FINAL EXPRESS TERMS
FOR
PROPOSED BUILDING STANDARDS
OF THE
OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT

REGARDING PROPOSED CHANGES TO
CALIFORNIA BUILDING CODE
CALIFORNIA CODE OF REGULATIONS, TITLE 24, PART 2, VOLUME 2

LEGEND FOR EXPRESS TERMS
1. Existing California amendments or code language being modified are in italics when they appear in the model code text: All such language appears in *italics*, modified language is underlined.
2. New California amendments: All such language appears *underlined and in italics*.
3. Repealed text: All such language appears in ~~strikeout~~.

EXPRESS TERMS

2013 CALIFORNIA BUILDING CODE

CHAPTER 2
DEFINITIONS

SECTION 201
GENERAL

201.1 Scope. Unless otherwise expressly stated, the following words and terms shall, for the purposes of this code, have the meanings shown in this chapter.

…

SECTION 202
DEFINITIONS

…

Freestanding Acute Psychiatric Building (APB). [OSHPD 1] *A freestanding building, as defined in the California Administrative Code Section 7-111, that provides 24-hour inpatient Acute Psychiatric Services as defined in the Health and Safety Code (H&SC) Section 1250(b) or as special services in accordance with H&SC Section 1255(a)(5) of a general acute care hospital defined in H&SC Section 1250(a) and all structures required for their continuous operation or access/egress.*

Freestanding Skilled Nursing Building (SNB). [OSHPD 1] *A freestanding building, as defined in the California Administrative Code Section 7-111, that provides skilled nursing and/or intermediate care as defined in the Health and Safety Code Section 1250(c) or (d), and all structures required for their continuous operation or access/egress.*

General Acute Care Building (GAC Building). [OSHPD 1] *Hospital buildings as defined in the California Administrative Code Section 7-111 and all structures required for their continuous operation or access/egress, except Freestanding Skilled Nursing Building (SNB) and Acute Psychiatric Building (APB).*

Non-General Acute Care Building (Non-GAC Building). [OSHPD 1] *A non-freestanding SPC building, which is removed from general acute care services in accordance with the Section 3418A that remains under OSHPD jurisdiction as part of an OSHPD 1 Hospital building.*

(Relocated from Section 3418A.2) ***SPC BUILDING. [OSHPD 1]*** *Means a structure with an independent vertical and lateral force resisting system (LFRS) and a distinct building structural performance category assigned by OSHPD.*

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CHAPTER 16*A*
STRUCTURAL DESIGN

SECTION 1601*A*
GENERAL

1601*A*.1 Scope. The provisions of this chapter shall govern the structural design of buildings, structures and portions thereof regulated by this code.

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SECTION 1616*A*
MODIFICATIONS TO ASCE 7

1616A.1 General. *The text of ASCE 7 shall be modified as indicated in Sections 1616A.1.1 through 1616A.1.42.*

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1616A.1.17 ASCE 7, Section 13.1.3. [OSHPD 1 & 4] *Modify ASCE 7 Section 13.1.3 by the following:*

The design of supports and attachments for all nonstructural components shall have a component importance factor, I_p, equal to 1.5.

Exception: *Freestanding Skilled Nursing or Acute Psychiatric Buildings, not providing services/systems, utilities, or access/egress to General Acute Care Buildings designated as SPC 3 or higher in accordance with Chapter 6 of the California Administrative Code, shall be permitted to use component importance factor, I_p, as shown in Table 1616A.1.17.*

TABLE 1616A.1.17
COMPONENT IMPORTANCE FACTOR (I_P)[1] FOR
FREESTANDING SKILLED NURSING AND ACUTE PSYCHIATRIC BUILDINGS

Description	Importance Factor (I_p)[1]
Architectural components	1.0

Mechanical and electrical components	1.5
Medical devices	1.5
Piping, including in-line components	1.5
HVAC ducts, including in-line components	1.0
Electrical raceways	1.0

[1]Components required for life-safety purposes after an earthquake, including emergency and standby power systems, fire protection sprinkler systems, fire alarm control panels, and egress stairways shall have a component importance factor (I_p) of 1.5.

...

CHAPTER 17*A*
SPECIAL INSPECTIONS AND TESTS

SECTION 1701*A*
GENERAL

1701*A*.1 Scope. The provisions of this chapter shall govern the quality, workmanship and requirements for materials covered. Materials of construction and tests shall conform to the applicable standards listed in this code.

...

1705A.12.4 Special Seismic Certification. [OSHPD 1 & 4] The registered design professional shall specify on the construction documents the requirements for special seismic certification by analysis, testing or experience data for equipment and components listed in Section *1705A.12.4.1.*

Active or energized equipment and components shall be certified exclusively on the basis of approved shake table testing in accordance with ICC-ES AC 156.

