Agenda:

The Board will receive comments from the public/members at this time on matters not on the agenda. Matters raised at this time will be taken under consideration for placement on a subsequent agenda.

13. Adjournment

REMINDER: Please call (916) 440-8453 on Day, Day Before, after 3:00 p.m. to confirm that the meeting will be taking place as scheduled. The recording will verify the meeting date and location.

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Questions? Call Board Staff at the above phone number.

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**MEETING REPORT
HOSPITAL BUILDING SAFETY BOARD (HBSB)**

Education Opportunities Committee

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Office of Statewide Health Planning and Development
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and

Metropolitan Water District Headquarters
700 N. Alameda Street, Suite 2-546
Los Angeles, CA 90012

Committee Members Present

Arlee Monson, Committee Chair
John Donelan
Joe La Brie
Robert Omens
Brian Spindler

OSHPD Staff

Paul Coleman (arrived at 1:30 p.m.)
Gordon Oakley
David Neou

HBSB Staff

Linda Janssen
Kevin Bertrand



1 **Welcome and Introductions**

2 Mr. Arlee Monson, Committee Chair, called the meeting to order at 10:00 a.m. and
3 welcomed everyone to the meeting. Participants in Sacramento and Los Angeles took
4 turns introducing themselves.

5
6 **Review the March 15, 2011 Meeting Report**

7 Mr. Monson summarized highlights of the March 15 committee meeting.

8
9 **MOTION:** (M/S/C)

10 The committee voted unanimously to approve the March 15 meeting minutes as
11 presented.

12
13 **Best Practices Manual - Section 1: Introduction**

14 Mr. Monson proposed reviewing the edited version of the Best Practices Manual section
15 by section. He asked participants to forward additional comments and suggestions to
16 Ms. Linda Janssen so they can be reviewed and incorporated in the revised document.

17
18 Ms. Janssen proposed finishing the document by the full Board meeting in October, and
19 committee members expressed support for this goal.

20
21 Mr. Joe La Brie advised that he has been focusing on Section 4 of the Best Practices
22 Manual. He said he planned to work on the other sections assigned to him before the
23 next meeting.

24

1 Mr. Monson recommended updating Section 1, Introduction, to reflect changes at
2 OSHPD and FDD, including the Rapid Review Unit, the Website, recent legislation, and
3 the list of Frequently Asked Questions. He noted it would be helpful to include a brief
4 explanation about the general process of working with OSHPD. Mr. La Brie said he
5 would revise Section 1 to incorporate those topics.

6

7 **Best Practices Manual - Section 6: Hospitals**

8 Mr. Bob Riley presented his edited version of Section 6 and explained the changes he
9 was proposing. Committee members expressed support for Mr. Riley's revisions.

10

11 Mr. Roger Richter recommended posting an edited .pdf file of each section on the
12 Website so members of the public and interested parties have a chance to provide
13 input. He acknowledged that OSHPD will have the final say over what is ultimately
14 incorporated in the final product.

15

16 The committee discussed the editing process. They suggested that Ms. Janssen
17 compile the revisions and create a .pdf document for each section showing the
18 proposed changes, and then posting those documents on the Website. Mr. Monson
19 recommended notifying people on the list that the revised manual was available for
20 comments.

21

22 Ms. Noella Tabladillo observed that there should be a clear explanation of the editing
23 process and timelines.

24

1 Mr. David Foley commented that it would helpful to have an editable Word version. Ms.
2 Janssen expressed concern about maintaining control over the edits. She suggested
3 posting a read-only document so people can save and edit the document without
4 changing the original on the Web, and participants expressed support for this approach.

5
6 Mr. Monson noted the next committee meeting will be held in two months, so people will
7 have ample time to review the drafts and submit comments. Committee members
8 recommended setting a comment deadline two weeks before the next meeting.

9
10 Mr. Monson observed that the committee will be discussing the format and organization
11 of the Best Practices Manual after lunch. He suggested keeping this in mind while
12 reviewing the sections and then deciding what would be the best format overall. He
13 advocated a consistent treatment throughout the document, and committee members
14 agreed.

15
16 Mr. Richter noted that Section 6 was organized around the numbered list of best
17 practices, but this format might not work as well for other sections.

18
19 Mr. Monson suggested changing the title of this section to say “Hospital Owners.” One
20 participant pointed out that the users of the document are likely to be consultants, not
21 hospital owners. Mr. Monson observed that Section 6 specifically targets hospital
22 owners. He noted that the rest of the book is designed for a wider audience, as
23 reflected in its full title.

24

1 **Best Practices Manual - Section 3: IOR**

2 Mr. Brian Spindler reviewed his edits for Section 3. He explained that text highlighted in
3 red is to be deleted, green is to be moved, and yellow is added. He clarified that he was
4 only proposing deletion of redundant language.

5
6 Referring to Subsection 3.1, Item 2, Mr. La Brie suggested deleting “as appropriate”
7 from the first sentence. A participant proposed adding POR to the titles defined in Item
8 2. The committee considered whether to use POR (Professional of Record) or DPOR
9 (Design Professional of Record). After some discussion, there was general consensus
10 that whatever terminology is used should be consistent throughout the document.

11
12 Mr. Dave Foley clarified that IOR’s are not actually approved or hired by the design
13 professional; rather, the design professional recommends a particular IOR to the owner
14 and OSHPD. Committee members proposed changing the language in the first line of
15 Item 2 to say “interviewed and recommended” instead of “interviewed and approved.”
16 Mr. Gordon Oakley observed that the design professional and owner both sign off on
17 the IOR’s application. After further consideration, the committee decided to leave the
18 language as proposed by Mr. Spindler.

19
20 Mr. Spindler indicated that he inserted additional language to Subsection 3.4 to clarify
21 the IOR’s principal duties as defined in the current code. He said the text highlighted in
22 red was in the old code. He noted that the text highlighted in green should be moved to
23 “Additional Duties” instead of “Principal Duties.” Mr. Spindler referred to the language
24 added at the end of Subsection 3.4 pertaining to logs and records and courtesy notices.

1 Referring to Subsection 3.4.2, Item 1.b., Mr. Spindler questioned whether there should
2 be any reference to IB's and CO's. Mr. La Brie said he used the term "amended
3 construction documents," consistent with the CAN. Committee members agreed to use
4 "amended construction documents" throughout.

5
6 Mr. Spindler said Items 3 through 6 of Subsection 3.4.2 clarify points regarding to
7 deferred approvals, project specifications, and what should be incorporated in the
8 record set. He reviewed and discussed the other deletions and additions he was
9 proposing.

10
11 A participant noted that the CAN references should be updated to the 2010 code rather
12 than the 2001 code.

13
14 Mr. La Brie recalled that there was a 2009 code amendment requiring IOR's to issue
15 daily reports. Mr. Spindler indicated that this point was captured under "Principal
16 Duties." He said the body of the text also includes information about what should be
17 included in the daily report.

18
19 Participants noted that the Best Practices Manual has been a useful tool for design
20 professionals, owners, and project managers to guide them through the process of
21 working with OSHPD. Mr. La Brie asked if a distinction should be made between
22 practices that apply to OSHPD 1 and OSHPD 2 buildings. Committee members
23 observed that the Best Practices Manual is geared toward OSHPD 1 projects.

24

1 **Best Practices Manual - Section 4: Test, Inspection and Observation**

2 Mr. La Brie drew attention to the edited version of Section 4. He said he believed this
3 section was ready to be released for comments and approved by the committee at the
4 next meeting. He read and explained the rationale for each of the changes proposed.

5
6 Mr. Foley noted that some of the introductory language in this section might be helpful
7 at the beginning of the overall manual or at the beginning of each section.

8
9 Committee members recommended deleting the beginning of Section 4.2 identifying the
10 manual as the committee's work product.

11
12 Mr. Bob Loomis questioned the use of "POR," and the committee decided to check with
13 OSHPD about the preferred acronym.

14
15 In reviewing Subsection 4.5, Instruments, Mr. La Brie questioned whether anyone used
16 TIO management consultant, and he proposed eliminating the fourth sentence in that
17 paragraph referring to consultants. Ms. Tabladillo noted that some small hospitals
18 might use consultants. Mr. La Brie said he would highlight that language as being
19 deleted unless any comments were received indicating otherwise.

20
21 Ms. Kim Irving observed that IOR's, not design professionals, typically manage the TIO
22 process. Mr. Spindler said the code actually assigns much of that responsibility to the
23 design professional of record. Mr. La Brie noted that ideally, as a best practice, the IOR
24 and design professional should be working together. After some discussion, committee

1 members recommended inserting a comment clarifying the respective responsibilities of
2 design professionals and IOR's.

3

4 Mr. La Brie said the added language in Subsection 4.6, Contract Drawings, comes
5 directly from the CAN.

6

7 Mr. La Brie welcomed feedback as to whether a title page should be recommended as a
8 best practice. He said most people just use the forms they download from the OSHPD
9 Website. There was general consensus that the title page should be eliminated as a
10 best practice. Committee members proposed also eliminating the recommendation to
11 provide a table of contents. Mr. La Brie said he would add language explaining that the
12 OSHPD forms can be used as a checklist, but the format and contents of the TIO
13 should be tailored to each specific project.

14

15 One participant emphasized the importance of having the same project name on the
16 TIO as on the drawings and specifications.

17

18 Committee members agreed it would be helpful to provide instructions clarifying the
19 respective roles of the design professional and IOR. Ms. Tabladillo recommended
20 providing a bulleted format for the sample instructions.

21

22 Mr. Riley expressed support for the language in Subsection 4.10 recommending a
23 directory of the people involved in the TIO. Committee members agreed that including
24 a directory should be cited as a best practice. Mr. John Donelan suggested adding a

1 comment that revisions to the directory are not considered material alterations to the
2 project that would require additional approval.

3

4 With respect to Subsections 4.10.1 through 4.10.7, Mr. Omens proposed providing a
5 single bulleted list of definitions rather than the separate sections. Other committee
6 members agreed.

7

8 Mr. La Brie reviewed and discussed the proposed text for each definition.

9

10 Participants asked about the “Test and Special Inspection” form mentioned in
11 Subsection 4.10.3, and Mr. Gordon Oakley said he would send a copy of the form to
12 Ms. Janssen for distribution to committee members.

13

14 There was general consensus that the word “shall” should be avoided unless the text
15 referred to something required by code.

16

17 With respect to the last sentence in Subsection 4.10.7, Mr. Monson recommended
18 changing “milestones or intervals” to “milestones and/or intervals.” Participants agreed
19 to add “in general responsible charge” after “POR” in the first sentence.

20

21 Reviewing Subsection 4.13, committee members discussed use of intervals in addition
22 to milestones. They suggested adding “and intervals” to the title and throughout that
23 section. Mr. La Brie proposed deleting the last sentence.

24

1 Mr. La Brie read the remaining sections, and committee members approved his
2 proposed revisions.

3
4 Mr. Donelan pointed out that the examples refer to outdated CAN's. Mr. La Brie
5 proposed eliminating those examples, and committee members agreed. Participants
6 recommended including a link to the OSHPD form on the Website instead.

7
8 Committee members thanked Mr. La Brie for his hard work on this section.

9
10 At 12:30 p.m., the committee recessed for lunch. Mr. Monson reconvened the meeting
11 at 1:15 p.m.

12
13 Noting that a quorum was present, Mr. Monson recommended approving the March 15
14 minutes again.

