REVISION RECORD FOR THE
STATE OF CALIFORNIA

SUPPLEMENT

January 1, 2009

2007 Title 24, Part 1, California Administrative Code

PLEASE NOTE: The date of this Supplement is for identification purposes only. See the History Note Appendix for the adoption and effective dates of the provisions.

It is suggested that the section number as well as the page number be checked when inserting this material and removing the superseded material. In case of doubt, rely on the section numbers rather than the page numbers because the section numbers must run consecutively.

It is further suggested that the material be retained with this revision record sheet so that the prior wording of any section can be easily ascertained.

Please keep the removed pages with this revision page for future reference.

Note
Due to the fact that the application date for a building permit establishes the California Building Standards Code provisions that are effective at the local level, which apply to the plans, specifications, and construction for that permit, it is strongly recommended that the removed pages be retained for historical reference.

Remove Existing Pages
v and vi
109 through 142
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Item No. 5510S003
CALIFORNIA CODE OF REGULATIONS, TITLE 24
California Agency Information Contact List

California Energy Commission
Energy Hotline ..................................... (800) 772-3300
Building Efficiency Standards
Appliance Efficiency Standards
Compliance Manual/Forms

California State Lands Commission
Marine Oil Terminals ............................. (562) 499-6317

California State Library
Construction Standards .......................... (916) 445-9604

Corrections Standards Authority
Local Adult Jail Standards ......................... (916) 324-1914
Local Juvenile Facility Standards ................ (916) 324-1914

Department of Consumer Affairs—Acupuncture Board
Office Standards .................................. (916) 445-3021

Department of Consumer Affairs—Board of Pharmacy
Pharmacy Standards ............................... (916) 574-7900

Department of Consumer Affairs—Bureau of Barbering and Cosmetology
Barber and Beauty Shop and College Standards ............................................... (916) 952-5210

Department of Consumer Affairs—Bureau of Home Furnishings and Thermal Insulation
Insulation Testing Standards ....................... (916) 574-2041

Department of Consumer Affairs—Structural Pest Control Board
Structural Standards .............................. (800) 737-8188

Department of Consumer Affairs—Veterinary Medical Board
Veterinary Hospital Standards .................... (916) 263-2610

Department of Food and Agriculture
Meat & Poultry Packing Plant Standards ....... (916) 654-0509
Dairy Standards ..................................... (916) 654-0773

Department of Health Services
Organized Camps Standards ...................... (916) 449-5661
Public Swimming Pools Standards ............. (916) 449-5661
Asbestos Standards ................................ (510) 620-2874

Department of Housing and Community Development
Residential—Hotels, Motels, Apartments
Single-Family Dwellings .......................... (916) 445-9471
Permanent Structures in Mobilehome and Special Occupancy Parks ............... (916) 445-0481
Factory-Built Housing, Manufactured Housing and Commercial Modular
Mobile Homes—Permits & Inspections
Northern Region ................................... (916) 255-2501
Southern Region ................................... (951) 782-4420
Employee Housing Standards ................... (916) 445-9471

Department of Water Resources
Gray Water Installations Standards .............. (916) 651-9667

Division of the State Architect—Access Compliance
Access Compliance Standards ................. (916) 445-8100

Division of the State Architect—Structural Safety
Public Schools Standards ......................... (916) 445-8100
Essential Services Building Standards .......... (916) 445-8100

Division of the State Architect—State Historical Building Safety Board
Alternative Building Standards .................. (916) 445-8100

Office of Statewide Health Planning and Development
Hospital Standards ................................ (916) 654-3139
Skilled Nursing Facility Standards ............. (916) 654-3139
Clinic Standards .................................. (916) 654-3139
Permits .............................................. (916) 654-3362

Office of the State Fire Marshal
Code Development and Analysis ............... (916) 445-8200
Fire Safety Standards ............................ (916) 445-8200
Fireplace Standards .............................. (916) 445-8200
Day Care Centers Standards .................... (916) 445-8200
Exit Standards .................................... (916) 445-8200
CHAPTER 7

SAFETY STANDARDS FOR HEALTH FACILITIES

ARTICLE 1

GENERAL

7-101. Scope. The regulations in this part shall apply to the administrative procedures necessary to implement the Alfred E. Alquist Act of 1983 and to comply with State Building Standards Law.

Section 129680, Health and Safety Code, authorizes the OSHPD to enforce and amend the California Building Standards Code for the safety of hospitals, skilled nursing facilities and intermediate care facilities.

Unless otherwise stated, all references to sections of statute are sections found in the Health and Safety Code.

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675–129998

HISTORY:

1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-101. Filed with the secretary of state on August 14, 1996, becomes effective September 18, 1996. Approved by the California Building Standards Commission on March 19, 1996

7-103. Jurisdiction. The following are within the jurisdiction of Office of Statewide Health Planning and Development:

(a) For development of regulations in the California Building Standards Code and enforcement thereof.

1. Hospital buildings as defined by Section 129725, Health and Safety Code. Correctional Treatment Centers shall certify to the Office in compliance with Section 7-156

2. Skilled nursing facilities as specified in paragraphs (2) and (3) of subdivision (b) of Section 129725, Health and Safety Code.

3. Intermediate care facilities as specified in paragraphs (2) and (3) of subdivision (b) of Section 129725, Health and Safety Code.

(b) For development of regulations in the California Building Standards Code

1. Clinics, as defined by Section 1200 and 129725 (b) (1), Health and Safety Code, are under the jurisdiction of the local building official for enforcement, except as otherwise specified in Article 21, Section 7-2104 (d) of this chapter.

Exception: When licensed under an acute care hospital and serving more than 25 percent inpatients pursuant to Sections 129725 (b) (1) and 129730, Health and Safety Code, the Office shall retain jurisdiction for enforcement.

2. Correctional Treatment Centers, as defined by Section 129725 (b) 6, 7 (A) or 7 (B), Health and Safety Code, operated by or to be operated by a law enforcement agency of a city, county or a city and county are under the jurisdiction of the local enforcing agency for enforcement.

Correctional Treatment Centers shall certify to the Office in compliance with Section 7-156.

(c) For hospital buildings, skilled nursing facilities and intermediate care facilities, the Office shall also enforce the regulations of the California Building Standards Code as adopted by the Office of the State Fire Marshal and the Division of the State Architect/Access Compliance Section, for fire and life safety and accessibility compliance for persons with disabilities, respectively.

Correctional Treatment Centers shall certify to the Office in compliance with Section 7-156.

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675–129998

HISTORY:

1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-103. Filed with the secretary of state on August 14, 1996; becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

2. (OSHPD 2/96) 1996 Annual Code Adoption Cycle will amend Section 7-103, of Part 1, Title 24, C.C.R. Filed with the secretary of state on March 4, 1997; effective April 3, 1997. Approved by the California Building Standards Commission on February 6, 1997.

7-105. Authority. (Deleted)

HISTORY:

1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to delete Section 7-105. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

7-107. Interpretation. No regulation shall be construed to deprive the Office of its right to exercise the powers conferred upon it by law, or to limit the Office in such enforcement as is necessary to secure safety of construction, as required by Division 107, Chapter 7 (commencing with Section 129675), Health and Safety Code.

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675–129998

7-109. Application of regulations.

(a) Except as otherwise provided, these regulations and all applicable parts of the California Building Standards Code shall be the basis for design, plan review and observation of construction of hospital buildings, skilled nursing facilities and intermediate care facilities.

(b) Deleted.

(c) Additions, structural repairs or alterations to existing health facilities shall be made in accordance with the provisions of Part 2, Title 24, California Code of Regulations, California Building Standards Code.