Minimum of two equipment/components shall be tested for a product line with similar structural configuration. Where a range of products are tested, the two equipment/components shall be either the largest and smallest, or approved alternative representative equipment/components.

Exception: *When a single product (and not a product line with more than one product with variations) is certified and manufacturing process is ISO 9001 certified, one test shall be permitted.*

All tests shall be performed by an independent laboratory having accreditation to the International Standards Organization (ISO) accreditation standard 17025 or shall be under the responsible charge of an independent California licensed engineer. Test reports shall be reviewed and accepted by an independent California licensed structural engineer.

For a multi-component system, where active or energized components are certified by tests, connecting elements, attachments, and supports can be justified by supporting analysis.

1705A.12.4.1 *Special seismic certification shall be required for the following systems, equipment, and components:*

1. Emergency and standby power systems.

2. *Elevator equipment (excluding elevator cabs).*
3. *Components with hazardous contents.*
4. *Exhaust and Smoke control fans.*
5. *Switchgear and Switchboards.*
6. *Motor control centers.*
7. *Radiography and fluoroscopy systems in fluoroscopy rooms.*
8. *CT (Computerized Tomography) systems.*
9. *Air conditioning units.*
10. *Air handling units.*
11. *Chillers, evaporators, and condensers.*
12. *Cooling Towers.*
13. *Transformers.*
14. *Electrical substations.*
15. *UPS and batteries.*
16. *Distribution panels.*
17. *Control panels.*
18. *Power isolation and correction systems.*
19. *Motorized surgical lighting systems.*
20. *Motorized operating table systems*

Exceptions:

1. *Equipment and components weighing not more than 20 lbs. supported directly on structures (and not mounted on other equipment or components) with supports and attachments in accordance with this code.*
2. *Movable (mobile) and temporary equipment/components, which are not anchored to structure or permanently attached to the building utility services such as electricity, gas, or water. For the purposes of this requirement, "permanently attached" shall include all electrical connections except plugs for duplex receptacles.*
3. *Pipes, ducts, conduits, and cable trays, excluding in-line equipment and components.*
4. *Underground tanks.*
5. *Electric motors and pumps not more than 10 hp. rigidly supported directly on structures (and not mounted on other equipment or components) with supports and attachments in accordance with this code.*
6. *Components where importance factor, I_p, is permitted to be 1.0 by this code.*

…

CHAPTER 34*A*
EXISTING STRUCTURES

SECTION 3401*A*
GENERAL

3401*A*.1 Scope. The provisions of this chapter shall control the alteration, repair, addition and change of occupancy of existing structures *for applications listed in Sections 1.10.1 (OSHPD 1), and 1.10.4 (OSHPD 4) regulated by the Office of Statewide Health Planning and Development (OSHPD).*

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SECTION 3411A
ADDITIONS, ALTERATIONS, REPAIRS, AND SEISMIC RETROFIT TO EXISTING BUILDINGS OR STRUCTURES DESIGNED IN ACCORDANCE WITH PRE-1973 BUILDING CODE

3411A. 1 General. *Provisions of this section shall apply to hospital buildings which were originally designed to pre-1973 building code and not designated as SPC 3 or higher in accordance with Chapter 6 of the California Administrative Code.*

3411A.1.1 Incidental and minor structural alteration, additions or repairs. *Incidental and minor structural additions shall be permitted provided the additions meet this code for new construction using importance factor, Ie, equal to or greater than 1.0. Alterations, or repair to existing gravity and lateral load-resisting systems shall be made to conform to the requirements of Sections 3404A or 3405A respectively using importance factor, Ie, equal to or greater than 1.0.*

3411A.1.1.1 Nonstructural Components. *Component importance factor, I_p, shall be permitted to be 1.0.*

Exception: *Components required for life-safety purposes after an earthquake, including emergency and standby power systems, fire protection sprinkler systems, fire alarm control panels, and egress stairways shall have a component importance factor (I_p) of 1.5.*

3411A.1.2 Major structural alteration, additions, or repairs. *Major structural alterations, additions, or repairs shall be in accordance with Sections 3403A, 3404A, or 3405A respectively.*

…

SECTION 3418A [OSHPD 1]
REMOVAL OF HOSPITAL BUILDINGS FROM GENERAL ACUTE CARE SERVICES

3418A.1 General. *The requirements of this section shall apply when general acute care services are completely removed from SPC buildings or when buildings are removed from OSHPD jurisdiction. All buildings that remain under the OSHPD jurisdiction, after one or more SPC buildings are removed, shall satisfy the requirements of the California Building Standards Code. Approval of construction documents and a building permit are required for removal of SPC Buildings from general acute care services or removal of buildings from OSHPD jurisdiction.*