15
16 **MOTION:** (M/S/C) (La Brie/Donelan]

17 The committee voted unanimously to approve the March 15 meeting minutes as
18 presented.

19
20 **Discussion about Best Practices Manual Format and Organization**

21 Mr. Monson said the committee made suggestions earlier about using bullet points,
22 keeping the numbering of the document as simple as possible, and making every
23 section look similar.

24

1 Ms. Tabladillo asked whether the format used in Section 6, highlighting best practices,
2 should be used consistently throughout the document. Mr. Monson expressed his
3 opinion that it would be helpful to identify best practices in each section.

4
5 Mr. Riley said he preferred the format in Section 4 with separate decimal numbers for
6 each subsection. Mr. Monson agreed, but observed that the decimal numbering can
7 become confusing when there are multiple subsections under a particular heading.

8
9 **Best Practices Manual - Section 5: Field Staff**

10 Mr. Riley presented his edited version to Section 5. He displayed a redlined version on
11 the screen and explained each proposed revision.

12
13 Mr. La Brie suggested inserting a code reference defining “materially alter” after the
14 seconded bulleted item in Subsection 5.1.

15
16 Mr. Paul Coleman noted that field changes that do not materially alter a project still
17 need to be brought to the attention of the field staff for field confirmation. He said this
18 point was included in the FREER manual, and he advocated incorporating this concept
19 in the Best Practices Manual as well. He observed that the Best Practices Manual can
20 eventually replace the FREER manual altogether. As a best practice, Mr. Coleman
21 suggested recommending a log to track all changes on a project.

22
23 Mr. Spindler proposed adding check boxes on the RFI to indicate changes that do not
24 materially alter a project. Mr. Riley said he would incorporate this in Section 5.

1 Mr. La Brie stated that he would review this section in more detail after the meeting and
2 forward additional revisions to Ms. Janssen.

3

4 Mr. Coleman noted that the TIO and IOR sections of the Best Practices Manual should
5 include advice about working with the field staff in those areas.

6

7 **Best Practices Manual - Section 2: Plan Design and Approval**

8 a. General and Architectural

9 Mr. Monson reviewed his proposed edits to the General and Architectural portions of
10 Section 2. He said he added a preamble about the role of design professionals to lead
11 into the text regarding construction drawings and documents. He noted that the text
12 after his proposed insert goes on to describe the contents of drawings and submittals in
13 more detail.

14

15 Participants asked Mr. Coleman about use of the POR acronym. Mr. Coleman
16 recommended checking with other OSHPD staff. He said he preferred “design
17 professional of record (DPOR).” Committee members noted that there are
18 professionals other than architects and designers who are involved in some aspects of
19 projects. After some discussion, the committee decided to use “POR” throughout the
20 document and define the term in the glossary.

21

22 Mr. Donelan suggested adding more of a roadmap to guide readers to appropriate code
23 sections.

24

1 Mr. Coleman clarified that OSHPD staff is not required to complete its review of
2 documents within 48 hours. He said review times change according to staffing and
3 resources, and he recommended not specifying any specific time periods. Mr. Coleman
4 added that OSHPD's Website provides more details about the time frames people can
5 expect.

6
7 Mr. Monson asked whether the information about the Rapid Review process should be
8 included. Mr. Coleman stated that rapid review is based on the dollar amount of a
9 project, not review time. He suggested working with the staff to refine that section to
10 reflect actual practice. He proposed giving general descriptions of OSHPD programs
11 and referring people to the Website for more information.

12
13 Mr. Riley commented that hospital owners and architects are sometimes unaware that
14 geotechnical reports need to be submitted far in advance. He recommended pointing
15 out this requirement in the best practices for owners. Mr. La Brie said owners also need
16 to know about environmental review requirements under the California Environmental
17 Quality Act (CEQA) and applicable CAN's. Mr. Monson commented that as he read
18 Section 2, he began thinking about creating a separate section alerting owners to issues
19 like geotechnical reports, school fees, CEQA, and other issues. He suggested that the
20 committee revisit this idea later.

21
22 Mr. Monson reviewed Subsection 2.2 and its subparts, pertaining to the contents of
23 project documents. A participant suggested referring to "title strip" rather than "title
24 block."

1 Committee members questioned whether the language about the intent of the plans and
2 specifications is required on drawings. After some discussion, Mr. Monson proposed
3 deleting that provision.

4

5 Mr. Donelan explained the distinction between references to CBSC and CBC. Ms.
6 Tabladillo recommended including those definitions in the glossary.

7

8 Mr. Monson proposed deleting the “Organization and Approach” text in Subsection 2.2.3
9 as redundant.

10

11 Ms. Tabladillo observed that Section 6 provides a clear definition of what is considered
12 a best practice and why, but Section 2 seems more ambiguous. Mr. Monson explained
13 that Section 2 is a bit different because it goes into detail about the documents
14 themselves, the scope of work, and issues warranting extra attention, and the target
15 audience is design professionals rather than hospital owners.

16

17 Mr. Monson recognized that these distinctions make consistent formatting throughout
18 the document a challenge. He commented that use of bullets rather than decimal
19 numbering, elimination of redundant general comments from the technical sections, and
20 reducing the graphics will help.

21

22 Mr. Monson reviewed Subsection 2.3.

23

24 b. Fire and Life Safety

1 Mr. Monson observed that the numbering system for the life safety section is confusing.
2 He said he planned to spend more time editing and simplifying this section. He recalled
3 that the intent was to go through the CBC and identify provisions that need to be
4 incorporated in the life safety drawings.

5
6 Mr. Monson suggested combining some parts of this section with other provisions
7 pertaining to working with local jurisdictions and CEQA. He noted that the purpose of
8 the standard graphics is to provide greater consistency in how these items are treated
9 on the plans, and he recommended not editing the graphics at this time.

10
11 Mr. Monson drew attention to the accessibility provisions. He suggested including more
12 drawings and eliminating some of the narrative text.

13
14 Mr. Donelan said the proposed revisions to the door schedule reflect current building
15 code language.

16
17 Mr. Monson noted the last part of Section 2 deals with equipment anchorage.

18
19 Mr. Monson observed that Section 2 needs to be expanded to address structural,
20 seismic certification, and MEP issues. He said Eric Johnson was interested in working
21 on the MEP provisions.

22

1 Mr. Spindler suggested adding some placeholder sections to be filled in later.
2 Committee members expressed support for this approach. Mr. La Brie noted it would
3 be helpful to outline the contents of the placeholder sections.

4
5 Mr. Donelan reported that he checked the drawings in Section 2. He said Sheet A.1
6 contains some obsolete references that need to be corrected, and Note 5 should be
7 revised to reflect current code and practices.

8
9 Mr. La Brie proposed simplifying the Best Practices Manual and releasing a revised
10 document as soon as possible. Other committee members agreed. Ms. Tabladillo
11 noted that the best practices manual serves a dual purpose of advising seasoned
12 professionals about the best ways of working with OSHPD and educating people new to
13 the field. She pointed out that this requires a balancing of technical details and general
14 narrative text.

15
16 **Best Practices Manual - Glossary and References**

17 Mr. Riley displayed an edited version of the glossary section on the computer screen
18 and reviewed his proposed changes. One participant cautioned that OSHPD will
19 probably update its terminology when the ePortal is fully implemented, so the document
20 may have to be revised again soon. Committee members agreed it was worthwhile to
21 revise the Best Practices Manual and release it to the field as soon as possible.

22
23 **Summary of Action Items, Agenda for Next Meeting**

1 Mr. Monson noted that Ms. Janssen will publish an edited read-only Word draft on the
2 Website for comments. He encouraged committee members to continue reviewing the
3 document and submitting additional revisions.

4

5 Ms. Janssen reminded committee members that the next meeting was scheduled for
6 July 20. She said she would have an edited version of the Best Practices Manual
7 available within two weeks.

8

9 Committee members agreed that all comments should be submitted by July 5.

10

11 **Comments from the Public/Board Members on Issues not on this Agenda**

12 There were no other issues brought to the committee's attention.

13

14 **Adjournment**

15 **MOTION:** (M/S/C)

16 There being no further business, the committee voted unanimously that the meeting be
17 adjourned. The meeting was adjourned at 3:30 p.m.

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Office of Statewide Health Planning and Development

Hospital Building Safety Board

400 R Street, Suite 200
Sacramento, California 95811-6213
(916) 440-8446
Fax (916) 324-9118
<http://www.oshpd.ca.gov/Boards/HBSB/index.html>



March 3, 2011

HOSPITAL BUILDING SAFETY BOARD
Standard Details Committee**MEETING NOTICE****Wednesday, March 16, 2011****10:00 a.m. — 4:00 p.m.**

at the

Office of Statewide Health Planning and Development

400 R Street, Suite 452

Sacramento, CA 95811

(916) 440-8453

And, at the

Metropolitan Water District Headquarters

700 N. Alameda Street, Suite 2-546

Los Angeles, CA 90012

(213) 897-0166

Board Members:Brian Spindler, Chair; Michael O'Connor, Vice-Chair;
Jay Elbettar; Bert Hurlbut; Joe La Brie; Arlee Monson**OSHPD Staff:**

Kevin Bertrand

HBSB Staff:

Linda Janssen, Executive Director; Evett Torres

MEETING AGENDA**NOTE:** Agenda order is tentative and subject to change without prior notice.All times are approximate and subject to change. A 30-minute
to one-hour lunch will be taken sometime during the day.**1. Welcome and Introductions**

2. Review the draft Standard Details for Partitions

- The intent of the Standard Details is for general use in OSHPD facilities throughout California. Pre-approved details can be used to expedite building design, and OSHPD's plan review and approval.
- Discussion and public input

3. Review the draft Policy Intent Notice which explains how the Standard Details can be used

- The Policy Intent Notice was drafted by the Standard Details Committee, with assistance from KPFF consultant, Dani Paxson
- Discussion and public input

4. Review and approve the draft Standard Details Instruction Manual

- The Instruction Manual will address how to use the Standard Details for initial plan review of projects and field use of the details that will accompany all Standard Details and future details
- Discussion and public input

5. Discuss how to proceed on the Standard Details for Ceilings

- Discussion and public input

6. Develop the process for approving future Standard Details

- Future Standard Details may include fastener capacity, expansion anchors, power-driven fasteners, and sheet metal screws
- Discussion and public input

7. Review and approve the meeting date schedule for 2011

- Discussion and public input

8. Comments from the Public/Board Members on Issues not on this Agenda:

The Board will receive comments from the public/members at this time on matters not on the agenda. Comments must be limited. Matters raised at this time will be taken into consideration for placement on a subsequent agenda.

9. Adjournment

REMINDER: Please call (916) 440-8453 on Tuesday, March 15, 2011, after 3:00 p.m. to confirm that the meeting will be taking place as scheduled. The recording will verify the meeting date and locations.

NOTE: Meeting facilities and restrooms are accessible to the physically disabled. If any special accommodations (assistive listening device, sign language interpreter, etc.) are needed, please contact Board Staff at

(916) 440-8453. Requests should be made as soon as possible but no later than 10 business days prior to the meeting.

Parking:

Sacramento—There are garages at 500 R Street and CalPERS Plaza. CalPERS Plaza has two entrances: one on Fifth Street, north of R Street; and another on Q Street, between Fourth and Fifth Streets. All three charge \$1.25/hour or \$12/day. There are also 10-hour parking meters around the perimeter of the building.