(d) Before any health facility not previously licensed under Section 1250 of the Health and Safety Code can be licensed and used as a health facility, the applicant shall provide substantiating documentation from a structural engineer that the building is in full conformance with the requirements of the California
Building Standards Code for new buildings; if not, the building shall be reconstructed to conform to the requirements of the California Building Standards Code.

(e) Routine maintenance and repairs shall not require prior approval by the Office but shall be performed in compliance with the applicable provisions of the California Building Standards Code.

Authority: Health and Safety Code Sections 127015 and 129850.
Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1 (OSHPC 2935) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-109. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996

ARTICLE 2 DEFINITIONS

Unless otherwise stated, the words and phrases defined in this article shall have the meaning stated therein throughout Chapter 7, Part 1, Title 24.

7-111. Definitions.

ADDITION means any work which increases the floor or roof area or the volume of enclosed space of an existing building.

ALTERATION means any change in an existing building which does not increase and may decrease the floor or roof area or the volume of enclosed space.

APPROVED PLANS AND SPECIFICATIONS means all plans, specifications, addenda, change orders and deferred approvals which have the written approval of the Office. The stamp of the Office shall not be construed to mean the written approval of plans required by Section 7-113.

ARCHITECT means a person who is certified and holds a valid license under Chapter 3 (commencing with Section 5500), Division 3, the Business and Professions Code.

ASSIGNMENT means the project scope of services, expected results, completion time and the monetary limitation for the services.

ASSOCIATED STRUCTURAL ALTERATIONS means any change affecting existing structural elements or requiring new structural elements for vertical or lateral support of an otherwise nonstructural alteration.

CANDIDATE means an applicant who is accepted by the Office as eligible to participate in a Hospital Inspector Certification Examination pursuant to the qualification criteria described in these regulations.

CIVIL ENGINEER means an engineer holding a valid license under Chapter 7 (commencing with Section 6700), Division 3, the Business and Professions Code.

CONSTRUCTION means any construction, reconstruction or alteration of, or addition or repair to any health facility.

DEFERRED APPROVALS means those portions of the construction that cannot be fully detailed on the approved plans because of variations in product design and manufacture.

DIRECTOR means the Director of the Office of Statewide Health Planning and Development or the Director’s designee authorized to act in his or her behalf.

ENGINEERING GEOLOGIST means a person who is validly certified under Chapter 12.5 (commencing with Section 7800), Division 3, the Business and Professions Code, in that branch of engineering which is applicable.

FIRM includes any qualified corporation, legal entity, architect or engineer.

HEALTH FACILITY as used in this part and all applicable parts of the California Building Standards Code means any health facility licensed pursuant to Section 1250 of the Health and Safety Code under the jurisdiction of the Office.

(a) Hospital building includes:

1 HOSPITAL BUILDING as used in this part and other applicable parts of the California Building Standards Code means any building used for a health facility of a type required to be licensed pursuant to Section 1250 of the Health and Safety Code.

2 Except as provided in paragraph (7) of subdivision (b), hospital building includes a correctional treatment center, as defined in subdivision (c) of Section 1250, the construction of which was completed on or after March 7, 1973.

(b) HOSPITAL BUILDING does not include any of the following:

1 Any building in which outpatient clinical services of a health facility licensed pursuant to Section 1250 are provided that is separated from a building in which hospital services are provided. If any one or more outpatient clinical services in the building provide services to inpatients, the building shall not be included as a “hospital building” if those services provided to inpatients represent no more than 25 percent of the total outpatient visits provided at the building. Hospitals shall maintain on an ongoing basis, data on the patients receiving services in these buildings, including the number of patients seen, categorized by their inpatient or outpatient status. Hospitals shall submit this data annually to the State Department of Health Services.

2 Any building used, or designed to be used, for a skilled nursing facility or intermediate care facility, if the building is of single-story, wood-frame or light steel frame construction.

3 Any building of single-story, wood-frame or light steel frame construction in which only skilled nursing or intermediate care services are provided if the building is separated from a building housing other patients of the health facility receiving higher levels of care.

4 Any freestanding structures of a chemical dependency recovery hospital exempted under the provisions of subdivision (c) of Section 12752.

5 Any building licensed to be used as an intermediate care facility/developmentally disabled habilitative with six beds or less and any intermediate care facility/developmentally disabled habilitative of 7 to 15 beds that is a single-story, wood-frame or light-steel frame building.
SAFETY STANDARDS FOR HEALTH FACILITIES

6. Any building subject to licensure as a correctional treatment center, as defined in subdivision (j) of Section 1250, the construction which was completed prior to March 7, 1973.

7. Any building that meets the definition of a correctional treatment center pursuant to subdivision (j) of Section 1250, for which the final design documents were completed or the construction of which was begun prior to January 1, 1994, operated by or to be operated by the Department of Corrections, the Department of the Youth Authority, or by a law enforcement agency of a city, county, or a city and county.

B. In the case of reconstruction, alteration, or addition to, the facilities identified in this paragraph, and paragraph (6) or any other building subject to licensure as a general acute care hospital, acute psychiatric hospital, correctional treatment center, or nursing facility, as defined in subdivisions (a), (b), (j) and (k) of Section 1250, operated or to be operated by the Department of Corrections, the Department of the Youth Authority, or by a law enforcement agency of a city, county, or city and county, the reconstruction, alteration, or addition, itself, and not the building as a whole, nor any other aspect thereof, shall be required to comply with this chapter or the regulations adopted pursuant thereto.

HOSPITAL BUILDING SAFETY BOARD means the Board which shall advise the Director and, notwithstanding Health and Safety Code Section 13142.6 and except as provided in Section 18945, shall act as a board of appeals in all matters relating to the administration and enforcement of building standards relating to the design, construction, alteration and seismic safety of hospital building projects submitted to the Office pursuant to this chapter.

Further, notwithstanding Section 13142.6, the Board shall act as the board of appeals in matters relating to all fire and panic safety regulations and alternate means of protection determinations for hospital building projects submitted to the Office pursuant to this chapter.

The Board shall consist of 16 members appointed by the Director of the Office. Of the appointive members, two shall be structural engineers, two shall be architects, one shall be an engineering geologist, one shall be a geotechnical engineer, one shall be a mechanical engineer, one shall be an electrical engineer, one shall be a hospital facilities manager, one shall be a local building official, one shall be a general contractor, one shall be a fire and panic safety representative, one shall be a hospital inspector of record and three shall be members of the general public.

There shall be six ex officio members of the Board, who shall be the Director of the Office, the State Fire Marshal, the State Geologist, the Executive Director of the California Building Standards Commission, the State Director of Health Services, and the Deputy Director of the Facilities Development Division in the Office, or their officially designated representatives.

HOSPITAL INSPECTOR means an individual who has passed the OSHPD certification examination and possesses a valid Hospital Inspector Certificate (or Construction Inspector for Health Facilities Certificate) issued by the Office.

HOSPITAL INSPECTOR OF RECORD means an individual who is:

(a) An OSHPD certified Hospital Inspector, pursuant to the provisions of these regulations and
(b) Employed by the hospital governing board or authority and
(c) Approved by the architect and/or engineer in responsible charge and the Office as being satisfactory to inspect a specified construction project.

LICENSE means the basic document issued by the Department of Health Services permitting the operation of a health facility under the provisions of Title 22, California Code of Regulations, Division 5.

LOCAL GOVERNMENT ENTITY means a building department of a city, city and county, or county.

MINORITY, WOMEN AND DISABLED VETERAN BUSINESS ENTERPRISE shall have the respective meanings set forth in Section 10115.1 of the Public Contract Code.

