

**INITIAL STATEMENT OF REASONS
FOR
PROPOSED BUILDING STANDARDS
OF THE
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT**

**REGARDING THE 2007 CALIFORNIA BUILDING CODE,
CALIFORNIA CODE OF REGULATIONS, TITLE 24, PART 2,
(CALIFORNIA) CHAPTER 1, CHAPTERS 12 AND 30, AND APPENDIX CHAPTER 1**

HEALTH FACILITIES CONSTRUCTION

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

STATEMENT OF SPECIFIC PURPOSE AND RATIONALE:

(CALIFORNIA) CHAPTER 1 – GENERAL CODE PROVISIONS

Section 101.3.2.13

The proposed amendment is consistent with recent statute that changed the name of the “Department of Health Services” to the “Department of Public Health”.

Sections 110.1.2, 110.2.2, 110.3.2, and 110.4.2

The references to Part 10 of Title 24, California Building Standards Code are being repealed because OSHPD does not adopt this part.

CHAPTER 12 – INTERIOR ENVIRONMENT

1224.3 Definitions.

The current definition for handwashing fixture states that the fixture cannot be equipped with an aerator. The definition is modified to follow the current practice of allowing the fixture to be equipped with a non-aerating laminar flow device.

Section 1224.4.17

OSHPD is adopting new requirements to reduce the level of noise within patient rooms, delivery rooms and operating suites for new hospital buildings only. Reducing the noise environment is found to be conducive to patient healing. Noise is a well-documented source of stress in health care settings. Noise from personnel, equipment, and visitors impacts patient privacy and sleep patterns. In turn, noise increases stress levels for patients and caregivers. Research finds that in hospitals that reduced noise levels, the patients’ satisfaction with care giving increased, their sleep improved, and their blood pressure lowered; similarly, staff in low-noise environments were more positive about their jobs. These requirements are based on the nationally recognized standards of “2006 Guidelines for Design and Construction of Health Care Facilities” by the Facility Guidelines Institute and the American Institute of Architects Academy of Architecture for Health.

Table 1224.3

This table is based on the nationally recognized standard, "2006 Guidelines for Design and Construction of Health Care Facilities," by the Facility Guidelines Institute and The American Institute of Architects Academy of Architecture for Health.

Sections 1224.15 and 1224.16.1

Health & Safety Code 1250(a), states that a rural general acute care hospital is not required to provide surgery or anesthesia services. OSHPD is adding an exception to the surgery and anesthesia service space requirements that is consistent with the statutory provisions for rural hospitals.

Section 1224.33.3.6, Exceptions 1 and 2

The 2007 California Building Code (CBC) provides exceptions for the minimum square footage allowable when renovating specific existing rooms(s), or "shelled" spaces that were constructed under the 2001 or previous CBC. This proposed code change will add similar exceptions for existing examination or treatment room(s) when they are renovated.

Sections 1224.36.2.6, 1226.18.15, and 1226.18.16

These modifications are based on nationally recognized standards, "2006 Guidelines for Design and Construction of Health Care Facilities," by the Facility Guidelines Institute and The American Institute of Architects Academy of Architecture for Health.

Sections 1226.1 and 1226.2.1

These sections are amended to provide clarification for the construction standards to use for hospitals outpatient services that are specified in OSHPD 3, Section 1226.

Section 1226.6

This modification clarifies door width for clinics.

CHAPTER 30 – ELEVATORS AND CONVEYING SYSTEMS

Section 3007.1.1

This section is modified to indicate the correct reference for the elevator seismic switch.

APPENDIX CHAPTER 1 – ADMINISTRATION

Section 105.3.2, 106.3.4.2 & 106.4

These sections are modified to refer to the administrative requirements in Title 24, Part 1 that are applicable to OSHPD's plan submittal and approval process.

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

There are no technical, theoretical and empirical studies, reports or other documents to be identified regarding the development of these proposed regulations.

CONSIDERATION OF REASONABLE ALTERNATIVES

There were no alternatives considered by the Office. The proposed code changes are technical modifications that will provide clarification of existing requirements and consistency with nationally recognized standards and existing statute.

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

The proposed regulations will not adversely impact small businesses.

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

The scope of the proposed code changes is to make technical modifications for clarity and to conform to a nationally recognized standard. These regulations will have no significant adverse impact of businesses.

DUPLICATION OR CONFLICTS WITH FEDERAL REGULATIONS

The proposed code changes do not duplicate or conflict with federal regulations.