Los Angeles—There is valet service at the Metropolitan Water District Building that is available 8 am to 5 pm and they charge between \$6 and \$12 per day. There is also Five Star Parking lot on Cesar Chavez Avenue and Alameda Street that charges \$14/day or \$2.00 every 20 minutes.

Questions? Call Board Staff at the above phone number.

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Office of Statewide Health Planning and Development



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**MEETING REPORT
HOSPITAL BUILDING SAFETY BOARD (HBSB)**

Standard Details Committee

**Wednesday, March 16, 2011
10:00 a.m. - 4:00 p.m.**

Office of Statewide Health Planning and Development
400 R Street, Suite 452
Sacramento, CA 95811

and

Metropolitan Water District Headquarters
700 N. Alameda Street, Suite 2-546
Los Angeles, CA 90012

Committee Members Present

Brian Spindler, Committee Chair
Michael O'Connor, Committee Vice-Chair
Jay Elbettar
Bert Hurlbut
Joe La Brie
Arlee Monson
Dani Paxson, Consulting Member

OSHPD Staff

Brett Beekman
Elizabeth Wied, Legal Counsel

HBSB Staff

Eve Torres
Veronica Yuke

1 Welcome and Introductions



1 Mr. Brian Spindler, Committee Chair, called the meeting to order at 10:00 a.m. and
2 welcomed everyone. Participants in Sacramento and Los Angeles took turns
3 introducing themselves.

4

5 **Review the Draft Standard Details for Partitions**

6 Mr. Brett Beekman reported that OSHPD was finalizing an addendum to an existing
7 contract for third-party review of the partition standard details developed by KPFF, and
8 he estimated that process would be completed within the next two weeks. He said
9 OSHPD conducted an initial review in-house, and the staff will go through the packet
10 again to make sure all the latest edits have been incorporated before sending an
11 updated version with revised calculations to the contractor. Ms. Dani Paxson noted that
12 KPFF had provided a log of responses and linked items.

13

14 Mr. Spindler asked about the status of consulting members. Mr. La Brie responded that
15 Ms. Paxson had been added as a consulting member, and he welcomed her to the
16 committee.

17

18 Ms. Paxson expressed interest in participating in the meetings with the third-party
19 reviewers. Mr. Beekman said an informal kick-off meeting will be scheduled as soon as
20 the contract is in place. He noted that the group will meet again in April, May, and July.

21

22 Mr. La Brie recalled that the committee's goal was to complete this set of standard
23 details by the end of April. Mr. Spindler advised that Mr. Paul Coleman wanted to stick
24 to that original schedule as much as possible. Mr. La Brie suggested dividing the

1 package into two sections so the simpler parts could be completed and released quickly
2 while more difficult and time-consuming parts are being reviewed. Committee members
3 expressed support for this approach. Mr. La Brie questioned the need for third-party
4 review of the first increment. Mr. Beekman said the staff could start the process, but
5 third-party involvement was also important to ensure an independent review.

6

7 Participants proposed reviewing the 40 details to separate them into two groups.

8

9 Ms. Paxson emphasized the need for quality, cohesion, and coordination in whatever
10 product is released to the public. She pointed out that there are some significant
11 changes that have not yet been seen by OSHPD or the third-party reviewer, and she
12 estimated these revisions affected 85 to 90 percent of the details because they are
13 interrelated. She added that she would not feel comfortable releasing anything that
14 would be perceived as incomplete.

15

16 Mr. La Brie commented that OSHPD had been criticized for moving too slowly in this
17 process, but he recognized there were a number of factors that contributed to the delay,
18 including fiscal limitations and staffing constraints. He conceded that Ms. Paxson made
19 a good point about making sure the final product is cohesive and well integrated so it
20 can be used in the field.

21

22 Ms. Paxson suggested that the committee focus on other tasks in the interim, such as
23 finalizing the draft Policy Intent Notice (PIN). She recommended that the committee
24 work to develop a document explaining the process for approving future details. She

1 also proposed starting work on the ceiling details now instead of waiting for the partition
2 details.

3

4 Mr. Beekman advised that the PIN was nearly finished. He welcomed the committee's
5 feedback on the proposed Scope and Limits of the Standard Details document.

6

7 Mr. La Brie said he would start the ceiling details without further delay.

8

9 Mr. Bert Hurlbut recommended finalizing at least a few details so they can be
10 implemented in the rapid review process. He acknowledged that some preliminary
11 reviews of basic details would need to be done first, including the bottom track, top
12 track, and staples. He agreed with Mr. La Brie that it would be helpful to release a PIN
13 and some other products as soon as possible.

14

15 Ms. Paxson commented that it would be possible to separate out certain details, but she
16 questioned whether that kind of piecemealing would make sense, given the
17 interrelationship of all the details in the package.

18

19 Mr. La Brie suggested setting the end of May as a goal for completing the PIN, the
20 scoping document, and determining a process for introducing standard details in the
21 future. He proposed that the committee focus on these tasks now. Mr. Beekman said
22 OSHPD can ask the contractor to work on the general conditions first. Committee
23 members expressed support for this approach.

24

1 Mr. Beekman advised that the contractor expects to complete the review of the partition
2 details by mid-May, KPFF will respond to comments by the end of May, and the final
3 version will be ready for approval by June 30. He recognized that these dates could be
4 delayed by another four weeks. Given this schedule, the committee agreed that it
5 would make sense to handle the entire package as a whole rather than to try to
6 separate out certain details for earlier release.

7

8 Committee members expressed appreciation to Mr. Beekman and the KPFF team for
9 their work on the partition details. Mr. Spindler asked Ms. Paxson to walk the
10 committee through the details using the images on the screen.

11

12 Ms. Paxson reviewed and discussed highlights of the standard details. She noted the
13 document begins with an index listing the details, followed by a series of general notes,
14 and typical sections. She clarified that the entire package was developed for the 2007
15 California Building Code. She said updating the details to the 2010 code would
16 probably not require many changes. Mr. Beekman agreed that the impact would be
17 minimal. He added that OSHPD will eventually need to develop a separate package for
18 each code. He proposed releasing the 2007 version first and then working on the 2010
19 version.

20

21 Mr. Spindler recommended clearly labeling the package to identify the code used. Mr.
22 Beekman requested that KPFF to track all future changes, and Ms. Paxson confirmed
23 that changes will be tracked.

24

1 Ms. Paxson reviewed each of the standard details, pointing out significant features.

2

3 With respect to the last item in the general notes for ST0.3A, Mr. Spindler
4 recommended requiring that the architect of record verify the appropriate listing of all
5 wall assemblies rather than specifying UL. Ms. Paxson proposed inserting the word
6 “fire” in place of “underwriting laboratory.” Mr. Spindler recommended using “fire-
7 resistant rating.” Mr. Hurlbut suggested saying “fire-resistant and acoustical ratings,”
8 and other committee members approved this wording. Mr. Spindler noted the final
9 version should read: “Architect of record shall verify fire-resistant and acoustical ratings
10 for all wall assemblies.”

11

12 Referring to the previous page, Item 5, third line, Mr. O’Connor pointed out there were
13 some words running together that need to be separated.

14

15 Committee members recommended using “registered design professional of record” or
16 “RDP” instead of “architect of record” throughout the document. After some discussion,
17 they agreed to check the wording in the Administrative Code and to use the same
18 terminology in the PIN.

19

20 Mr. Beekman observed that the code references in the general notes will need to be
21 changed in the 2010 California Building Code (CBC) version.

22

1 Ms. Paxson reviewed and discussed the tables specifying shot pin capacities on Sheet
2 ST1.2A. Mr. La Brie questioned whether the reference to “powder driven” in Note 1 was
3 correct, and Ms. Paxson said she would check that spelling.

4
5 Mr. Arlee Monson asked if the pin manufacturer would have to be submitted for
6 approval. Ms. Paxson responded that the intent was for design professionals to show
7 ICC-ES or equivalent approval on any shot pins or expansion anchors used. Mr.
8 Monson recommended adding a Note 12 on the following page to clarify that the design
9 professional needs to substantiate that the fasteners used are acceptable to OSHPD.

10
11 Participants asked what “ASD values” in Note 2 on Sheet ST1.2A meant. Ms. Paxson
12 said the abbreviation stands for “allowable stress design” levels. Committee members
13 recommended spelling that out. They noted the same abbreviation occurs again in
14 Note 1 on Sheet ST1.3A.

15
16 Referring to the last line under Table 3, Mr. O’Connor suggested saying, “Comply with
17 general notes in Detail ST1.2B.” Ms. Paxson remarked that it would be better to
18 combine the notes on both pages into a single set of notes for these tables, and
19 committee members agreed.

20
21 Ms. Paxson pointed out that the section diagram shows a 6 ½-inch deck, an uncommon
22 size. She suggested showing a 6 ¼-inch deck instead.

23

1 A committee member noted the word “substrate” in Note 10 was misspelled. Another
2 person pointed out the word “reinforce” in Note 8 should be “reinforcement.”

3

4 Mr. Spindler recommended clarifying the intent of Note 8 was to avoid nicking or denting
5 ties and rebar. He observed that although nicking occurs frequently, the damage is
6 usually inconsequential, and Note 8 should tell what to do in those situations.

7 Committee members suggested adding, “Refer to design professional of record for
8 direction.” Ms. Paxson proposed saying, “Should this condition occur, design
9 professional of record shall be immediately notified.” Committee members approved
10 this addition.

11

12 Mr. Beekman emphasized the need to keep a record of the changes proposed by the
13 committee so they can be forwarded to the contractor. Ms. Paxson indicated she was
14 noting all the changes.

15

16 Referring to Sheet ST1.3A, committee members noted the word “meet” in the last line
17 under Table 3 was misspelled, and there were no “notes below.” Ms. Paxson said she
18 would correct the spelling error and check on the reference to “notes below.”

19

20 Mr. La Brie asked if the tables on Sheet ST1.3A indicated allowable values. Ms.
21 Paxson noted the intent of the tables is to specify minimum required approved design
22 values, not allowable values, a point that will be clarified in the notes. Mr. Spindler
23 explained that any values exceeding those specified were permissible. Ms. Paxson
24 recommended clarifying the title of that page as well.

1 Moving to Sheet ST1.3B, a participant asked if the interaction formula under the table
2 was supposed to be included. Ms. Paxson observed that inclusion of the formula on
3 that page seemed inconsistent with the other pages. She proposed adding a Note 10
4 saying, "For anchors subject to shear and tension, satisfy the following," and then
5 showing the formula. Committee members agreed it would be helpful to specify the
6 formula in a note. Ms. Paxson said she would verify the accuracy and appropriateness
7 of the formula.

8

9 Referring to Notes 7 and 8, Mr. Spindler recommended referring to OSHPD Code
10 Application Notices (CAN's) instead of ICC-ES because not all ICC-ES provisions are
11 acceptable to OSHPD. He pointed out that the appropriate CAN's are specified in Note
12 6.c on Sheet ST0.3.

13

14 Mr. Jay Elbettar observed that Note 9, referring to the manufacturer's technical guide,
15 may contradict Note 7, which specifies OSHPD's minimum standards for slab thickness.
16 He noted that the word "than" in the third line of Note 9 should be "then." Mr. Spindler
17 clarified that the manufacturer's technical guide provides advice about installation, while
18 the actual standards are defined in OSHPD's CAN. After some discussion, committee
19 members decided to delete Note 9 altogether.