NONREQUIRED STRUCTURAL ALTERATION means any alteration of existing structural elements or provision of new structural elements which is not necessary for vertical or lateral support of other work and is initiated by the applicant primarily for the purpose of increasing the vertical or lateral load carrying strength or stiffness of an existing building.

NONSTRUCTURAL ALTERATION means any alteration which neither affects existing structural elements nor requires new structural elements for vertical or lateral support and which does not increase the lateral force in any story by more than five percent.

OFFICE means the Facilities Development Division within the Office of Statewide Health Planning and Development.

PRIMARY GRAVITY LOAD RESISTING SYSTEM (PGLRS) means assembly of structural elements in the building that resists gravity loads, including floor and roof beams/girders supporting gravity loads or any other members designed to support significant gravity loads. Foundations supporting loads from the PGLRS shall be considered part of the PGLRS.

RECONSTRUCTION means the rebuilding of any "existing building" to bring it into full compliance with these regulations and all applicable parts of the California Building Standards Code.

SEISMIC FORCE RESISTING SYSTEM (SFRS) means assembly of structural elements in the building that resists seismic loads, including struts, collectors, chords, diaphragms and trusses. Foundations supporting loads from the SFRS shall be considered part of the SFRS.
SITE DATA means reports of investigation into geology, earthquake ground motion and geotechnical aspects of the site of a health facility construction project.

SMALL BUSINESS means a firm that complies with the provisions of Government Code Section 14837.

STRUCTURAL ELEMENTS means floor or roof diaphragms, decking, joists, slabs, beams or girders; columns; bearing walls; retaining walls; masonry or concrete nonbearing walls exceeding one story in height; foundations; shear walls or other lateral force resisting members; and any other elements necessary to the vertical and lateral strength or stability of either the building as a whole or any of its parts including connections between such elements.

STRUCTURAL ENGINEER means a person who is validly certified to use the title structural engineer under Chapter 7 (commencing with Section 6700), Division 3, the Business and Professions Code.

STRUCTURAL REPAIRS means any change affecting existing or requiring new structural elements primarily intended to correct the effects of deterioration or impending or actual failure, regardless of cause.

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-111. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

2. (OSHPD 1/96) 1996 Annual Code Adoption Cycle will amend Section 7-111, of Part 1, Title 24, C.C.R. Filed with the secretary of state on March 4, 1997; effective April 3, 1997. Approved by the California Building Standards Commission on February 6, 1997.

ARTICLE 3
APPROVAL OF PLANS AND SPECIFICATIONS

7-113. Application for plan, report or seismic compliance extension review.

(a) Except as otherwise provided in this part, before commencing construction or alteration of any health facility, the governing board or authority thereof shall submit an application for plan review to the Office, and shall obtain the written approval thereof by the Office describing the scope of work included and any special conditions under which approval is given.

1. The application shall contain a definite identifying name for the health facility, the name of the architect or engineer or engineer of record who is in general responsible charge of the work, the names of the architects or registered engineers responsible for the preparation of portions of the work, the estimated cost of the project and all such other information required for completion of the application. Refer to Section 7-131 regarding incremental design, bidding and construction.

2. Submission of documents to the Office may be in three consecutive stages:

A. Geotechnical Review: One application for plan review and, when applicable, three copies of the site data must be attached.

B. Preliminary Review: One copy of reports or preliminary plans and outline specifications. Two copies of preliminary plans and outline specifications must be submitted if additions, structural alterations or new buildings are included. Plans/drawings size shall not exceed 36 × 48 inches, and bundled sets of plans/drawings shall not exceed 40 lbs in weight.

C. Final Review: One copy of final plans and specifications or reports. Two copies must be submitted if additions, structural alterations or new buildings are included. Plans/drawings size shall not exceed 36 × 48 inches, and bundled sets of plans/drawings shall not exceed 40 lbs in weight.

(b) Application for seismic compliance extension requires submission of OSHPD Application Form #OSH-FD-384, “Application for 2008 Extension/Delay in Compliance.” The submittal must comply with the applicable requirements of Chapter 6, Article 1, Section 1.5.2 “Delay in Compliance.”

(c) For every project there shall be an architect or engineer of record in general responsible charge of reviewing and coordinating all submittals, except as set forth in Section 7-115(c).

1. A project may be divided into parts, provided that each part is clearly defined by a building or similar distinct unit. The part, so defined, shall include all portions and utility systems or facilities necessary to the complete functioning of that part. Separate assignments of architect or engineer of record may be made for the parts.

(d) The assignment of architect or engineer of record, and the responsibility for the preparation of plans and specifications and the administration of the work of construction for portions of the work shall be clearly designated on the application for approval of reports or plans and specifications.

Authority: Health and Safety Code Sections 18929 and 129675–130070
Reference: Health and Safety Code Section 129850

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-113. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

7-115. Preparation of plans and specifications and reports.

(a) All plans and specifications or reports, except as provided in (c) below shall be prepared under the general responsible charge of an architect or engineer of record. Prior to submittal to the office, the architect or engineer of record for a project shall sign every sheet of the drawings, and the title sheet, cover sheet or signature sheet of specifications and reports. A notation may be provided on the drawings indicating the architect's or engineer's role in preparing and reviewing the documents. Plans/drawings submitted to the office shall not exceed the size and weight described in Section 7-113 (a) (2).

1. Except as provided in paragraph 2 below, the architect or engineer of record in general responsible charge of the work shall be an architect or structural engineer.

2. For the purposes of this section, a mechanical, electrical or civil engineer may be the engineer of record in general responsible charge of alteration or repair projects that do not affect architectural or structural conditions.
and where the work is predominately of the kind normally performed by mechanical, electrical or civil engineers.

3 Preparation of plans and specifications and administration of the work of construction for designated portions of the work may be performed by other architects and/or engineers as provided in (b) below. Preparation of portions of the work by others shall not be construed as relieving the architect or engineer of record of his rights, duties and responsibilities under Section 129805 of the Health and Safety Code.

(b) Architects or engineers registered in the appropriate branch of engineering may be responsible for the preparation of plans and specifications and administration of the work of construction as permitted by their license or registration, and as provided below. Architects and engineers shall sign and affix their professional stamp to all drawings, specifications or reports that are prepared under their responsibility. All plans shall be signed and stamped prior to issuance of a building permit.

1. The structural plans and specifications or reports shall be prepared under the responsible charge of a structural engineer.
2. A mechanical or electrical engineer may prepare plans, specifications or reports for projects where the work is predominately of the kind normally prepared by mechanical or electrical engineers.
3. A civil engineer may prepare plans specifications or reports for the anchorage and bracing of nonstructural equipment.

(c) A licensed specialty contractor may prepare plans and specifications and may administer the work of construction for health facility construction projects, subject to the following conditions:

1. The work is performed and supervised by the licensed specialty contractor who prepares the plans and specifications.
2. The work is not ordinarily within the standard practice of architecture and engineering.
3. The project is not a component of a project prepared pursuant to 7-115 (a) and (b).
4. The contractor responsible for the design and installation shall also be the person responsible for the filing of reports, pursuant to Section 7-151, and
5. The work is limited to one of the following types of projects:
   A. Fire protection systems where none of the fire sprinkler system piping exceeds 2½ inches (63.5 mm) in diameter.
   B. Low voltage systems not in excess of 91 volts. These systems include, but are not limited to, telephone, sound, cable television, closed circuit video, nurse call systems and power limited fire alarm systems.
   C. Roofing contractor performing reroofing where minimum 3/4 inch (6.4 mm) on 12 inch (305 mm) roof slopes are existing and any roof mounted equipment needing remounting does not exceed 400 pounds.