3418A.2 Definitions. *The following words and terms are applicable to this section only:*

BUILDING. *The area included within surrounding exterior walls or any combination of exterior walls and fire walls (as described in Sections 202 and 706) exclusive of vent shafts and courts. Areas of the building not provided with surrounding walls shall be included in the building area if such areas are included within the horizontal projection of the roof or floor above. A building may consist of one or more adjacent SPC Buildings.*

GENERAL ACUTE CARE SERVICE. *Means basic and supplemental services, as defined in Section 1224.3, provided in a general acute care hospital building, as defined in Section 1224.3 and the California Administrative Code, Chapter 6, Section 1.2.*

(Relocated to Section 202) ~~***SPC BUILDING.*** *Means a structure with an independent vertical and lateral force resisting system (LFRS) and a distinct building structural performance category assigned by OSHPD.*~~

SPC SEISMIC SEPARATION. *Means a building separation in accordance with the California Administrative Code, Chapter 6 Section 3.4.*

STRUCTURAL SEPARATION. *Means a building separation in accordance with this code.*

3418A.3 Establishing eligibility for removal from general acute care service. *In order to establish that one or more SPC buildings are eligible for removal from general acute care service, the hospital owner shall submit construction documents showing that after the SPC Buildings are removed from general acute care service:*

1. *All basic acute care services or supplemental services on the hospital's license are provided in SPC buildings satisfying the requirements for SPC-2, SPC-3, SPC-4, or SPC-5.*

   Exception: *If the hospital includes SPC-1 buildings that are not being removed from general acute care service, and these SPC-1 buildings have an approved extension to the SPC-2 deadline, basic acute care services or supplemental services on the hospital's license are permitted to remain in these SPC buildings for the duration of their extension or until these SPC-1 buildings are removed from general acute care service, whichever comes first.*

2. *All basic acute care services or supplemental services on the hospital's license are provided in SPC buildings satisfying the requirements for NPC-3, NPC-4, or NPC-5.*

   Exception: *Services shall be permitted to be located in SPC buildings satisfying the requirements of NPC-2 if the SPC buildings have approved extension to NPC-3 deadline.*

3. *The hospital complies with all egress requirements, including occupant load, number of required exits and travel distance to exits, and provides evidence that no egress from any acute care hospital building passes through the SPC buildings removed from general acute care service, SPC-1 buildings, or through buildings not under OSHPD jurisdiction.*

   Exceptions:
   1. *If the SPC building has an approved extension to the SPC-2 deadline, existing egress through the SPC-1 building shall be permitted for the duration of the extension or until the SPC-1 Building is removed from general acute care service, whichever comes first.*
   2. *When permitted by Section 3417A.1.1.1.6.*

4. *No SPC building removed from general acute care service is used as a smoke compartment for any acute care hospital building. Buildings not under OSHPD jurisdiction shall not be used as a smoke compartment for any acute care hospital building.*

5. *Structural separation, fire barriers and fire walls shall satisfy the requirements of the California Building Standards Code.*

   Exception: *An SPC seismic separation in accordance with the California Administrative Code Chapter 6 Section 3.4 shall be deemed to satisfy the building structural/seismic separation requirement in this section for SPC buildings that will remain under OSHPD jurisdiction.*

6. *If the SPC building removed from general acute care service shares a common fire alarm system with the acute care hospital, the main fire alarm control panel shall be located in an acute care hospital building. The SPC building removed from general acute care service shall be in a separate zone monitored by the main fire alarm control panel. Flexible connections shall be provided for conduits/conductors crossing structural or SPC seismic separation joints. If the intent is to place the SPC building under local jurisdiction, the building shall satisfy Section 3418A.5.1.*

   Exception: *Flexible connections for fire alarm conduits/conductors crossing seismic separation joints and fail safe shut-off valves, and disconnects for utilities between an SPC building removed from general acute care service and adjacent SPC-1 or SPC-2 buildings may be omitted, provided the fire alarm and utilities in the adjacent SPC-1 and SPC-2 buildings have no connection to any SPC-3, SPC-4, and SPC-5 buildings providing general acute care service.*

7. *If the SPC building removed from general acute care service shares the fire sprinkler system with the acute care hospital, an isolation valve with a tamper switch shall be provided to isolate the portion of the system serving the SPC building removed from acute care service. Flexible connections shall be provided in piping that crosses structural or SPC seismic separation joints. The fire sprinkler system shall not originate in the SPC building removed from general acute care service. If the intent is to place the building under local jurisdiction, the building shall satisfy Section 3418A.5.1.*