20

21 Mr. La Brie pointed out that "ASD" in Note 2 on Sheet ST1.4 should be spelled out. Ms.
22 Paxson replied that "ASD" will be spelled out throughout the entire document.

23

24 Mr. Elbettar noted that "into" in the title of the table should be one word.

1 Mr. La Brie asked about the assumptions that led to the 6-inch center of gravity
2 measurement specified in Condition B on Sheet ST2.0. Mr. Monson commented that
3 typical shelf width is 12 inches. After some discussion, committee members concluded
4 that 7 inches maximum would be more appropriate. Ms. Paxson said she would make
5 that change to Condition B.

6
7 Committee members commented that the tables on Sheet ST2.1 were very helpful.

8
9 Mr. La Brie questioned why some of the cells in Tables 2, 3, and 4 were left blank. Ms.
10 Paxson said she would check those items. Mr. La Brie recommended adding a table
11 showing the correlation between SDS values and gauges. Other committee members
12 expressed support for including a correlation table. One participant noted that Note 2
13 on Sheet ST1.1 refers to gauge thickness instead of SDS nomenclature. Ms. Paxson
14 suggested putting the equivalency table on Sheet ST1.1.

15
16 Referring to Sheet ST2.1A, Mr. La Brie noted that there should be a space between
17 “O/C” and “AS FOLLOWS” in the line pertaining to the wall stud.

18
19 Ms. Paxson said the following sheet is a hand mark-up that will be given to the reviewer.
20 She clarified that this drawing and the KPFF logo will not appear in the final version.
21 She suggested moving this diagram to Sheet ST2.1A as an alternate. Committee
22 members expressed support for this approach.

23

1 Ms. Paxson proposed adding references to Sheet ST2.4 on Sheets ST2.1A and
2 ST2.1B.

3
4 Referring to Sheet ST2.1B, committee members clarified that “CM” meant center of
5 mass. Ms. Paxson said there should be box around the target in the drawing on the
6 right. Committee members suggested deleting the horizontal line connecting the two
7 sides.

8
9 Ms. Paxson pointed out the diagram on Sheet ST2.1B is entitled “Minor Attachments,”
10 but “minor” is not defined anywhere. Committee members proposed labeling that
11 diagram “Condition A - Cabinets or Equipment.”

12
13 Ms. Paxson clarified that this drawing applies to cabinets supporting up to 50 pounds of
14 equipment on either or both sides. Mr. Elbettar recommended clarifying these points
15 and using consistent wording throughout the document. Committee members referred
16 to the condition descriptions on Sheet ST2.0 and proposed using that terminology. Ms.
17 Paxson suggested referring to “cabinets or other mounted elements.” Mr. Beekman
18 recommended using “cabinet and/or equipment,” and committee members expressed
19 support for this wording.

20
21 At 12:00 noon, the committee recessed for lunch. Mr. Spindler reconvened the meeting
22 at 12:35 p.m.

23

1 Mr. La Brie disclosed that he had been appointed to the ICC-ES board. In order to
2 avoid any appearance of a conflict of interest, committee members agreed the
3 document should refer more broadly to “reports from OSHPD-approved testing
4 agencies” rather than “ICC-ES reports.” Ms. Paxson said she would make a global
5 change to eliminate all references to ICC-ES. She remarked that it would be better
6 mention this once in ST0.3 rather than repeating the reference in each individual detail.
7 Committee members eventually referred to the definition in Section 1702(a)(1) of the
8 Code and decided to mirror the code language.

9

10 Mr. La Brie noted that the notation for backing plate on Sheet ST2.2 refers to ST5.1 &
11 ST5.1, but the diagram looks like ST5.2. Ms. Paxson said the notations should refer to
12 both ST5.1 and ST5.2. After some discussion, the committee decided to just reference
13 ST5.1. Ms. Paxson proposed changing the wording to say “backing per” instead of
14 “backing plate.”

15

16 Mr. O’Connor recommended modifying Note 3 on Sheet ST5.1 to clarify the maximum
17 weight, and Ms. Paxson said she would check the appropriate weight limit and add it to
18 Note 3.

19

20 Ms. Paxson clarified that Condition C applies to floor-mounted cabinets.

21

22 Committee members noted that cabinet anchorage details were driven by allowable
23 screw values. Mr. La Brie proposed testing the recommended screw values on a shake
24 table to prove they can work effectively on cabinets mounted to drywall. One participant

1 suggested an alternative would be to specify #12 screws instead of #10. Committee
2 members expressed support for this approach.

3

4 Committee members noted the gypsum layer should be labeled on the diagram on
5 Sheet ST2.2.

6

7 Mr. Monson proposed developing a condition for cabinets with shelves wider than 12
8 inches. After some discussion, the committee decided to consider adding this as a
9 Condition D in the 2010 update.

10

11 Mr. O'Connor asked about the W1 and W2 values shown on the diagrams on Sheet
12 ST2.2. Ms. Paxson said she would check the values and clarify that W1 + W2 had to be
13 less than 38.

14

15 Mr. Elbettar recommended adding the words "and contents" after "combined weight of
16 cabinets" in Note 1b on Sheet ST2.2.

17

18 Ms. Paxson said Sheet ST2.2A shows a flipped design with cabinets on both sides.
19 Committee members discussed limiting cabinet weight for cabinets on both sides; they
20 concluded that doubling the number of studs would address this problem. There was
21 general consensus that Note 1b on Sheet ST2.2 and Detail ST2.2A should be deleted.

22

23 Participants questioned the 8" stud height shown on Sheet ST2.3. Ms. Paxson
24 suggested not defining the height or saying "per architect." Mr. O'Connor proposed "6"

1 minimum,” and other committee members expressed support for this approach. Mr.
2 O’Connor pointed out a missing space between “O/C” and “vertically” in the second
3 notation. One individual noted that “PDP” is used in this narrative, but the title on Sheet
4 ST1.2A refers to “PDF.” Mr. Elbettar noted the letter (E) before “conc. wall” could be
5 eliminated. Ms. Paxson proposed revising and clarifying the wording of that section.

6
7 Ms. Paxson welcomed feedback regarding the sizing of the furring. Committee
8 members recommended specifying “1-5/8” min. by 16-gauge” and striking “or 2-1/2.”
9 They also asked Ms. Paxson to insert a measurement from the top.

10
11 Mr. Elbettar noted that heavy equipment should also be addressed. Mr. Monson
12 recommended requiring a continuous angle for heavy equipment. After some
13 consideration, committee members decided not to mention equipment in the top notes
14 and to delete “and ST1.3 for wedge anchor” from Note 2. Ms. Paxson said she would
15 add a note saying nothing could be anchored to that wall.

16
17 Committee members reviewed Sheet ST2.4

18
19 Mr. Spindler suggested that the committee turn its attention to the PIN before Mr.
20 Oakley had to leave.

21
22 **Review the Draft Policy Intent Notice (PIN) - Use of Standard Details**

23 Mr. La Brie offered to email the staff the correct Health and Safety Code citation to
24 insert in the blank at the beginning of the PIN.

1 Ms. Paxson observed that the proposed PIN is generic enough that it probably would
2 not require updating with every code cycle. Mr. Spindler pointed out the reference in
3 Paragraph 1)D to CAN 1-7-15(3)(a), which applies only to the 2007 code.

4

5 Mr. Gordon Oakley recalled that pre-approved details were originally contained in the
6 FREER Manual. Mr. La Brie noted the electronic files are intended to replace that
7 document.

8

9 Mr. La Brie recommended ending the second sentence in the Policy section after “OPD
10 use.” Committee members supported that change, noting the PIN was not limited to
11 addressing particular issues.

12

13 Mr. La Brie questioned whether Paragraph A of the Policy section duplicates information
14 in the two sentences preceding it and in Paragraph D later.

15

16 Mr. La Brie drew attention to the first sentence in Section 1)D and suggested
17 substituting the word “consistent” in place of “commensurate.” At the end of the bold
18 sentence that follows, he suggested adding the following language after “without
19 modification”: “and are not applied as a substitution to an approved detail that
20 constitutes a material alteration, as determined by the design professional of record and
21 defined by the code reference.”

22

23 Mr. Spindler recommended emphasizing to design professionals that OSHPD reviews
24 the detail in conjunction with the rest of the application and attachments because

1 OSHPD has to confirm the appropriateness of locations and connection types for the
2 installations proposed.

3

4 Committee members discussed the code definition of “materially alter.” Mr. Oakley
5 noted that some of the proposed standard details would be considered material
6 alterations. Mr. O’Connor advocated treating standard details differently because their
7 elements were already reviewed and approved.

8

9 Mr. Elbettar pointed out the distinction between standard details and OSHPD Pre-
10 Approved Details (OPD’s). He said addressing this point would help bridge the gap.

11 Mr. La Brie commented that standard details are intended to be generally applicable,
12 while OPD’s deal with very specific applications that went through a more stringent
13 review process. Mr. Beekman remarked that the reviewer’s focus should be on the
14 proposed application rather than the detail itself. Mr. Oakley suggested adding columns
15 on the application for the OSHPD reviewer to check off the application and the fastener.

16

17 Committee members discussed the extent of OSHPD review appropriate for projects
18 using standard details. They noted that local jurisdictions allow use of standard details
19 to eliminate the need for plan review of those features. Mr. Beekman described the
20 process used for OSHPD Anchorage Pre-Approvals (OPA’s). Mr. Oakley said he would
21 confer with Mr. Coleman about the review process and develop clear definitions that
22 can be applied consistently.

23

1 Mr. Oakley apologized for having to leave early. Mr. Spindler and committee members
2 thanked him for his participation.

3

4 Mr. La Brie proposed inserting a code citation in Paragraph 1)E after “where required.”

5

6 Mr. Beekman recommended clarifying in Paragraph C of the Policy section that the
7 design professional of record takes on responsibility for assuring proper application of
8 standard details. Mr. Elbettar observed that there should be an introduction page that
9 outlines the purpose and use of the standard details and specifies that they have to be
10 sealed and signed by a registered design professional who will take responsibility for
11 the detail used. Ms. Paxson suggested also including this point in the first general note
12 of the standard details. Mr. La Brie and Mr. Elbettar agreed to work together to draft
13 appropriate language.

14

15 Ms. Paxson proposed changing the second sentence in the Policy section to read: “The
16 intention of this PIN is to clarify OPD use as follows:” Committee members expressed
17 support for this revision.

18

19 Ms. Paxson questioned the need to have four letter points before a numbered list of four
20 lettered points, and she asked if this was a standard OSHPD format. Mr. Beekman said
21 the first four lettered paragraphs pertain to the intention and definition of the PIN, and
22 the numbered part deals with the application. Committee members talked about
23 renumbering the sections of the document. They eventually concluded that the
24 standard OSHPD PIN format should be used.

1 Mr. O'Connor indicated that he would provide his notes on the proposed PIN revisions
2 to the staff.

3

4 **Review the Draft Standard Details for Partitions (Continued)**

5 Mr. Spindler directed the committee's attention back to Sheet ST2.4.

6

7 Mr. Spindler commented that the entire packet contains a wealth of important
8 information that will make the details usable, and he commended Ms. Paxson and the
9 KPFF team for their work.

10

11 Mr. Spindler advocated offering training sessions to help users understand the details
12 and apply them appropriately. Committee members suggested that OSHPD develop a
13 series of Webinars.