D. Insulation and acoustic media not involving the removal or penetration of fire-rated walls, or ceiling and roof assemblies.

Authority: Health and Safety Code Sections 18929 and 129675-130070
Reference: Health and Safety Code Section 129850

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-115. Filed with the secretary of state on August 14, 1996; becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996

7-117. Site data.

(a) The site data reports shall be required for all proposed construction except:

1. As provided in Part 2, Title 24.
2. One-story wood-frame or light steel frame buildings of Type II or V construction and 4,000 square feet or less in floor area not located within Earthquake Fault Zones or Seismic Hazard Zones as shown in the most recently published maps from the California Geological Survey (CGS).
3. Nonstructural alterations.
4. Structural repairs for other than earthquake damage.
5. Incidental structural additions or alterations.

(b) Three copies of site data reports shall be furnished to the Office for review and evaluation prior to the submittal of the project documents for final plan review. Site data reports shall comply with the requirements of these regulations and Part 2, Title 24. Upon the determination that the investigation of the site and the reporting of the findings was adequate for the design of the project, the Office will issue a letter stating the site data reports are acceptable.

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7.117. Filed with the secretary of state on August 14, 1996; becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996

7-121. Preliminary plans and outline specifications.

(a) One copy of the preliminary plans and outline specifications shall be submitted to the Office. Two copies must be submitted if additions, structural alterations or new buildings are included. If applicable, each of the site data reports listed in Section 7-117 (a) 1 shall have been submitted previously. The preliminary design documents will be reviewed by the Office for compliance with Titles 19 and 24, California Code of Regulations. These documents shall provide the following data:

(b) Architectural, structural or other plans shall include:

1. Plot plan showing roads, fire flow supply and demand calculations, fire hydrants, courses and distances of property lines, existing buildings, proposed buildings, parking areas, sidewalks, topography and any easements of record.
2 Plans of basement, other floors or levels and roof which indicate:
   A. The function, occupancy or usage of each room, area or space. Floor plans for addition or alteration projects shall be accompanied by floor plans of the existing buildings showing the existing space usages.
   B. The size and location of each fixed equipment item as follows:
      (1) Fixed building service equipment which includes utility systems and machinery necessary for the effective functioning of the building such as heating, ventilating, air conditioning, elevators and communications
      (2) Other fixed equipment permanently fastened to the building or the ground which are required for the program function of the building.
   3 Provisions for meeting the fire and life safety requirements in Titles 19 and 24, either on preliminary plans or in outline specifications. At least the following shall be indicated:
      A. Compartment of the buildings
      B. Door swings and corridor widths
      C. Enclosures of stairwells and elevator shafts
      D. Location of fire alarm components, to include fire zones
      E. Extent of fire sprinkler coverage
   4 Assembly ratings as specified by the Underwriter's Laboratories, Inc, or other nationally recognized testing laboratories.
   5 Provisions for making facilities accessible to and usable by persons with disabilities in conformance with the California Building Standards Code, Title 24, California Code of Regulations

   (c) Mechanical plans shall include:
      1. Single line layouts of major ducts and piping systems.
      2. Location and layout of boiler room or space and major associated equipment and central heating, cooling and ventilating units.
      3. Fire dampers, smoke dampers and other fire safety items required by Titles 19 and 24, California Code of Regulations.
      4. Riser diagrams for multistory construction.

   (d) Electrical plans shall include:
      1. Plans showing space assignment
      2. Sizes and outline of fixed equipment, such as transformers, main switch gear, switch boards and generator sets.
      3. Simple riser diagrams for multistory construction showing arrangements of feeders and branch circuit panels.
      4. Simplified single-line diagram(s).
   5 Fire detector locations, exit and emergency lights and fire alarms systems required in Titles 19 and 24, California Code of Regulations.

   (e) Outline specifications shall include:
      1. A general description of the construction, including interior finishes, types and location of acoustical material and special floor coverings.
      2. A description of the plumbing, air conditioning, heating and ventilation systems, including controls, ducts and piping for all areas.
      3. A general description of electrical services including voltage, number and location of feeders; whether overhead or underground. A specific description of items to be served by emergency power and description of design considerations for special areas, such as anesthetizing locations and critical care areas.
      4. All fire and life safety items shown on the preliminary plans. These items shall include the flame spread rating of all applicable materials and finishes and a description of mechanical and electrical devices required for the intended occupancy of the building.

   (f) Acceptance of preliminary plans and outline specifications.

Upon completion of the review of the preliminary plans and outline specifications, the Office will return a marked-up set of the plans and specifications or a written report to the applicant indicating any items that need correction or clarification.

At the time the final plans and specifications are submitted to the Office, the marked-up copies of the preliminary plans and specifications shall accompany the other documents being filed.

Authority: Health and Safety Code Sections 127015 and 129850.
Reference: Health and Safety Code Sections 129675–129998

HISTORY:
1 (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-121. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

7-125. Final review of plans and specifications.

(a) One copy of the final plans and specifications and site data reports shall be submitted to the Office.

1. Two copies must be submitted if additions, structural alterations or new buildings are included.
2. The plans and specifications shall include: architectural, mechanical, electrical, structural seismic restraint, and fire and life safety details.

(b) Plans and specifications are to be completely and thoroughly checked by the responsible architect or engineer before submission to the Office. Plans and specifications which are incomplete or incorrect will be returned to the applicant.

1. Where a portion of the construction cannot be fully detailed on the approved plans because of variations in product design and manufacture, the approval of the plans for such portion may be deferred until the mate-
rrial suppliers are selected provided the following conditions are met:

A. The plans clearly indicate that a deferred approval by the Office is required for the indicated portions of the work prior to fabrication and installation.

B. The plans and specifications fully describe the performance and loading criteria for such work.

C. The deferred approval submittals are made in conformance with Section 7-153.

**Exception:** Seismic Force Resisting System (SFRS), Primary Gravity Load Resisting System (PGLRS) and stairs shall not be deferred.

2. Due to the difficulty of anticipating every unsatisfactory condition that might exist in connection with the existing work where alteration or reconstruction work is proposed, the following clause or one of similar meaning shall be included in all specifications to which the Office gives approval in connection with either reconstruction or alteration work: “The intent of the plans and specifications is to reconstruct the hospital building in accordance with the California Building Standards Code, Titles 19 and 24, California Code of Regulations. Should any conditions develop not covered by the approved plans and specifications wherein the finished work will not comply with Title 24, California Code of Regulations, a change order detailing and specifying the required work shall be submitted to and approved by the Office before proceeding with the work.”

(c) Final plans and specifications, and site data reports, except those items specified in Section 7-117 (a), shall be submitted to the Office for review and shall include the following:

1. Site data reports as previously accepted by the Office pursuant to Section 7-117 shall be included with the plans and specifications.

2. Architectural plans shall include, where applicable:
   A. Plot plan.
   B. Floor plans.
   C. Reflected ceiling plans.
   D. Roof plans.
   E. Elevations and sections.
   F. Necessary details.
   G. Schedule of finishes, doors and windows.
   H. Exit system.
   I. Fire and smoke wall locations.
   J. Occupancy separations and indicate different occupancies.
   K. Location and identifying data on major items of movable equipment and fixed hospital equipment; e.g., autoclaves, sterilizers, kitchen equipment, laboratory equipment, X-ray equipment, cabinets and storage racks.
   L. Anchorage of all equipment items shall be detailed.

**SAFETY STANDARDS FOR HEALTH FACILITIES**

**Exceptions:**

1. Equipment weighing less than 400 pounds supported directly on the floor or roof.
2. Furniture.
3. Temporary or movable equipment.
4. Equipment weighing less than 20 pounds supported by vibration isolators.
5. Equipment weighing less than 20 pounds suspended from a roof or floor or hung from a wall.