8. *Patient access as required by Section 1224.4.7.5 does not pass through an SPC building removed from general acute care service or through buildings that are not under the jurisdiction of OSHPD.*

9. *The primary accessible entrance to the hospital is not through an SPC building removed from general acute care service or through buildings that are not under the jurisdiction of OSHPD.*

10. *No utilities servicing acute care hospital buildings originate in or pass through, over, or under, an SPC building removed from general acute care service, except as permitted by Section 3416A.1.1.1.5, or a building not under OSHPD jurisdiction.*

11. *If utilities originating in an acute care hospital building feed a SPC building removed from general acute care hospital service, fail safe shut-off valves and/or disconnects shall be provided that permit isolation of the SPC building removed from general acute care service from the hospital utilities. Flexible connections shall be provided for all utilities crossing*

structural or SPC seismic separation joints.

Exception: *Flexible connections for fire alarm conduits/conductors crossing seismic separation joints and fail safe shut-off valves, and disconnects for utilities between an SPC building removed from general acute care service and adjacent SPC-1 or SPC-2 buildings may be omitted, provided the fire alarm and utilities in the adjacent SPC-1 and SPC-2 buildings have no connection to any SPC-3, SPC-4, and SPC-5 buildings providing general acute care service.*

3418A.4 Buildings intended to remain under OSHPD jurisdiction.

3418A.4.1 Qualifying non-acute care services*. In order for a building to remain under OSHPD jurisdiction that is removed from general acute care service, it shall contain one or more qualifying services. Qualifying services include:*

a. Services considered "Outpatient Clinical Services" as defined in H&SC § 129730 (a)

i. Administrative space

ii. Central sterile supply

iii. Storage

iv. Morgue and autopsy facilities

v. Employee dressing rooms and lockers

vi. Janitorial and housekeeping facilities

vii. Laundry

b. Outpatient portions of the following services (with no more than 25 percent in-patient use), including but not limited to:

i. Surgical

ii. Chronic dialysis

iii. Psychiatry

iv. Rehabilitation, occupational therapy, or physical therapy

v. Maternity

vi. Dentistry

vii. Chemical dependency

c. Services that duplicate Basic Services, as defined in H&S §1250, or services that are provided as part of a Basic Service, but are not required for facility licensure (with no more than 25 percent in-patient use).

All hospital support services listed in Section 3418A.4.1 Item a that are located in an SPC building at the time general acute care services are removed may remain, provided the California Department of Public Health certifies to the Office that it has received and approved a plan that demonstrates how the health facility will continue to provide all basic services in the event of any emergency when the SPC building may no longer remain functional. This certification shall be submitted by hospital to the Office prior to approval of the application to remove the SPC building from general acute care service.

***3418A.4.2 Maintaining existing nonacute care services under existing license**. Existing approved non-acute care occupancies, or services, existing in the SPC building at the time it is removed from general acute care service shall be permitted to remain, and removal of the SPC building from general acute care service is not considered a change in occupancy. The enforcement agency shall be permitted to require evidence that the existing occupancies and services were in compliance at the time they were located in the SPC building. Any hospital support services located in the building removed from general acute care service, including administrative services, central sterile supply, storage, morgue and autopsy, employee dressing rooms and lockers, janitorial and housekeeping service, and laundry, shall be in excess of the minimum requirements for licensure and operation. Prior approval by the California Department of Public Health shall be obtained by hospital to maintain these services in the SPC building removed from acute care service.*

***3418A.4.3 Change of licensed services under existing license.** A change of service or function for all, or a portion, of the SPC building removed from general acute care service requires compliance with the current requirements for that service, including accessibility requirements in accordance with Chapter 11B.*

***3418A.4.3.1 Skilled nursing or acute psychiatric services.** When general acute care services are removed from an SPC building which is intended to be used for skilled nursing or acute psychiatric services, and the new services will be licensed under the existing license of the general acute care hospital these new services shall comply with Section 3416A.1.1.1.5 for a nonconforming hospital building.*

***3418A.4.3.2 Outpatient clinical services.** When general acute care services are removed from an SPC building which is intended to be used for outpatient clinical services under the existing acute care hospital license, the building is required to comply with the current OSHPD 3 code requirements for the new service.*

***3418A.4.4 SPC buildings removed from general acute care service with new license.** When general acute care services are removed from an SPC building, and new services provided in the SPC building are issued an initial license, as determined by the California Department of Public Health, as a skilled nursing facility or acute psychiatric hospital, the SPC building shall comply with the new building code requirements or equivalent provisions of the California Building Standards code at the time of application.*