14

15 Mr. Spindler recommended including a reference to stud gauge specifications
16 somewhere on Sheet ST2.4 and on subsequent drawings. Ms. Paxson agreed this
17 information would be helpful. Mr. Monson suggested referring back to ST2.0 and
18 ST2.1.

19

20 One participant said there were two notes explaining lateral bracing near the middle of
21 the page, and he asked if the one on the left pertained to jamb studs. Ms. Paxson said
22 she would check the status of that note. Mr. O'Connor proposed revising the wording in
23 the right side note by saying "does not occur on one or both faces of the partition." Ms.

1 Paxson said she liked Mr. O'Connor's simpler language. She noted the same change
2 should be made in the notes on ST4.1 and ST4.2.

3
4 Ms. Paxson offered to make her notes available to committee members, staff, and third-
5 party reviewers. Committee members asked her to post her notes on OSHPD's FTP
6 site so they can be downloaded by authorized users. They proposed that committee
7 members also post their notes and revisions on the FTP site. Ms. Paxson
8 recommended sending email notifications whenever something new is posted.

9 Mr. Beekman said the staff will focus first on completing the PIN while the contractor is
10 reviewing the revised details.

11
12 Committee members agreed to review the remaining partition standard details on their
13 own and post comments. Ms. Paxson requested that all comments be submitted by
14 Monday, March 21. She said she would email committee members with information on
15 accessing the FTP site. She added that a red-lined document showing changes will be
16 posted as soon as one is available.

17
18 Ms. Paxson asked if the committee felt there had been enough feedback from outsiders
19 regarding constructability. Committee members indicated they were comfortable with
20 the input that had been received. Mr. Spindler noted there will be ample opportunity for
21 outside comments on future details.

22
23 Mr. Beekman said Mr. Coleman would like a couple structural experts to review the
24 standard details before the package is submitted to the third-party reviewer.

1 Ms. Paxson asked when the committee wanted to talk about planning for the 2010
2 update. Mr. Spindler proposed finishing the 2007 version first and using that as the
3 basis for the 2010 update as soon as the package is approved.

4

5 Mr. Spindler suggested covering other agenda items during the remaining time.

6 Committee members agreed. Mr. La Brie noted that Sheet ST2.4 was the last page
7 reviewed.

8

9 **Review and Approve the Draft Standard Details Instruction Manual**

10 Mr. Beekman said the staff had not yet developed an instruction manual. He stated that
11 a document should be ready for the committee's review at the next meeting.

12

13 Ms. Paxson clarified that the instruction manual would have the same information as the
14 general notes. Mr. La Brie asked about the possibility of creating a flow chart showing
15 the process for using standard details. Ms. Paxson expressed strong support for this
16 idea. Mr. Spindler suggested considering a flow chart once the existing schedule
17 milestones had been met.

18

19 **Discuss Process for Development of Standard Details for Ceilings**

20 Mr. Spindler noted that Mr. La Brie is taking the lead on developing ceiling details.

21

22 Mr. Spindler commented that the 2007 and 2010 codes are substantially different with
23 respect to ceiling details. Mr. La Brie noted the new details are likely to change
24 construction practices; he added that many ceilings constructed under the 2007 code

1 do not comply with that code. After some discussion, committee members
2 recommended producing just a 2010 version.

3

4 **Develop the Process for Approving Future Standard Details**

5 Mr. Spindler proposed tabling this topic until the next meeting. Mr. Beekman said the
6 process is supposed to be defined by mid-April.

7

8 Mr. La Brie suggested providing an email address for individuals to propose candidate
9 details. He said OSHPD screen the suggestions based on a set of criteria. He noted
10 the criteria should include the value or benefit to OSHPD in terms of shortening plan
11 review time.

12

13 Mr. Spindler stated that the committee will discuss the process at the next meeting.

14

15 **Review and Approve the Meeting Date Schedule for 2011**

16 The committee reviewed the proposed meeting schedule for 2011: April 19, May 17,
17 June 14, August 16, October 20, and November 15. Committee members approved
18 these dates.

19

20 **Comments from the Public/Board Members on Issues not on this Agenda**

21 There were no other issues brought to the committee's attention.

22

23 Mr. Spindler thanked committee members, guests, and staff for their participation.

24

1 **Adjournment**

2 **MOTION:** (M/S/C)

3 There being no further business, the committee voted unanimously that the meeting be
4 adjourned. The meeting was adjourned at 4:05 p.m.



Office of Statewide Health Planning and Development

Hospital Building Safety Board

400 R Street, Suite 200
Sacramento, California 95811-6213
(916) 440-8453
Fax (916) 324-9118
<http://www.oshpd.ca.gov/Boards/HBSB/index.html>



5/27/11

HOSPITAL BUILDING SAFETY BOARD **Senate Bill (SB) 90 Committee**

MEETING NOTICE

Thursday, June 9, 2011**10:00 a.m. — 4:00 p.m.**

at the

Office of Statewide Health Planning and Development

400 R Street, Suite 452

Sacramento, CA 95811

(916) 440-8453

And, at the

Metropolitan Water District Headquarters

700 N. Alameda Street, Suite 2-546

Los Angeles, CA 90012

(213) 897-0166

Board Members:

John Donelan, Chair; Arlee Monson, Vice-Chair;
Joe La Brie; Simin Naaseh; Michael O'Connor; Michael
Osur; Carl Scheuerman

OSHPD Staff:

Paul Coleman

HBSB Staff:

Linda Janssen, Executive Director; Evett Torres

MEETING AGENDA

NOTE: Agenda order is tentative and subject to change without prior notice.
All times are approximate and subject to change. A 30-minute
to one-hour lunch will be taken sometime during the day.

- 1. Welcome and Introductions**
- 2. Overview of SB 90 Legislation**
 - Discussion and public input

3. **Develop a method for determining:**
 - The structural integrity of the hospital's SPC-1 buildings based on its Hazards US scores
 - Community access to essential hospital services
 - The hospital owner's financial capacity to meet the deadline as determined by either a bond rating of BBB or below or the financial report on the hospital owner's financial capacity
 - Discussion and public input
4. **Make recommendations for regulations to be developed by OSHPD to grant, deny or modify seismic safety extensions (issue a Policy Intent Notice by September 1, 2011)**
 - Discussion and public input
5. **Develop application for SB 90 extension**
 - Discussion and public input
6. **Consider whether it is appropriate to weight the criteria or thresholds for the various criteria for granting, denying or modifying seismic safety extensions**
 - Discussion and public input
7. **Develop criteria for what constitutes the amount of time reasonably necessary to complete the construction project**
 - Discussion and public input
8. **Develop criteria for determining what constitutes false information that would void an extension already granted**
 - Discussion and public input
9. **Comments from the Public/Board Members on Issues not on this Agenda:**

The Board will receive comments from the public/members at this time on matters not on the agenda. Matters raised at this time will be taken under consideration for placement on a subsequent agenda.
10. **Adjournment**

REMINDER: Please call (916) 440-8453 on Wednesday, June 9, after 3:00 p.m. to confirm that the meeting will be taking place as scheduled. The recording will verify the meeting date and location.

NOTE: Meeting facilities and restrooms are accessible to the physically disabled. If any special accommodations (assistive listening device, sign language interpreter, etc.) are needed, please contact Board Staff at (916) 440-8453. Requests should be made as soon as possible but no later than 10 business days prior to the meeting.

Parking:

Sacramento—There are garages at 500 R Street and CalPERS Plaza. CalPERS Plaza has two entrances: one on Fifth Street, north of R Street; and another on Q Street, between Fourth and Fifth Streets. All three charge \$1.25/hour or \$12/day. There are also 10-hour parking meters around the perimeter of the building.

Los Angeles—There is valet service at the Metropolitan Water District Building that is available 8 am to 5 pm and they charge between \$6 and \$12. There is also Five Star Parking lot on Cesar Chavez Avenue and Alameda Street that charge \$14/day or \$2.00 every 20 minutes.

Questions? Call Board Staff at the above phone number.

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Office of Statewide Health Planning and Development



Hospital Building Safety Board

400 R Street, Suite 200
Sacramento, California 95811-6213
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<http://www.oshpd.ca.gov/Boards/HBSB/index.html>

**MEETING REPORT
HOSPITAL BUILDING SAFETY BOARD (HBSB)
Senate Bill (SB) 90 Committee**

**Thursday, June 9, 2011
10:00 a.m. - 4:00 p.m.**

Office of Statewide Health Planning and Development
400 R Street, Suite 317
Sacramento, CA 95811
and
Metropolitan Water District Headquarters
700 N. Alameda Street, Suite 2-546
Los Angeles, CA 90012

Committee Members Present

John Donelan, Committee Chair
Arlee Monson, Vice Chair
John Egan
Joe La Brie
Simin Naaseh
Michael O'Connor
Michael Osur
Carl Scheuerman

HBSB Staff Present

Linda Janssen, Executive Director
Evelt Torres

OSHPD Staff

Duane Borba
Paul Coleman
Stephanie Clendenin
John Gillengerten
Patrick Rodgers
Chris Tokas
Elizabeth Wied



1 **Welcome and Introductions**

2 Mr. John Donelan, Committee Chair, called the meeting to order at 10:02 a.m. and
3 welcomed everyone. Participants took turns introducing themselves.

4

5 **Overview of SB 90 Legislation**

6 Mr. Paul Coleman said the seismic provisions of Senate Bill 90 are intended to establish
7 criteria for hospitals to obtain extensions to meet statutory deadlines for dealing with
8 SPC-1 buildings. He noted that the bill was a result of numerous legislative hearings
9 and conversations with the author, Senator Steinberg, who expressed concern about
10 enforcing the public safety provisions of the law.

11

12 Mr. Coleman explained that some hospitals with SPC-1 buildings were allowed to
13 extend deadlines to 2020 based solely on their financial constraints. The purpose of SB
14 90 is to establish criteria other than financial condition to determine which buildings
15 should be eligible for extensions. Because OSHPD is charged with responsibility for
16 developing regulations to implement SB 90, the SB 90 Committee was formed by the
17 Hospital Building Safety Board to assist OSHPD with that task.

18

19 Mr. Coleman noted that in order to obtain an extension under SB 90, all applicants will
20 be required to undergo a HAZUS reassessment to evaluate their SPC-1 buildings. He
21 indicated that there are still about 455 SPC-1 hospital buildings that have not yet had a
22 HAZUS assessment.

23

1 Mr. Coleman advised that SB 90 contains a trigger provision so that the seismic
2 extension component will not become effective until the state and the federal
3 government have agreed on reimbursement provisions. SB 90 sets a deadline of March
4 31, 2012 for an extension application, but it is uncertain exactly when the
5 reimbursement agreement will be reached. Despite this uncertainty, OSHPD decided to
6 move forward with developing draft regulations and issuing them as a Policy Intent
7 Notice (PIN) by September this year. Mr. Coleman noted that this will give hospitals six
8 months to prepare and submit their applications.

9
10 Mr. Coleman said SB 90 identifies three factors OSHPD should consider in extension
11 applications. First is the structural integrity of a building based on its HAZUS score.
12 The legislation focuses on hospital buildings housing patients that are incapable of self-
13 preservation, and OSHPD wants to work with hospitals to help them reduce the risk of
14 collapse of this kind of vulnerable building. The legislation also requires OSHPD to
15 consider access to health care and how major earthquakes will impact the facilities and
16 services available to patients. The third factor to be considered is a hospital owner's
17 financial capability.