M. Fire extinguishers.

3. Structural plans shall include, where applicable:

   A. Plans of foundations, floors, roofs and any intermediate levels showing a complete design with sizes, sections and relative location of the various members and a schedule of beams, girders and columns. Assumed soil bearing pressures and type of material shall be shown on foundation plans.

   B. Details of all connections, assemblies and expansion joints.

   C. Details of structural framing systems necessary for support and seismic bracing of major nonstructural elements and items of major fixed building equipment and hospital equipment.

   **Exceptions:**

   1. Equipment weighing less than 400 pounds supported directly on the floor or roof.
2. Furniture.
3. Temporary or movable equipment.
4. Equipment weighing less than 20 pounds supported by vibration isolators.
5. Equipment weighing less than 20 pounds suspended from a roof or floor or hung from a wall.

D. Structural plans shall be accompanied by computations, stress diagrams and other pertinent data and shall be complete to the extent that calculations for individual structural members can be readily interpreted.

   The computations shall be prefaced by a statement clearly and concisely outlining the basis for the structural design and indicating the manner in which the proposed hospital building will resist vertical loads and horizontal forces. The computations shall be sufficiently complete to establish definitely that the structure will resist the loads and forces prescribed by these rules and regulations. Assumed safe bearing pressures on soils and ultimate strengths of concrete shall be given in computations and noted on plans. Where unusual conditions occur, such additional data as are pertinent to the work shall be submitted.

4. Mechanical plans shall include, where applicable:

   A. Radiators and steam-heated equipment, such as sterilizers, autoclaves, warmers and steam tables.
B. Heating and steam mains, including branches with pipe sizes.
C. Pumps, tanks, boiler breaching and piping, and boiler room accessories
D. Air conditioning systems with refrigeration equipment, water and refrigerant piping, and ducts.
E. Exhaust and supply ventilating systems showing duct sizes with steam or water connections and piping.
F. Size and elevation of street sewer, house sewer, house drains, street water main and water service into the building.
G. Location and size of soil, waste and vent stacks with connections to house drains, fixtures and equipment.
H. Size and location of hot, cold and circulation water mains, branches and risers from the service entrance, and tanks.
I. Riser diagram or other acceptable method to show all plumbing stacks with vents, water risers and fixture connections for multistory buildings.
J. Medical gas and special connections.
K. Fire extinguishing equipment such as fixed extinguishing systems, sprinklers, and wet and dry standpipes.
L. Plumbing fixtures and fixtures which require water and drain connections.
M. Anchorage of all equipment shall be detailed

Exceptions:
1. Equipment weighing less than 400 pounds supported directly on the floor or roof.
2. Furniture.
3. Temporary or movable equipment.
4. Equipment weighing less than 20 pounds supported by vibration isolators.
5. Equipment weighing less than 20 pounds suspended from a roof or floor or hung from a wall.

6. Architectural, structural, mechanical and electrical specifications which fully describe, except where fully indicated and described on the plans, the materials, workmanship and the kind, sizes, capacities, finishes and other characteristics of all materials, products, articles and devices.

7. Additions to or alterations and repairs of existing structures which include:
   A. Types of activities within the existing buildings, including distribution.
   B. Type of construction of existing buildings and number of stories.
   C. Plans and details showing attachment of new construction to existing structural, mechanical and electrical systems.

8. A title block or strip on each sheet of the construction document plans shall include the following:
   A. Name and address of the architect or engineer.
   B. Name and address of the project.
   C. Number or letter of each sheet.
   D. Date of preparation of each sheet and the date of revision, if any.
   E. The scale of each plan or detail.

9. The north point of reference and the location or reference dimensions of the building, with respect to the site boundaries and property lines, shown on all plot plans and on all floor plans where applicable.

(d) After the Office has made its check of the submitted documents, the marked-up set of plans and specifications will be returned to the architect or engineer. A set of prints from corrected plans and specifications shall be filed for recheck when the original check indicates that extensive changes are necessary. Where necessary corrections are of minor nature, corrected original plans and specifications may be filed for recheck. Changes in plans and specifications, other than changes necessary for correction, made after submission for approval, shall be brought to the attention of the Office in writing or by submission of revised plans and specifications identi-
fying those changes. Failure to give such notice voids any subsequent approval given to the plans and specifications.

The Office places its stamp on the original reproducible plans and the master cover sheet of the specifications when they have been corrected to comply with these regulations. This stamp is affixed for identification only and must not be construed as "written approval of plans" required in Section 129810 of the Health and Safety Code.

The prints, specifications, computations and other data filed with the application are the property of, and are retained by, the Office.

(e) The architect or engineer shall submit to the Office a set of plans and specifications bearing the identification stamp of the Office. Upon receipt of this set, the Office shall provide written approval of the plans and specifications.

Any changes made to the approved plans or specifications shall be made in accordance with Section 7-153. Any change,
erasure, alteration or modification not made in accordance with Section 7-153 of any plan or specification bearing the identification stamp of the Office shall void the approval of the application.

Authority: Health and Safety Code Sections 127015 and 129850

Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1 (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-125. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996

7-129. Time limitations for approval.

(a) Final plans and specifications shall be submitted to the Office within one year of the date of the Office’s report on preliminary plans and outline specifications or the application shall become void unless an extension has been requested and approved.

(b) The procedures leading to obtaining written approval of final plans and specifications shall be carried to conclusion without suspension or unnecessary delay. The application shall become void when either (1) prints from corrected plans or corrected original plans are not filed for recheck within six months after the date of return of checked plans to the architect or engineer; or (2) a set of prints of the stamped plans and specifications are not submitted to the Office within six months after the date shown on the stamp by the Office

(c) Construction, in accordance with the approved plans and specifications, shall commence within one year after obtaining the written approval of plans and specifications, or this approval shall become void. The Office may require that the plans and specification be revised to meet current regulations before reinstating a voided approval.

(d) If the work of construction is suspended or abandoned for any reason for a period of one year following its commencement, the Office’s approval shall become void. The Office may reinstate the approval as described in Section 7-129 (c) above.

Authority: Health and Safety Code Sections 127015 and 129850

Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1 (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-125.Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996

7-131. Incremental design, bidding and construction.

(a) Incremental design, bidding and construction or “fast-tracking” is a process by which construction of a building is commenced prior to completion of the contract documents for the total project. The Office will approve this process contingent upon receipt of application for approval of plans and specifications.

(b) Applicants wishing to employ the incremental process shall notify the Office no later than the date of submission of the application cited above. Increments shall be limited to complete phases of construction, such as foundations and base-

ment walls, structural framing, architectural work, mechanical work or electrical work. The following supplementary information shall accompany the application:

1 Transmittal letter requesting the use of the incremental or fast-track procedure
2 The site data reports required in Sections 7-117 and 7-125 (c)
3 A chart showing the proposed coordination of the design, bidding and construction schedules, including state and local plan review time and the estimated date of occupancy of the project.
4 The preliminary plans and outline specifications required in Section 7-121

(c) The plans of each construction increment shall be sufficiently definitive of the architectural, structural, mechanical and electrical elements, and the loadings thus summarized, to provide identification of the sources of dead, live and lateral loads for the purposes of review of design. Changes to the work done under previously approved increments shall be required if, upon submission of plans of subsequent increments, the summarized loadings are found to be incorrect or connection details are found to be incompatible.

(d) The plans of each construction increment shall clearly identify the scope of the work to be included in that particular increment. All plans are to be complete and thoroughly checked by the project architect or engineers as to design, detailing, dimensions and coordination with other increments before submission to the Office. The Office will return incomplete documents without review and request that the documents be completed and resubmitted.

