STATE OF CALIFORNIA
STATE AND CONSUMER SERVICES AGENCY
CALIFORNIA BUILDING STANDARDS COMMISSION
2525 NATOMAS PARK DR., SUITE 130
SACRAMENTO, CA 95833
(916) 263-0916 Phone
(916) 263-0959 Fax
Email: cbsc@dgs.ca.gov

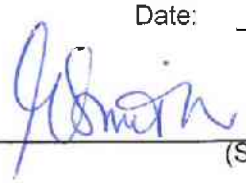
Office Use Item No. _____

PARTICIPATION COMMENTS FOR THE NOTICE DATED AUGUST 24, 2012
Written comments are to be sent to the above address.

WRITTEN COMMENT DEADLINE: OCTOBER 8, 2012

Date: October 8, 2012

From:
Ginger Smith
Name (Print or type)


(Signature)

California Primary Care Association
Agency, jurisdiction, chapter, company, association, individual, etc.

1231 I Street	Sacramento	CA	95814
Street	City	State	Zip

On behalf of the California Primary Care Association (CPCA), the 825 nonprofit community clinics and health centers (CCHCs), and the four million patients they serve in California, I thank you for the opportunity to comment on the Proposed Building Standards for primary care clinics. As you are likely aware, CCHCs from their inception in the 1960s, have worked to provide high quality medical and behavioral health services, reduce racial disparities, improve patient safety, coordinate care, improve overall efficiency, and ultimately through this work have improved population health. CCHCs have become the medical home for the majority of low-income, uninsured, and medically under-served Californians.

The community clinics and health centers CPCA represents are nonprofit, tax-exempt clinics that are licensed as community or free clinics, as defined under Section 1204 of the California Health and Safety Code, and provide services to patients on a sliding fee scale basis or, in the case of free clinics, at no charge to the patients. Over 400 of the 825 CCHCs in California are designated as Federally Qualified Health Centers (FQHCs); FQHCs receive federal grants under Section 330 of the Public Health Service Act (42 U.S.C. 254b) from the Bureau of Primary Health Care (BPHC), within the Health Resources and Services Administration (HRSA) of the Department of Health and Human Services (HHS).

We wish to express our gratitude for the months of work of OSHPD staff to draft these proposed revised regulations. CPCA and several of our member clinics have actively participated in the Clinic Stakeholder meetings that OSHPD has hosted. CPCA is very thankful for the responsiveness of OSHPD staff in regards to several of our prior recommendations. We are supportive of many of the proposed changes which recognize that primary care clinics are unique. By developing regulations that are appropriate to

community clinics, preventive and primary care will become more accessible across California.

We respectfully submit the following comments regarding additional improvements for the proposed regulations:

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Office Use Item No. _____

PARTICIPATION COMMENTS FOR THE NOTICE DATED AUGUST 24, 2012
Written comments are to be sent to the above address.

WRITTEN COMMENT DEADLINE: OCTOBER 8, 2012

Date: Oct 3, 2012

From: Ginger Smith
Name (Print or type) (Signature)

California Primary Care Association
Agency, jurisdiction, chapter, company, association, individual, etc.

1231 I Street Suite 400 | Sacramento | CA | 95814
Street | City | State | Zip

I/We (do not) agree with:

[**XX**]The Agency proposed modifications As Submitted on Section No. 217.0 Title 24 Part 4 & 5 Subsection 2

and request that this section or reference provision be recommended:

[ ] Approved [ ] Disapproved [ ] Held for Further Study [**XX**] Approved as Amended

Suggested Revisions to the Text of the Regulations:

CPCA suggests that in section 217.0, OSHPD 3SE subsection (2) be amended to read:

(2) Primary care clinics

We suggest the words 'that do not provide abortion services' be removed.

Reason: [The reason should be concise if the request is for "Disapproval," "Further Study," or "Approve As Amend" and identify at least one of the 9-point criteria (following) of Health and Safety Code §18930.]

CPCA supports the 3SE classification to include primary care clinics.
There is no reason or credible evidence offered to justify the exclusion of primary care clinics that do provide abortion services from the benefits of the 3SE clinic classification for primary care clinics. There is no evidence to support that services provided by primary care clinics that do provide abortion services are any more invasive or risky to public health and safety than routine services normally provided in primary care clinics that do not provide abortion services.

I/We (do) agree with:

[X] The Agency proposed modifications As Submitted on Section No. _Part 4&5 – Section 217_____

and request that this section or reference provision be recommended:

[ ] Approved [ ] Disapproved [ ] Held for Further Study [ ] Approved as Amended

Suggested Revisions to the Text of the Regulations:

Reason: [The reason should be concise if the request is for "Disapproval," "Further Study," or "Approve As Amend" and identify at least one of the 9-point criteria (following) of Health and Safety Code §18930.]

CPCA is in strong support of the proposed new subcategory for clinics - OSHPD 3SE. This subcategory recognizes that many clinics are smaller in size and complexity as compared with other OSHPD 3 facilities. Clinics in this subcategory provide basic primary care whose services are simple.

Due to the unique nature of these clinics, the proposed code appropriately exempts these clinics from some of the HVAC and plumbing requirements of other OSHPD-3 facilities. CPCA is very grateful for the work of OSHPD staff in developing this subcategory and support its implementation.

HEALTH & SAFETY CODE SECTION 18930

SECTION 18930. APPROVAL OR ADOPTION OF BUILDING STANDARDS; ANALYSIS AND CRITERIA; REVIEW CONSIDERATIONS; FACTUAL DETERMINATIONS

(a) Any building standard adopted or proposed by state agencies shall be submitted to, and approved or adopted by, the California Building Standards Commission prior to codification. Prior to submission to the commission, building standards shall be adopted in compliance with the procedures specified in Article 5 (commencing with Section 11346) of Chapter 3.5 of Part 1 of Division 3 of Title 2 of the Government Code. Building standards adopted by state agencies and submitted to the commission for approval shall be accompanied by an analysis written by the adopting agency or state agency that proposes the building standards which shall, to the satisfaction of the commission, justify the approval thereof in terms of the following criteria:

(1) The proposed building standards do not conflict with, overlap, or duplicate other building standards.

(2) The proposed building standard is within the parameters established by enabling legislation and is not expressly within the exclusive jurisdiction of another agency.

(3) The public interest requires the adoption of the building standards.

(4) The proposed building standard is not unreasonable, arbitrary, unfair, or capricious, in whole or in part.

(5) The cost to the public is reasonable, based on the overall benefit to be derived from the building standards.

(6) The proposed building standard is not unnecessarily ambiguous or vague, in whole or in part.

(7) The applicable national specifications, published standards, and model codes have been incorporated therein as provided in this part, where appropriate.

(A) If a national specification, published standard, or model code does not adequately address the goals of the state agency, a statement defining the inadequacy shall accompany the proposed building standard when submitted to the commission.

(B) If there is no national specification, published standard, or model code that is relevant to the proposed building standard, the state agency shall prepare a statement informing the commission and submit that statement with the proposed building standard.

(8) The format of the proposed building standards is consistent with that adopted by the commission.

(9) The proposed building standard, if it promotes fire and panic safety as determined by the State Fire Marshal, has the written approval of the State Fire Marshal.