18
19 Mr. Coleman introduced Mr. John Gillengerten, OSHPD's acting principal structural
20 engineer, who will be spearheading the development of SB 90 regulations. He invited
21 Mr. Gillengerten and Mr. Chris Tokas to discuss the process in more detail.

22
23 Mr. Gillengerten gave a presentation summarizing highlights of SB 90 and previous
24 legislation and discussing OSHPD's approach to determining eligibility for SB 90

1 extensions. He said OSHPD's objectives for this meeting are to establish submittal
2 requirements; determine an approach for weighing the three factors identified in SB 90:
3 seismic risk, community access, and financial condition; and establish approaches for
4 evaluating extension criteria.

5
6 Mr. Gillengerten explained that the Hospital Facilities Seismic Safety Act was passed
7 after the 1971 San Fernando earthquake, but that legislation only applied to new
8 buildings. At that time, people believed that hospitals would be aware of the risks posed
9 by older buildings and make plans to retire or retrofit them in subsequent years. When
10 that, in fact, did not happen, legislators again became concerned that the state's
11 inventory of hospital buildings included too many unsafe structures. SB 1953 was
12 enacted following the Northridge earthquake to impose deadlines for upgrading and
13 improving the seismic safety of hospital buildings. SB 1953 established a system for
14 rating buildings based on seismic risk, imposed a 2008 deadline to remove buildings at
15 risk of collapse from acute-care service, and set 2030 as the deadline for all hospital
16 buildings to comply fully with the Hospital Facilities Seismic Safety Act.

17
18 Mr. Gillengerten said SB 1953 contained provisions allowing extensions of the 2008
19 deadline for hospitals that could show compliance would result in a loss of healthcare
20 capacity. 414 hospitals, nearly every one in the state, received five-year extensions
21 under the diminished capacity provision, without any consideration of seismic risk. Mr.
22 Gillengerten noted that SB 1801, enacted in 2000, allowed a five-year extension of the
23 2008 deadline for hospitals that agreed to move basic services from SPC-1 buildings to
24 conforming buildings. SB 2006, enacted in 2006, allowed an extension of the

1 nonstructural bracing requirements until 2030 for hospitals in Seismic Zone 3 based on
2 an analysis of ground-shaking potential at the hospital site. Mr. Gillengerten reported
3 that only three hospitals obtained a SB 1801 extension, and 20 received a SB 2006
4 extension.

5
6 Mr. Gillengerten stated that SB 1661, enacted in 2006, allowed hospitals that had
7 received a five-year extension of the 2008 deadline to get another two years to comply if
8 their projects were delayed due to circumstances beyond their control. SB 1661 also
9 required hospitals to report the status of their SPC-1 buildings. SB 306, enacted in
10 2007, provided a delay in compliance for SPC-1 buildings for hospitals that could
11 demonstrate a lack of financial capacity, but there was no consideration of seismic risk.
12 In order to qualify for a SB 306 extension, eligible hospitals also had to agree to replace
13 all SPC-1 buildings by 2020. Mr. Gillengerten reported that 24 hospitals had been
14 granted this extension.

15
16 Mr. Gillengerten said SB 523, enacted in 2009, allowed a two-year extension to a
17 particular hospital. SB 499, also enacted in 2009, provided an additional two-year
18 extension to the 2013 deadline for buildings that had applied for HAZUS evaluation and
19 did not meet the criteria for SPC-2. SB 499 established a more comprehensive
20 requirement for hospitals to report compliance progress and authorized the use of
21 HAZUS methodology to evaluate seismic risk. To be eligible for a SB 499 extension,
22 hospitals had to have a project already under construction. Mr. Gillengerten noted that
23 the SB 499 reports gave OSHPD much more detailed information about the status of
24 hospitals' compliance.

1 Mr. Gillengerten stated that SB 608, enacted in 2010, permits OSHPD to grant two
2 separate extensions for local planning delays for major medical centers. Under SB 608,
3 compliance deadlines can be extended to 2018 for hospitals that meet certain
4 construction progress reporting requirements.

5
6 Mr. Gillengerten advised that SB 90, described earlier by Mr. Coleman, is the latest
7 legislation pertaining to extensions. He observed that although considerable progress
8 has been made in terms of overall compliance with SB 1953, there are still many
9 vulnerable hospital facilities that remain.

10
11 Mr. Gillengerten described the provisions of SB 90 in more detail. He noted that SB 90
12 extensions cannot exceed the amount of time necessary to reasonably complete the
13 project, and SB 90 does not change the 2030 deadline. Unlike previous extension bills,
14 SB 90 focuses on structural seismic performance, and extensions are only granted on a
15 case-by-case basis. Mr. Gillengerten added that SB 90 gives OSHPD the ability to
16 consolidate previous extensions and improve the monitoring of progress and
17 compliance.

18
19 Mr. Gillengerten reviewed the milestones hospitals eligible for SB 90 extensions will be
20 required to meet. He said hospitals must submit letters of intent to OSHPD by March
21 31, 2012 detailing their plans and anticipated time frames. By September 30, 2011,
22 eligible hospitals must apply for HAZUS reassessment. By January 1, 2015,
23 construction plans and financial reports are due, and then building permits must be
24 obtained no later than July 1, 2018.

1 Mr. Tokas displayed a timeline showing each of the milestones and compliance
2 deadlines.

3
4 Participants asked questions about how the three factors in SB 90 will be interpreted by
5 OSHPD. Mr. Coleman described the purpose and legislative intent of SB 90. He noted
6 that Mr. Gillengerten would be discussing each elements in more detail as part of his
7 presentation.

8
9 Mr. Gillengerten said the Hospital Building Safety Board has an appeal process to
10 consider extension applications denied or revoked by OSHPD. He noted that OSHPD
11 can revoke an extension if it is discovered that hospitals provided false information, if
12 milestones are not met, or if construction is abandoned or suspended for a six-month
13 period. He advised that OSHPD will charge a fee for processing extension requests.

14
15 Mr. Gillengerten said SB 90 gives OSHPD considerable flexibility, and there are ranges
16 of options to consider for implementation of the three factors of high seismic risk, critical
17 community access, and financial hardship. He suggested first discussing whether the
18 three criteria should be weighted, and if so, how.

19
20 Mr. Gillengerten showed examples of how various weighting options could be applied.
21 He discussed the ramifications of equal weighting of all three criteria, more weight on
22 seismic risk and then access, and greater emphasis on access followed by seismic risk.

23

1 Committee members discussed the relative importance of each criteria. After some
2 deliberation, there was general consensus that all of the issues needed to be discussed
3 before determining if weighting was appropriate.
4

5 **Develop Implementation Methodologies**

6 Mr. Gillengerten noted that in order to make an extension determination, OSHPD needs
7 information about financial status, healthcare accessibility, and HAZUS assessments.
8 He said OSHPD would like to make determinations as early as possible, but because
9 HAZUS information does not have to be submitted until shortly before the 2013
10 deadline, and financial reports are not due until 2015, OSHPD may have to grant
11 provisional extensions while applications are being considered.
12

13 Mr. Coleman noted that one approach would be to allow automatic provisional
14 extensions to January 1, 2015 for hospitals that can demonstrate both a community
15 access issue and a financial issue. He said the length of an extension could be tied to
16 the structural integrity of a building, but that information might not be known for some
17 time after the deadline to apply for an extension, and OSHPD needs time to review the
18 HAZUS data.
19

20 Ms. Simin Naaseh observed that hospitals would then have to submit financial
21 justification and community access justification when they submit their letters of intent.

22 Mr. Tokas pointed out that extension applications also need to explain the hospital's
23 plans and schedule for compliance.
24

1 Ms. Naaseh observed that the statutory deadlines seem to impose a de facto weighting
2 that gives community access and financial condition a higher priority than seismic
3 issues. Mr. Gillengerten noted that the law requires OSHPD to consider all three
4 factors, but the deadline for submitting HAZUS evaluations means the determination
5 has to wait until that information is received. Mr. Donelan expressed concern that the
6 timeframes could result in hospitals being out of compliance before they find out
7 whether an extension has been granted. Mr. Coleman observed that the alternative
8 would be to deny applications from hospitals lacking HAZUS data by the application
9 deadline.

10

11 Mr. Coleman pointed out that there are a number of hospitals that have already
12 conducted HAZUS assessments, so provisional extensions would only apply to those
13 that still need HAZUS evaluations at the time they apply. He said there are others that
14 have already chosen another path to compliance, and they may decide there is no need
15 to apply for an additional extension. He added that the length of a provisional extension
16 could be shorter than two years if OSHPD can review the HAZUS data sooner, a
17 determination that would be made on a case-by-case basis.

18

19 Mr. Coleman advised that there are 221 hospitals statewide that still have SPC-1
20 buildings on their campuses, and based on the SB 499 reports, the staff identified about
21 50 hospitals not likely to meet applicable deadlines.

22

23 After some discussion, the committee expressed support for the concept of granting
24 provisional extensions to allow time for OSHPD to consider HAZUS information.

1 Ms. Naaseh expressed her opinion that an extension of two years was too long. Mr.
2 Coleman explained that OSHPD needs sufficient time to review the HAZUS information
3 and make a determination on whether a SB 90 extension should be granted.

4
5 Mr. Joe La Brie recommended not allowing provisional extension provisions to be
6 appealed. Ms. Elizabeth Wied stated that the law provides for an appeal process.
7 Committee members noted that applicants should be able to appeal a denial, but not
8 the length of the provisional extension.

9
10 **MOTION:** (M/S/C) [Scheuerman/Monson]

11 The committee voted unanimously that OSHPD may grant provisional extensions up to
12 two years upon submittal of a letter of intent.

13
14 Mr. Carl Scheuerman explained that the intent of motion is to give OSHPD time to
15 consider HAZUS information submitted after the March 2012 letter of intent deadline.

16 Mr. Coleman clarified that OSHPD would have discretion to grant or deny a provisional
17 extension on a case-by-case basis, and hospitals applying would still have to meet the
18 requirements of community access and financial conditions.

19
20 At 12:25, the committee recessed for lunch. Mr. Donelan reconvened the meeting at
21 1:26 p.m.

22
23 Mr. Gillengerten welcomed direction from the committee with respect to the extent of
24 financial information and how many financial reports should be required, criteria for

1 assessing impacts on community access to healthcare services, and how OSHPD
2 should evaluate the seismic status of SPC-1 buildings,

3

4 Hospital Owner's Financial Capacity to Meet Deadline

5 Mr. Gillengerten said SB 90 requires hospital owners to claim financial hardship by
6 showing a bond rating of BBB or lower, or submitting a financial report to substantiate
7 their lack of financial capability. He stated that the financial information must be
8 sufficient to demonstrate both a need for an extension and the facility's ability to
9 complete a seismic retrofit or replacement project by the applicable deadlines. He
10 noted that hospital owners are required to submit financial reports with construction
11 drawings by January 1, 2015 showing an ability to complete the work, and staff is
12 recommending that financial information justifying an extension be provided with the
13 letter of intent by March 31, 2012.

14

15 Mr. Coleman said the author of SB 90 originally proposed using just using a bond rating
16 of BBB or lower to demonstrate a financial hardship. However, once it became
17 apparent that some hospitals that do not have a bond rating, a provision was inserted to
18 allow submission of other data to substantiate a financial hardship warranting an
19 extension. He clarified that the purpose of the information submitted by March 31,
20 2012 would be show the need for an extension, while the financial report submitted by
21 January 1, 2015 would show the hospital's ability to complete the project.