(e) Time intervals between construction increments shall not be permitted unless specific, written approval is granted by the Office.

(f) Seventy percent of the fee, based upon the estimated construction cost of the entire facility, as calculated in accordance with Section 7-133, shall be paid to the Office upon the submission of the plans of the first construction increment. The final fee shall be based upon the determination of the final actual construction cost.

(g) After the Office has made its check of the submitted documents and the applicant has corrected the originals accordingly; the stamp of the Office of Statewide Health Planning and Development shall be placed on the original reproducible plans and the master copy sheet of the specifications. The stamp shall indicate the increment being approved. This incremental approval stamp is affixed for identification only and is not the written approval of plans cited in Section 7-125 (d). An Office approval letter shall be issued for each increment which clearly identifies the scope of work involved in the increment being approved. The letter for the final increment shall indicate approval of the entire project.

(h) Verifed compliance reports shall be submitted in conformance with Section 7-151; addenda and change orders, as per Section 7-153 for each increment. Where all increments are being constructed under a single general contract or under a designated agent responsible for the construction of the entire project, the verified reports may cover the work of more than one increment.
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(i) Approval of construction will be issued for each increment being constructed under a separate contract. Where all increments are being constructed under a single general contract or where an owner's agent is responsible for the construction of the entire project, final approval of the construction will be issued upon completion of the entire project.

Authority: Health and Safety Code Sections 127015 and 129850

HISTORY:
1 (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-131. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

7-133. Fees.

(a) The fee for plan review and field observation shall be based on the estimated cost of construction as specified below. If the actual construction cost for a hospital or skilled nursing facility project exceeds the estimated construction cost by more than five percent (5%), a further fee shall be paid to the Office, based on the applicable schedule specified in (a) (1) or (2) and computed on the amount by which the actual cost exceeds the estimated cost.

1. The fee for hospital buildings is 1.64 percent of the estimated construction cost;

   A The Office shall charge actual costs for review and approval of seismic evaluations and compliance plans prepared pursuant to Article 8, Chapter 1, Part 7, Division 107, (commencing with Section 130000) of the Health and Safety Code. Total cost paid for these review services shall be nonrefundable and shall be deducted from the fee for a future project involving seismic retrofit or new construction pursuant to the hospital building compliance plan approved by the Office.

2. The fee for skilled nursing and intermediate care facilities, as defined in Subdivision (e), (d), (e) or (g) of Section 1250, Health and Safety Code, is 1.5 percent of the estimated construction cost;

3. The minimum filing fee shall be $250.00. This filing fee is nonrefundable and shall be applied toward the total fee for plan review and field observation.

(b) The fee for submitting an amended seismic evaluation report or compliance plan is $250. The fee for review and approval of the amended report or compliance plan shall be subject to Section 7-133 (a) 1A above.

(c) The fee for submitting an application for extension to seismic compliance is $250.

Authority: Health and Safety Code Sections 18929 and 129675–130670
Reference: Health and Safety Code Section 129785

HISTORY:
1 (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-133. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

7-134. Fee refund

(a) Upon written request from the applicant, a fee refund may be issued pursuant to this section.

1 The written refund request must be submitted to the Office within:
   a One year of the date that a project is closed,
   b One year of the date the project is withdrawn by the applicant, or
   c One year of the date when an application may become void, based on the requirements of Section 7-129, Time Limitations for Approval.

2 No refund shall be issued before the date the project is closed or withdrawn or the application is voided.

3 If delinquent fees are owed to the Office for any health facility construction project at the subject facility, no refund shall be issued until the delinquent fees are paid.

4 Refunds, pursuant to Section 7-134, shall be exclusive of the $250 filing fee.

5 Refunds shall be calculated pursuant to Sections 7-134 (b) or (c).

(b) Refunds for projects that are completed. If the estimated construction cost of a project exceeds the actual construction cost by more than five percent (5%), the excess portion of the fees paid pursuant to Section 7-133 (a) (1) or (2) shall be refunded to the applicant.

Exception: The Office will not issue a refund if the applicant did not complete construction of at least 75% of the square footage included in the original approved plans and specifications for the project, or if the applicant reduces the scope of the project shown on the original approved plans by more than 25%.

(c) Refunds for projects that are withdrawn or cancelled. A portion of the fees paid to the Office, pursuant to Section 7-133, may be refunded to the applicant under the following specified circumstances:

1 If the applicant withdraws a project prior to commencement of plan review, the total fee, exclusive of the $250 filing fee, shall be refunded to the applicant.

2 If the applicant withdraws a project after commencement of plan review and prior to commencement of construction, 30% of the fee submitted for that project shall be refunded to the applicant.

3 If the applicant cancels a project after commencement of construction, the Office shall not issue a refund.

4 If a project submitted under an annual permit is withdrawn by the applicant, the $250 filing fee shall not be refunded by the Office.

5 If fees are paid for a project that is determined by the Office to be exempt from the plan review process or otherwise not reviewable under the Office's jurisdiction, the total fee, exclusive of the $250 filing fee, shall be refunded to the applicant.

(d) If the applicant is able to demonstrate extraordinary circumstances, the Director of the Office may authorize refunds in addition to those specified above.

ARTICLE 4
CONSTRUCTION

7-135. Time of beginning construction.
(a) Construction shall not commence until the health facility has applied for and obtained from the Office:
1. Written approval of the plans and specifications
2. A building permit
3. Written approval of the testing, inspection and observation program

Note: See Infection Control Program provisions of Title 22, Section 70739 (b)

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-135. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

7-137. Notice of start of construction.
(a) As soon as a contract has been awarded, the governing board or authority of the health facility shall provide to the Office, on a form provided by the Office, the following:
1. Name and address of the contractor
2. Contract price
3. Date on which contract was awarded
4. Date of construction start

Authority: Health and Safety Code Sections 127015, 129785 and 129850; and Government Code, Section 11152
Reference: Health and Safety Code Section 129785

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-137. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

7-139. Notice of suspension of construction.
(a) When construction is suspended for more than two weeks, the governing board or authority of the hospital shall notify the Office in writing.

(b) If the work of construction is suspended or abandoned for any reason for a period of one year following its commencement, the Office's approval shall become void. The Office may reinstate the approval as described in Section 7-129 (c)

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-139. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

7-141. Administration of construction.
(a) The administration of the work of construction shall be under the general responsible charge of an architect or structural engineer. Where neither structural nor architectural elements are substantially involved, a mechanical or electrical engineer registered in the branch of engineering most applicable to the project may be in responsible charge of the administration of the work of construction.

(b) All architects and engineers to whom responsibility has been delegated for preparation of plans and specifications as listed on the application shall observe the work of construction for their portion of the project. They shall consult with the person in general responsible charge in the interpretation of the approved plans and specifications, the preparation of addenda, change orders and deferred approvals, and the selection of inspectors and testing laboratories. By manual signatures they shall indicate their responsibility for and approval of change orders and deferred approvals which affect their portion of the project.

(c) The architect or engineer having general or delegated responsibility may name one or more persons to act as alternate(s) for observation of the work of construction provided such persons are architects or engineers qualified under these regulations to assume the responsibility assigned.

(d) The architect or engineer of record in general responsible charge of the work shall prepare a testing, inspection and observation program which shall be submitted to the Office for approval prior to the issuance of the building permit.

(e) The testing program shall identify materials and tests to be performed on the project. The firm(s) and/or individual(s) to perform each of the required tests shall also be identified. The testing program shall include, at a minimum, those tests required by applicable sections of the California Building Standards Code.

