

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

**REGARDING THE
CALIFORNIA MECHANICAL CODE AND CALIFORNIA PLUMBING CODE
CALIFORNIA CODE OF REGULATIONS, TITLE 24, PARTS 4 & 5**

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, PROBLEM, RATIONALE and BENEFITS:

- **TITLE 24, PART 4, CALIFORNIA MECHANICAL CODE**

Section 217.0 –O- Definitions

This creates the classification of OSHPD 3SE to specify OSHPD 3 clinics that can be granted special exemptions from existing code requirements. This brings the requirements for OSHPD3SE clinics closer to those of less-restrictive model code in order to reduce costs to clinics while ensuring patient safety. Additional description is added to assist code users in understanding the OSHPD 3SE facility type.

Section 407.4.1.4

This amendment allows OSHPD 3SE clinics to utilize air plenums. Use of air plenums will result in reduced construction costs.

Table 4-A Pressure Relationship and Ventilation Requirements for General Acute Care Hospitals, Skilled Nursing Facilities, Intermediate Care Facilities, Correctional Treatment Centers, Outpatient Facilities, and Licensed Clinics

The amendments to this table are consistent with the California Building Code in listing spaces that the code requires and specifying HVAC parameters for those spaces.

Table 4-B Filter Efficiencies for Central Ventilation and Air Conditioning Systems in General Acute Care Hospitals, Outpatient Facilities, and Licensed Clinics

The purpose of this modification is to include the new OSHPD 3SE category and specify the required filtration for it.

Section 602.1 General

This amendment allows OSHPD 3SE clinics to utilize air plenums. Use of air plenums will result in reduced construction costs.

Section 602.3.1 Flexible Ducts

This amendment exempts OSHPD 3SE facilities from the requirement that flexible duct have a maximum allowable length of 10 feet. Allowing OSHPD 3SE facilities to use flexible ductwork per the model code will result in reduced construction costs while maintaining appropriate patient safety, as well as, reducing barriers for conversion of existing structures to this facility type.

- **TITLE 24, PART 5, CALIFORNIA PLUMBING CODE**

Section 217.0 – O - Definitions

This creates the classification of OSHPD 3SE to specify OSHPD 3 clinics that can be granted special exemptions from existing code requirements. This brings the requirements for OSHPD3SE clinics closer

to those of less-restrictive model code in order to reduce costs to clinics while ensuring patient safety. Additional description is added to assist code users in understanding the OSHPD 3SE facility type.

Section 604.1

An amendment is added to permit OSHPD 3SE facilities to use CPVC in domestic water systems. Allowing CPVC, results in cost savings for construction of OSHPD 3SE clinics, as well as, reducing barriers for conversion of existing structures to this facility type.

Section 609.9 Disinfection of Potable Water System

The amendment provides for potable water system disinfection measures for OSHPD 3SE clinics in conformance with model code. This will reduce construction costs for these facilities.

612.0 This originally proposed amendment is being removed. It was erroneously located in the prior 45-day notice express terms.

612.2 This amendment removes the requirement for redundant hot water heating equipment for OSHPD 3SE facilities. This will result in a cost savings in construction and maintenance. Note: The amendment is relocated from previous proposal

701.1.2.1 [OSHPD 1, 2, 3 & 4] Permitted for [OSHPD 3SE]

This amendment allows ABS and PVC in sanitary sewer piping for OSHPD 3SE facilities. Allowing these code permitted materials, results in cost savings for construction of OSHPD 3SE clinics, as well as, reducing barriers for conversion of existing structures to this facility type.

906.2.1 [OSHPD 1, 2, 3 & 4, except OSHPD 3SE]

This amendment exempts OSHPD 3SE facilities from the requirement that each vent pipe shall terminate not less than twenty-five (25) feet (7260 mm) from any air intake or vent shaft. This change will reduce construction costs for OSHPD 3SE facilities, as well as, reducing barriers for conversion of existing structures to this facility type.

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

Clarification of various requirements is based on the nationally recognized standards "Guidelines for Design and Construction of Health Care Facilities, 2010 Edition" by the Facility Guidelines Institute with assistance from the U.S. Department of Health and Human Services.

Various requirements reflect developments in the nationally recognized standard "ANSI/ASHRAE/AHSE Standard 170-2008, Ventilation of Health Care Facilities".

"Centers for Disease Control and Prevention. Guidelines for environmental infection control in health-care facilities: recommendations of CDC and the Healthcare Infection Control Practices Advisory Committee (HICPAC)," by U.S. Department of Health and Human Services Centers for Disease Control and Prevention (CDC)

"HVAC Design Manual for Hospitals and Clinics" by ASHRAE

"ASHRAE Applications Handbook-Fundamentals," Chapter 7- Health Care Facilities

STATEMENT OF JUSTIFICATION FOR PRESCRIPTIVE STANDARDS:

The regulations do not mandate the use of technologies, equipment or prescriptive standards.

CONSIDERATION OF REASONABLE ALTERNATIVES

There are no alternatives for consideration.

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

No adverse impact on small business.

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

No facts, evidence, documents, testimony or other evidence of any significant adverse economic impact on business were identified.

DUPLICATION OR CONFLICTS WITH FEDERAL REGULATIONS

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