22

23 Mr. Gillengerten discussed the types of financial information required to show need for
24 an extension and ability to complete the work. He said OSHPD has certain resources

1 available to verify financial status, including data from Cal-Mortgage, the California
2 Attorney General's Office, and SEC filings.

3

4 Mr. La Brie asked whether OSHPD could use the financial criteria established when SB
5 306 was enacted. Mr. Coleman responded that the author of SB 90 decided not to use
6 the language in SB 306 because it was too narrow and restrictive. He said SB 90
7 provides broader criteria and more flexibility in determining financial hardship.

8

9 Mr. Gillengerten invited discussion regarding the types of information OSHPD should
10 accept to validate financial hardship with the letter of intent. Participants proposed
11 feasibility studies, audited financial statements, budget plans, and considering what a
12 hospital has already expended to achieve seismic compliance. Mr. Gillengerten pointed
13 out that SB 90 gives OSHPD flexibility to consider the relative importance of the three
14 factors identified on a case-by-case basis. In some situations, he noted, seismic
15 vulnerability will be of paramount importance in granting an extension; in other cases,
16 community access might be a critical factor; and in others, financial constraints may
17 pose the biggest obstacle. Committee members debated whether financial condition
18 should be a hard-and-fast requirement for every application.

19

20 After some discussion, the committee agreed that financial condition should not
21 necessarily disqualify an applicant from obtaining an extension. Mr. Gillengerten noted
22 that the letter of intent should address financial condition either by indicating financial
23 hardship and supplying appropriate documentation or saying there was no hardship and
24 the extension was being requested for other reasons. He proposed accepting different

1 kinds of evidence to substantiate a hardship, included audited financial statements, a
2 feasibility study, and a projected budget. Committee members expressed support for
3 this approach.

4

5 Community Access to Essential Hospital Services

6 Mr. Gillengerten noted that OSHPD previously reviewed information on community
7 access to healthcare services as part of granting SB 1953 extensions, and he
8 suggested using a similar approach to consider community access criteria for SB 90
9 extensions. He said OSHPD identified certain services critical to community access,
10 including availability of acute-care beds, regional trauma centers, emergency
11 departments, and specialties like children's programs, heart centers, and burn units.

12

13 Mr. Scheuerman noted that the number of acute-care beds has decreased dramatically
14 in the past couple decades, and that trend is continuing. He said California now has 1.9
15 beds per thousand people, about two thirds of the national average, so every bed is a
16 critical asset. Mr. La Brie pointed out that the ratio varies by county, and some regions
17 have better healthcare access than others. Mr. Coleman observed that some hospitals
18 offer specialty services not available elsewhere, and that factor also needs to be
19 considered in assessing access. He said that in the SB 90 hearings, legislators were
20 primarily concerned about ensuring the availability of essential services after
21 earthquakes.

22

23 Mr. Scheuerman pointed out that words like "essential" and "critical" have specific
24 meanings in existing law. Mr. Coleman recommended avoiding use of terms with

1 narrow definitions. He proposed that OSHPD formulate its own criteria reflecting the
2 legislative intent.

3

4 Structural Integrity of SPC-1 Buildings Based on HAZUS Scores

5 Mr. Gillengerten presented a range of options for evaluating the structural integrity of an
6 SPC-1 building.

7

8 Mr. Gillengerten said one possibility would be to set a maximum HAZUS score. He
9 showed a graph depicting the relationship between HAZUS scores and likelihood of
10 collapse and pointed out that buildings with scores over 10 percent are five to ten times
11 more likely to collapse in earthquakes than typical commercial buildings. He said
12 establishing a maximum score would set a threshold for an acceptable level of risk.

13

14 Mr. Gillengerten noted that another approach would be to grant extensions of different
15 lengths depending on HAZUS scores: for example, OSHPD could allow a 7-year
16 extension for buildings with scores between 1.2 percent and 2 percent; a 5-year
17 extension for buildings with scores between 2 and 4 percent, and a 2-year extension for
18 buildings with scores of 4 percent or greater.

19

20 Mr. Gillengerten discussed the possibility of allowing hospitals to make voluntary
21 seismic improvements to lower their HAZUS scores. He observed that this approach
22 would help target serious deficiencies and assist hospitals in upgrading buildings that
23 would be unable to achieve an SPC-2 rating even after retrofits.

24

1 Mr. Gillengerten said OSHPD can also consider combining the HAZUS score and
2 building occupancy to encourage seismic compliance while recognizing critical
3 functions. He showed how a numerical score could be assigned to each building
4 reflecting a compliance priority rating. He noted that certain occupancies could be
5 assigned a higher priority than others, and buildings with a high concentration of
6 essential functions could be given a shorter time to comply than other buildings. Mr.
7 Gillengerten displayed graphs depicting compliance time versus risk and compliance
8 priority ratings in relationship to extension times. He showed examples of how the
9 formula would work to reduce risk sooner in more important structures. Mr. Gillengerten
10 added that he preferred this combined approach.

11
12 Mr. Scheuerman noted that some hospitals have buildings with different SPC ratings
13 that are part of the same facility, and giving extensions based on occupancy would
14 create different timetables for retrofitting each building. Mr. Coleman clarified that the
15 purpose of giving an extension is to allow the most vulnerable buildings to be replaced
16 first. He added that HAZUS scores are assigned to individual buildings, not overall
17 facilities, so this methodology would be consistent with that rating scheme. Mr.
18 Gillengerten agreed, and observed that shorter extensions would be given to buildings
19 that have unacceptable levels of risk.

20
21 Mr. Coleman discussed the concept of identifying “trump cards” for certain compelling
22 conditions within each of three SB 90 factors. For example, he suggested setting a
23 maximum HAZUS score for seismic integrity, recognizing certain types of essential

1 facilities critical to the state’s healthcare system, and establishing a level of financial
2 hardship that would automatically qualify an applicant for an extension.

3
4 Mr. Gillengerten welcomed feedback from the committee regarding approaches to
5 assessing structural integrity. After some discussion, committee members expressed a
6 preference for combining HAZUS scores with building occupancies. They also
7 encouraged the staff to explore the idea of “trump cards” within each of the three
8 elements.

9
10 Mr. La Brie noted that seismic risk lends itself to a quantifiable, objective approach, but
11 the community access and financial condition factors seem more nebulous and
12 subjective. Mr. Coleman acknowledged that there were different degrees of precision
13 that could be applied to the different criteria, but he observed that the community
14 access and financial elements of SB 90 do not impact seismic risk in the same way
15 structural integrity does. He also added that OSHPD can establish objective criteria for
16 community access based on the types of services and utilization rates.

17
18 Mr. Scheuerman pointed out that potential closure of healthcare facilities also has life
19 safety implications that should not be ignored. Mr. Coleman agreed, and remarked that
20 the Legislature was wise to identify all three factors.

21

22 **Recommendations for OSHPD Regulations**

23 Mr. Coleman proposed that the staff develop some draft regulations based on the
24 committee’s discussion and direction. He said OSHPD will post the draft regulations on

1 the Website for the committee to review before the next meeting. He thanked
2 committee members and interested parties for their input.

3

4 Committee members expressed their appreciation to Mr. Gillengerten and the staff for
5 their hard work.

6

7 **Comments from the Public/Board Members on Issues not on Agenda**

8 There were no other issues brought to the attention of the committee.

9

10 **Adjournment**

11 **MOTION (M/S/C)**

12 There being no further business, the committee voted unanimously to adjourn. The
13 meeting was adjourned at 3:32 p.m.

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Office of Statewide Health Planning and Development



Hospital Building Safety Board

400 R Street, Suite 200
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Place holder for the

FDD Update — Paul Coleman, Deputy Director, FDD



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Place holder for the

Codes and Regulations Update — Glenn Gall, FDD Building Standards Unit
Supervisor



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Place holder for the

Update on Consulting Members — Joseph La Brie, HBSB Chair

- Appointment process
- Latest Governor's Executive Order on Travel Restrictions



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Place holder for the

Progress Report: Board Goals for 2011 —Committee Chairs

- Administrative Processes and Code Changes Committee
- Board Procedures Committee
- Education Opportunities Committee
- Instrumentation Committee
- SB 90 Committee
- SB 499 Facilities Progress Reporting Committee
- Standard Details Committee
- Structural and Non-Structural Regulations Committee



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HOSPITAL BUILDING SAFETY BOARD MEMBERSHIP

| MEMBERSHIP CATEGORIES | NAMES | TERM EXPIRATION DATE | TERM OF SERVICE |
|--|--|-------------------------|---|
| Appointed Members (Appointed by OSHPD Director) | | | |
| 2 structural engineers | Joseph La Brie Simin Naaseh | 2/2013 4/2012 | 2 nd term 1 st term |
| 2 architects | Robert Kain Arlee Monson | 3/2013 5/2014 | 1 st term 1 st term |
| 1 engineering geologist | Jeffrey R. Keaton | 6/2011 | 1 st term |
| 1 geotechnical engineer | John A. Egan | 4/2015 | 2 nd term |
| 1 mechanical engineer | Scott Karpinen | 3/2013 | 1 st term |
| 1 electrical engineer | Eric C. Johnson | 5/2014 | 1 st term |
| 1 hospital facilities manager | Carl Scheuerman | 11/2014 | 1 st term |
| 1 local building official | Jay Elbettar | 6/2014 | 2 nd term |
| 1 general contractor | Bert Hurlbut | 11/2014 | 2 nd term |
| 1 fire/life safety representative | John Donelan | 5/2014 | 1 st term |
| 1 hospital inspector of record | Brian Spindler | 2/2012 | 1 st term |
| 3 public members | Poki Stewart Namkung Michael Osur VACANT | 5/2011 3/2013 N/A | 1 st term 1 st term N/A |
| TOTAL | 16 | | |
| Ex-Officio Members | | | |
| OSHPD, Acting Director | Stephanie Clendenin | | None Stipulated |
| State Fire Marshal | Katherine Dargan Ernie Paez, Delegate | | |
| State Geologist | John Parrish Chris Wills, Delegate Jennifer Thornburg, Delegate | | |
| Building Standards Commission, Executive Director | Dave Walls | | |
| Department of Public Health, Director | Mark Horton Dan Kotyk, Delegate | | |
| Facilities Development (OSHPD), Deputy Director | Paul Coleman | | |
| TOTAL | 6 (plus 3 delegates) | | |
| Director Appointed Ex-Officio Members (Serve at pleasure of Director) | | | |
| 3 members | D. Michael Foulkes Trailer Martin Michael O'Connor | | None Stipulated |
| TOTAL | 3 | | |
| BUILDING SAFETY BOARD MEMBERSHIP TOTAL: | | 25 | |

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HOSPITAL BUILDING SAFETY BOARD

Office of Statewide Health Planning and Development
(OSHDP)

400 R Street, Suite 200

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E-MAIL ADDRESS: hbsb@oshpd.ca.gov