(f) The inspection program shall include a completed application for inspector(s) of record for the project. If a project has more than one inspector of record, the distribution of responsibilities for the work shall be clearly identified for each inspector of record. The inspection program shall also identify all special inspections to be performed on the project and the individual(s) to perform the inspections. The special inspections shall include, at a minimum, those special inspections required by applicable sections of the California Building Standards Code.

(g) The observation program shall identify each professional that must, through personal knowledge as defined in Section 7-151, verify that the work is in compliance with the approved plans and specifications. The contractor or owner/builder and the inspector(s) of record shall verify that the work is in compliance with the approved plans and specifications in accordance with the requirements for personal knowledge as it applies to each participant or discipline. The program shall give specific intervals or project milestones at which such observation is to occur for each affected participant or discipline. Each required observation shall be documented by a compliance verification report prepared by each participant or discipline and submitted to the Office.

(h) The tests, inspection and observation program shall include samples of test and inspection reports and provide time limits for the submission of reports.

(i) All completed test, inspection and observation reports shall be submitted to the Office.
7-145. Continuous inspection of the work.

(a) The general duties of the inspector shall be as follows:
1. The inspector shall have personal knowledge, obtained by continuous inspection of all parts of the work of construction in all stages of its progress to ensure that the work is in accordance with the approved plans and specifications.
2. Continuous inspection means complete inspection of every part of the work. Work, such as concrete or masonry work which can be inspected only as it is placed or assembled, shall require the constant presence of the inspector. Other types of work which can be completely inspected after the work is installed may be carried on while the inspector is not present. In no case shall the inspector have or assume any duties which will prevent continuous inspection.
3. The inspector shall work under the direction of the architect or engineer. All inconsistencies or seeming errors in the approved plans and specifications shall be reported promptly to the architect or engineer for interpretation and instructions. In no case, however, shall the instructions of the architect or engineer be construed to cause work to be done which is not in conformity with the approved plans and specifications.
4. The inspector shall maintain a file of approved plans and specifications on the job at all times including all reports of tests and inspections required by the plans and specifications and shall immediately return any unapproved documents to the architect or engineer for proper action. The inspector shall also maintain on the job at all times, all codes and regulations referred to in the approved plans and specifications.
5. The inspector shall notify the Office:
   A. When the work is started or resumed on the project.
   B. At least 48 hours in advance of the time when foundation trenches will be complete, ready for footing forms.
   C. At least 48 hours in advance of the first pour of concrete.
   D. When work has been suspended for a period of more than two weeks.
6. The inspector shall maintain a record of certain phases of construction procedure as follows:
   A. The record shall include the time and date of placing concrete; time and date of removal of forms and shoring in each portion of the structure; location of defective concrete; and time, date and method of correction of defects.
   B. The record shall include identification marks of welders, lists of defective welds, and manner of correction of defects and other related events.
   C. The record shall include a list of test reports of all nonconforming materials or defective workmanship and shall indicate the corrective actions taken.
   D. When driven piles are used for foundations, the record shall include the location, length and penetra-
tion under the last ten blows for each pile. It shall also include a description of the characteristics of the pile driving equipment.

E All records of construction procedure shall be retained on the job until the completion of the work. See Section 7-155

(b) The inspector shall notify the contractor, in writing, of any deviations from the approved plans and specifications or new construction not in compliance with California Building Standards Code, which have not been immediately corrected by the contractor. Copies of such notice shall be forwarded immediately to the architect, engineer, owner and to the Office

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1 (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-149. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996

7-147. Observation by the office.

(a) During the construction, of any health facility, the Office shall make such observation as in its judgment is necessary or proper for the enforcement of these regulations and all applicable parts of the California Building Standards Code.

Whenever the Office finds a violation of these regulations and/or applicable parts of the California Building Standards Code that requires correction, the citation of the violation shall be issued to the hospital governing board or authority in writing and shall include a proper reference to the regulation or statute being violated.

Authority: Health and Safety Code Sections 127015, 129825 and 129850
Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-147. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996

7-149. Tests.

(a) Pursuant to Section 7-141, the architect or engineer in charge shall establish and administer the testing program. Where job conditions warrant, the architect or engineer may waive certain specified tests contingent upon the approval of the Office. The Office shall be notified as to the disposition of materials noted on laboratory reports. One copy of all test reports shall be forwarded to the Office by the testing agency. The reports shall state definitely whether the material tested complies with the approved contract documents.

(b) The governing board or authority of a health facility shall select a qualified person or testing laboratory as the testing agency to conduct the tests. The selected person or testing laboratory must be approved by the architect or engineer. The governing board or authority shall pay for all tests.

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-149. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996.

1996. Approved by the California Building Standards Commission on March 19, 1996

7-151. Verified compliance reports.

(a) In accordance with Section 7-151 (e), or when required by the Office, the architect(s), engineer(s), inspector(s) of record, special inspector(s) and contractor or owner/builder shall each submit to the Office a verified compliance report, with their original signature and based on their own personal knowledge, as defined by this section. The report shall:

1. Verify that the work during the period, or a portion of the work, covered by the report has been performed and materials used and installed are in accordance with the approved plans and specifications
2. Set forth detailed statements of fact as are required by the Office.

(b) The term “personal knowledge,” as used in this section and as applied to the licensed architect or engineer or both, means personal knowledge that is obtained by periodic visits to the project site, of reasonable frequency, for the purpose of general observation of the work. It also includes knowledge that is obtained from the reporting of others as to the progress of the work, testing of materials, and inspection and supervision of the work that is performed between the periodic visits of the architect or the engineer. Reasonable diligence shall be exercised in obtaining the facts.

(c) The term “personal knowledge,” as applied to the inspector, means the actual personal knowledge that is obtained from the inspector’s personal continuous inspection of the work of construction, in all stages of its progress at the site where the inspector is responsible for inspection. Where work is carried out away from the site, personal knowledge is obtained from the reporting of others on the testing or inspection of materials and workmanship, for compliance with plans, specifications or applicable standards. Reasonable diligence shall be exercised in obtaining the facts.

(d) The term “personal knowledge,” as applied to the contractor, means the personal knowledge that is obtained from the construction of the building. Reasonable diligence is required to obtain the facts.

(e) Verified compliance reports shall be submitted to the Office at the intervals or stages of the work as stated in the approved testing, inspection and observation program. In no case shall the submittal of verified compliance reports be less than:

1. One copy prepared and signed by each required participant or discipline at the completion of the work
2. One copy prepared and signed by any participant or discipline at any time a special verified compliance report is required by the Office.

(f) The architect or engineer in general responsibility of the work shall be responsible for ensuring all required verified compliance reports are submitted to the Office.

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-151. Filed with the secretary of state on August 4, 1996, becomes effective September 13, 1996
7-152. Supplantation of an architect, engineer or inspector of record, special inspector or contractor.

(a) When supplanting any of the listed individuals, the following shall be submitted to the Office:

1. Prior to plan approval
   A. Revised application(s) listing the new responsible individuals.

2. Following plan approval
   A. Revised application(s) listing the new responsible individual(s)

B. An initial report, prepared by the supplanting individual(s), based on field observation(s) that the work performed and materials used and installed to date are in accordance with the project’s approved plans and specifications. Any observed issues of nonconformance shall be listed in the report. The supplanting individual(s) shall be responsible for verification of project compliance, pursuant to Section 7-151, for the remainder of the project.

C. A final verified report from the supplanting individual(s).

Exception to (C): In the event that the supplanted individual refuses to, or cannot provide a final verified report, the owner shall submit a letter to the Office verifying that the work performed and materials used and installed are in accordance with the project’s approved plans and specifications. The letter shall also list the reason the verified report could not be obtained.

authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675–129998

7-153. Addenda, change orders and deferred approvals.