***3418A.4.5 Change of building occupancy or division.** When an SPC building is removed from general acute care service with or without change of license, the new occupancy group and division of the building, and/or new service or function, shall be established**.** A new certificate of occupancy shall be required for the building removed from general acute care service.*

***3418A.5 Change in jurisdiction for buildings removed from general acute care service.** Except as provided by Section 3418A.5.3, at the hospital's discretion, a building removed from general acute care service shall be permitted to be placed under the jurisdiction of the local enforcement agency. To be eligible for a change in jurisdiction, the building removed from general acute care service shall satisfy the requirements of Section 3418A.5.1.*

***3418A.5.1 Eligibility for change in jurisdiction.** For a building removed from general acute care*

service to be eligible for a change in jurisdiction to the local enforcing agency, all the following criteria shall be satisfied:

a. *The building removed from general acute care service shall be freestanding, as defined in the California Administrative Code, Section 7-111.*

b. *Any hospital support services located in the building removed from general acute care service, including administrative services, central sterile supply, storage, morgue and autopsy, employee dressing rooms and lockers, janitorial and housekeeping service, and laundry, shall be in excess of the minimum requirements for licensure and operation. Prior approval by the California Department of Public Health shall be obtained by hospital to locate these services in the building removed from general acute care service.*

c. *Services/systems and utilities (e.g. power, emergency power, communication/data/nurse-call systems, space-heating systems, fire alarm system, fire-sprinkler system, medical gas & plumbing systems) shall be separate and independent from those serving any buildings under OSHPD jurisdiction.*

d. *If the building being transferred to the jurisdiction of the local enforcing agency is adjacent to a building under OSHPD jurisdiction and fire resistive construction separations are required, they shall be located in the building under OSHPD jurisdiction.*

3418A.5.2 Modification of buildings removed from OSHPD jurisdiction. *The owner of the building shall be responsible for bringing the building into compliance with all requirements of the new authority having jurisdiction. If a building requires modification to become eligible for removal from OSHPD jurisdiction, the construction project shall be closed with compliance by OSHPD prior to the change in jurisdiction. All occupancy separation, set-back, and allowable area requirements shall be enforced.*

3418A.5.3 Buildings not eligible for change in jurisdiction. *The following freestanding buildings shall remain under OSHPD jurisdiction:*

a. *Any building in which basic and/or supplementary services are provided for a general acute care hospital, acute psychiatric hospital, and general acute care hospital providing only acute medical rehabilitation center services.*

b. *Any building which provides required patient access, egress, or smoke compartment for a Building under OSHPD's jurisdiction.*

c. *Any building in which services under OSHPD jurisdiction are provided, including skilled nursing services, intermediate care services, acute psychiatric services, and distinct part skilled nursing or intermediate care services.*

d. *Any building providing central plant or utility services to a building under OSHPD jurisdiction.*

e. *Any building through which utilities pass through, over or under, to serve a building under OSHPD jurisdiction.*

3418A.6 Vacant space. *With the removal of general acute care services, the vacated space must be re-classified with an intended occupancy as required under Section 302. If the hospital determines that the building or space in the SPC building removed from general acute care service will be vacant, the hospital shall demonstrate that unsafe conditions as described in Section 116.1 are not created.*

3418A.7 Demolition: *Demolition of SPC buildings to be removed from general acute care services shall be permitted when buildings remaining under OSHPD's jurisdiction, after demolition, satisfy the requirements of the California Building Standards Code and demolition activity does not impair the operation and/or safety of any buildings that remain under the OSHPD's jurisdiction. Demolition shall be in accordance with Section 3303.*

SECTION 3419A [OSHPD 1]
HOSPITAL BUILDINGS REMOVED FROM GENERAL ACUTE CARE SERVICES

3419A.1 General. *The requirements of this section shall apply to buildings removed from general acute care services that remain under OSHPD jurisdiction.*

3419A.2 Non-GAC buildings. *Non-GAC buildings shall conform to the requirements of Section 1.10.1.*

3419A.3 Freestanding buildings. *Application and enforcement of freestanding buildings removed from general acute care services but remain under OSHPD jurisdiction shall be in accordance with Section 1.10.*

Freestanding hospital-owned clinic shall be permitted to be under the jurisdiction of OSHPD in accordance with the California Administrative Code Sections 7-2104, 7-2105, and 7-2106.

Notation:
Authority: Health and Safety Code Section 129850
Reference: Health and Safety Code Sections 1275 and 129850