<http://www.oshpd.ca.gov/Boards/HBSB/index.html>

APPOINTED MEMBERS

| | |
|---|--|
| <p>Joseph L. La Brie, SE Makeitright, Inc. 55 E. Huntington Drive, Suite 277 Arcadia, CA 91006 (626) 445-0366 Fax (626) 445-2947 labrie@makeitright.net Structural Engineer, HBSB Chair Original Appt. – 4/05; Term Expires – 4/2013</p> | <p>John A. Egan, G.E. AMEC Geomatrix, Inc. 2101 Webster Street, 12th Floor Oakland, CA 94612 (510) 663-4292 Fax: (510) 663-4141 john.egan@amec.com Geotechnical Engineer, HBSB Vice-Chair Original Appt. – 04/07; Term Expires -04/2015</p> |
| <p>John Donelan UC Irvine Medical Center 101 The City Drive Bldg. 27, Rte. 131 Orange, CA 95868 (714) 456-6562 Fax: jdonelan@uci.edu Fire and Life Safety Representative Original Appt. - 05/10; Term Expires – 05/2014</p> | <p>Jay Elbettar, PE, C.B.O. Building Services Manager Building Division City of Mission Viejo 200 Civic Center Mission Viejo, CA 92691 (949) 470-3028 Fax: jelbettar@cityofmissionviejo.org Local Building Official Original Appt. – 06/06; Term Expires - 06/2014</p> |
| <p>Bert Hurlbut Turner Healthcare 1900 S. State College #200 Anaheim, CA 92806 (213) 500-9309 (cell) bhurlbut@tcco.com General Contractor Original Appt. – 11/06; Term Expires – 11/2014</p> | <p style="text-align: center;">VACANT Public Member</p> |

| | |
|--|--|
| <p>Eric C. Johnson, PE President, ECOM Engineering, Inc. 1796 Tribute Road, Suite 100 Sacramento, CA 95815 (916) 641-5600 Fax: ecj@ecomeng.com Electrical Engineer Original Appt. - 05/10; Term Expires – 05/2014</p> | <p>Robert J. Kain, AIA, ACHA HMC Architects 3546 Concourses Street Ontario, California 91764-5583 (909) 989-9979 Fax: (909) 980-8558 bob.kain@hmcarchitects.com Architect Original Appt. – 03/2009; Term Expires – 03/2013</p> |
| <p>Scott Karpinen, ME Frank M. Booth Design Build Company 4220 Douglas Blvd., Suite 5 Granite Bay, CA 95746 (916) 878-3827 fax: (916) 784-0707 scottk@fmbdbc.com Mechanical Engineer Original Appt. – 03/2009; Term Expires – 03/2013</p> | <p>Jeffrey R. Keaton, C.E.G. MACTEC Engineering & Consulting, Inc. 5628 E. Slauson Ave. Los Angeles, CA 90040 (323) 889-5316 Fax: (323) 889-5398 jrkeaton@mactec.com Engineering Geologist Original Appt. – 6/2007; Term Expires – 6/2011</p> |
| <p>Arlee Monson, AIA Principal, SmithGroup, Inc. 301 Battery Street, 7th Floor San Francisco, CA 94111 (415) 227-0100 Fax: Arlee.monson@smithgroup.com Architect Original Appt. - 05/10; Term Expires – 05/2014</p> | <p>Simin Naaseh, SE President & CEO Forell/Elsesser Engineers, Inc. 160 Pine St., 6th Floor San Francisco, CA 94111 (415) 837-0700 Fax: simin@forell.com Structural Engineer Original Appt.- 02/08; Term Expires 02/2012</p> |
| <p>Poki Stewart Namkung, M.D. Santa Cruz County Health Officer 1080 Emeline Avenue Bldg. D Santa Cruz, CA 95060 (831) 454-4476 Fax: (831) 454-4488 pnamkung@health.co.santa-cruz.ca.us Public Member Original Appt. - 05/07; Term Expires – 05/2011</p> | <p>Michael Osur, MBA Riverside County Dept. of Public Health 4065 County Circle Drive, Rm. 302 Riverside, CA 92503 (951) 358-5074 Fax: (951) 358-5120 mosur@rivcocha.org Public Member Original Appt. – 03/2009; Term Expires – 03/2013</p> |
| <p>Carl Scheuerman, FACHE Director, Regulatory Affairs Sutter Health Facility Planning & Development 2880 Gateway Oaks Drive, Suite 220 Sacramento, CA 95833 (916) 566-4821 FAX: (916) 566-4802 (916) 425-0787 wireless Scheuec@sutterhealth.org Hospital Facilities Representative Original Appt. – 11/10; Term Expires – 11/2014</p> | <p>Brian Spindler, IOR UC Davis Medical Center 1524 Quailrun Road Placerville, CA 95667 (916) 734-5022 Fax: brian.spindler@ucdmc.ucdavis.edu Inspector of Record Original Appt.- 02/08; Term Expires 02/2012</p> |

DIRECTOR APPOINTED EX-OFFICIO MEMBERS

| | |
|--|---|
| <p>D. Michael Foulkes, Manager State and Local Government Affairs Apple 1 Infinite Loop, MS 81-2CF Cupertino, CA 95014 (408) 974-2503, Fax: (408) 974-5870 foulkes@apple.com</p> | <p>John A. Martin, Jr., SE John A. Martin & Associates, Inc. 950 South Grand, 4th Floor Los Angeles, CA 90015 (213) 483-6490 Fax: (213) 748-0288 trailer@johnmartin.com</p> |
| <p>Michael O'Connor, Principal Nichols, Melburg, & Rossetto 300 Knollcrest Drive Redding, CA 96002 (530) 222-3300, Fax: (530) 222-3538 michael.oconnor@nrmrdesign.com</p> | |

EX-OFFICIO MEMBERS

| | |
|---|--|
| <p>Stephanie Clendenin., Acting Director OSHPD 400 R Street, Suite 310 Sacramento, CA 95811 (916) 326-3600 stephanie.clendenin@oshpd.ca.gov</p> | <p>Assistant to Ms. Clendenin – Amanda Poe OSHPD 400 R Street, Suite 310 Sacramento, CA 95811 (916) 326-3602 amanda.poe@oshpd.ca.gov</p> |
| <p>Katherine Dargan, SFM Office of State Fire Marshal P.O. Box 944246 Sacramento, CA 94244-2460 (916) 445-8200 Fax: (916) 445-8509 kate.dargan@fire.ca.gov</p> | <p><u>Delegate:</u> Ernie Paez, Chief Fire & Life Safety Division-South Office of State Fire Marshal 602 E. Huntington Dr., Suite A Monrovia, CA 91016 (626) 305-1908 Ext. 203 Fax: (626) 305-5173 ernie.paez@fire.ca.gov</p> |
| <p>John Parrish, State Geologist California Geological Survey 801 K Street, MS 12-30 Sacramento, CA 95814-3531 (916) 445-1923 Fax: (916) 445-5718 john.parrish@conservation.ca.gov</p> | <p><u>Delegate:</u> Chris Wills California Geological Survey 801 K Street, MS 12-32 Sacramento, CA 95814-3531 chris.wills@conservation.ca.gov</p> <p><u>Delegate:</u> Jennifer Thornburg California Geological Survey 801 K Street, MS 12-32 Sacramento, CA 95814-3531 (916) 445-5488 jennifer.thornburg@conservation.ca.gov</p> |

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- * = CALL BEFORE SENDING FAX - SAME NUMBER

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- Standard Details Committee

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- SB 499, Facilities Progress Reporting Committee

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HOSPITAL BUILDING SAFETY BOARD 2011 COMMITTEES

ADMINISTRATIVE PROCESSES AND CODE CHANGES COMMITTEE

| | |
|---|--|
| <p>Board Members: Bert Hurlbut, Chair Scott Karpinen, Vice-Chair John Donelan Eric Johnson Dan Kotyk Michael O'Connor Michael Osur Carl Scheuerman</p> <p>Consulting Member(s):</p> | <p>OSHPD Representative(s): Gary Dunger Glenn Gall Mike Marrs Gary Mills Chris Murray Dave Ring Ramin Sadr</p> <p>Tentative Meeting Date(s): April 27 CANCELED July 12 October 12</p> |
|---|--|

BOARD PROCEDURES COMMITTEE

| | |
|---|---|
| <p>Board Members: Michael Foulkes, Chair John Egan, Vice-Chair Joe La Brie Trailer Martin Carl Scheuerman</p> <p>Consulting Member(s):</p> | <p>OSHPD Representative(s):</p> <p>Tentative Meeting Date(s): May 13 CANCELED July 19 December 13</p> |
|---|---|

EDUCATION OPPORTUNITIES COMMITTEE

| | |
|---|--|
| <p>Board Members: Arlee Monson, Chair Jay Elbettar, Vice-Chair John Donelan Eric Johnson Jeffrey Keaton Poki Namkung Brian Spindler</p> <p>Consulting Member(s):</p> | <p>OSHPD Representative(s): Gary Dunger David Neou Gordon Oakley</p> <p>Tentative Meeting Date(s): March 15 May 18 July 20 September 14</p> |
|---|--|

INSTRUMENTATION COMMITTEE

| | |
|---|--|
| <p>Board Members: Jeffrey Keaton, Chair John Egan, Vice-Chair Trailer Martin Simin Naaseh Chris Wills / Jennifer Thornburg</p> <p>Consulting Member(s): Donald Jephcott</p> | <p>OSHPD Representative(s): Mohammad Karim Chris Tokas</p> <p>Tentative Meeting Date(s): October 18</p> |
|---|--|

HOSPITAL BUILDING SAFETY BOARD 2011 COMMITTEES

SENATE BILL 90 COMMITTEE

| | |
|--|--|
| <p>Board Members: John Donelan, Chair Arlee Monson, Vice-Chair Joe La Brie Simin Naaseh Michael O'Connor Michael Osur Carl Scheuerman</p> <p>Consulting Member(s):</p> | <p>OSHPD Representative(s): Paul Coleman</p> <p>Tentative Meeting Date(s): June 9</p> |
|--|--|

SENATE BILL 499, FACILITIES PROGRESS REPORTING COMMITTEE

| | |
|--|--|
| <p>Board Members: Bob Kain, Chair Eric Johnson, Vice-Chair Scott Karpinen Poki Namkung Michael O'Connor Michael Osur Carl Scheuerman</p> <p>Consulting Member(s): Noella Tabladillo Robert Omens</p> | <p>OSHPD Representative(s): Brett Beekman Roy Lobo Patrick Rodgers</p> <p>Tentative Meeting Date(s): February 18 April 6 June 9 CANCELED September 7</p> |
|--|--|

STANDARD DETAILS COMMITTEE

| | |
|--|---|
| <p>Board Members: Brian Spindler, Comm. Chair Michael O'Connor, Comm. Vice-Chair Jay Elbettar Bert Hurlbut Joe La Brie Arlee Monson</p> <p>Consulting Member(s): Dani Paxson Kale Wisnia</p> | <p>OSHPD Representative(s): Brett Beekman Duane Borba</p> <p>Tentative Meeting Date(s): March 16 April 19 CANCELED May 17 CANCELED June 14 August 16 October 20 November 15</p> |
|--|---|

STRUCTURAL AND NON-STRUCTURAL REGULATIONS COMMITTEE

| | |
|---|---|
| <p>Board Members: Simin Naaseh, Chair Trailer Martin, Vice-Chair John Egan Bert Hurlbut Scott Karpinen Joe La Brie Brian Spindler Chris Wills / Jennifer Thornburg</p> <p>Consulting Member(s):</p> | <p>OSHPD Representative(s) for Regulations: Tom Hale Mohammad Karim</p> <p>Tentative Meeting Date(s): March 22 CANCELED September 13</p> |
|---|---|