(a) Work shall be executed in accordance with the approved plans and specifications. Changes in the approved plans and specifications shall be made by addenda or change orders approved by the Office.

(b) Changes or alterations of the approved plans and specifications prior to awarding a construction contract, or similar instrument of agreement for the work involved, shall be made by means of addenda. Addenda shall be signed by the architect or engineer responsible for the preparation of the plans and specifications and shall be submitted for approval by the Office. Two copies of the approved addenda shall be furnished to the Office.

(c) Changes or alterations of the approved plans and specifications after a contract or similar instrument of agreement has been awarded shall be made by means of change orders.

1. Change orders shall state the reason for the change, show the related addition to or deduction from the current contract price and shall be accompanied by supplementary plans when necessary.

2. All change orders shall be signed by the applicant and the architect or engineer generally responsible for the work of construction and approved by the Office prior to installation of the work except:

   A. Emergency changes to the work relating to the safety of persons at the construction site may be made immediately. Such emergency changes shall be documented by subsequent change orders and may require modification to comply with these regulations.

   B. To prevent undue delay, changes may be commenced following preliminary approval of an instruction bulletin by the Office. Such changes shall be confirmed immediately by change order.

(d) Submittal documents for deferred submittal items shall be submitted to the architect or engineer to whom responsibility has been delegated for preparation of plans and specifications, as listed on the application, for review prior to submittal to the Office.

1. The architect or engineer to whom responsibility has been delegated for preparation of plans and specifications, as listed on the application, shall review and forward submittal documents for deferred submittal items to the Office with a notation indicating that the deferred submittal documents have been reviewed and that they have been found to be in general conformance with the design of the project.

2. The deferred submittal items shall not be installed until their design and submittal documents have been approved by the Office.

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675–129998

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-153. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.
2. (OSHPD 7/96) 1996 Annual Code Adoption Cycle will amend Section 7-153, of Part 1, Title 24, C.C.R. Filed with the secretary of state on February 19, 1997; effective March 21, 1997. Approved by the California Building Standards Commission on February 6, 1997

7-155. Final approval of the work.

(a) The Office shall schedule a final state agency inspection of the work subsequent to the receipt of the responsible architect’s or engineer’s statement that the contract is performed or substantially performed.

(b) The final approval of the construction shall be issued by the Office when:

1. All work has been completed in accordance with the approved plans and specifications.

2. The required verified compliance reports and test and inspection reports have been filed with the Office.

3. All remaining fees have been paid to the Office.

(c) Final approval shall be confirmed by a letter sent to the Department of Health Services with a copy to the applicant. The letter shall state that the work has been constructed in accordance with the California Building Standards Code, Title 24, California Code of Regulations.
SAFETY STANDARDS FOR HEALTH FACILITIES

(d) Upon completion of the project, all copies of construction procedure records as required by Section 7-145 (a) 6 shall be transmitted to the Office.

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675–129998

HISTORY:
1 (OSHAP 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-155. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996

7-156. Certification of correctional treatment centers.

(a) Plans and specifications prepared by or under the supervision of the Department of Corrections or on behalf of the Department of the Youth Authority for the new construction, reconstruction, alteration or addition of any hospital building and/or correctional treatment center, as defined in Section 1250, Health and Safety Code, or any building specified in Section 129875, Health and Safety Code shall be certified to the Office by the Department of Corrections or the Department of the Youth Authority. Plans, specifications and construction of these facilities shall be in full compliance with all applicable building standards including, but not limited to, architectural, structural, mechanical, plumbing, electrical and fire and life safety.

The Department of Corrections and the Department of the Youth Authority shall use a secondary peer review procedure to review the design of new construction, reconstruction, alteration or addition in order to ensure that the plans are in compliance with the building standards of Title 24, Parts 2, 3, 4, 5 and 9. The secondary peer review shall be performed by a California licensed architect, structural engineer, mechanical engineer and electrical engineer, as applicable.

Upon completion of construction, a written certification signed by the Director or designee of the Department of Corrections or Department of the Youth Authority shall be submitted to the Office and shall include:

1. Description of the project scope;
2. Certification that plans, specifications and construction are in full compliance with all applicable building standards of Title 24, Parts 2, 3, 4, 5 and 9;
3. Certification that a secondary peer review has been completed and the peer review indicates that the design for new construction, reconstruction, alteration or addition to the facility adheres to all building standards of Title 24, Parts 2, 3, 4, 5 and 9;
4. Certification that construction inspection was performed by a competent on-site inspector and that all work was completed in accordance with the complying plans and specifications; and
5. Attachments which include the final as-built plans and specifications.

(b) Plans and specifications prepared by or under the supervision of a city, county or city and county law enforcement agency for the new construction, reconstruction, alteration or addition of any hospital building and/or correctional treatment center, as defined in Section 1250, Health and Safety Code, or any building specified in Section 129875, Health and Safety Code shall be certified to the Office by the law enforcement agency. Plans, specifications and construction of these facilities shall be in full compliance with all applicable building standards including, but not limited to, architectural, structural, mechanical, plumbing, electrical and fire and life safety.

Upon completion of construction a written certification signed by the law enforcement agency head or designee shall be submitted to the Office and shall include:

1. Description of the project scope;
2. Certification that plans, specifications and construction are in full compliance with all applicable building standards of Title 24, Parts 2, 3, 4, 5 and 9; and
3. Attachments which include the final as-built plans and specifications.

Authority: Health and Safety Code Sections 127015, 127010, 127015, 129790 and 129850
Reference: Health and Safety Code Section 15076

HISTORY:

7-157. Records. (Deleted)

ARTICLE 5
APPEALS TO THE HOSPITAL BUILDING SAFETY BOARD

7-159. Appeals.

(a) The Hospital Building Safety Board, except as provided in Section 18945 of the Health and Safety Code, shall act as a board of appeals in all matters relating to the administration and enforcement of building standards relating to the design, construction, alteration and seismic safety of health facility projects submitted to the Office pursuant to Chapter 1, Division 107, Health and Safety Code.

Further, notwithstanding Section 13142.6 of the Health and Safety Code, the board shall act as the board of appeals in matters relating to all fire and panic safety regulations and alternate means of protection determinations for health facility projects submitted to the Office pursuant to Chapter 1, Division 107, Health and Safety Code.

(b) In the event of disagreement with the rulings, orders, decisions or acts of the Office acting within the scope of Division 107 (commencing with Section 129675) of the Health and Safety Code, an appeal may be made by the current or prospective licensee or his/her authorized agent, hereafter known as the appellant, of a health facility to the Hospital Building Safety Board. Such appeal shall be considered by the Hospital Building Safety Board only following the failure of an informal conference, held to resolve the appeal in accordance with Section 7-161.

Authority: Health and Safety Code Sections 127015, 129850 and 129925
Reference: Health and Safety Code Sections 129675–129998
7-161. Informal conference.

(a) Within six months of a ruling, order, decision or act of the Office acting within the scope of Division 107 (commencing with Section 129675) of the Health and Safety Code, the appellant may issue a written request for an informal conference upon such ruling, order, decision or act to the Office.

(b) Within 15 business days of receipt of a written request for an informal conference, the Office shall give notice of the date, time and place of such conference to review the ruling, order, decision or act being questioned. The informal conference shall be in a convenient place mutually agreeable to the parties. The informal conference shall be held within 25 business days of receipt by the Office of the written request for an informal conference.

(c) The informal conference shall be conducted by an Office representative. Parties to such conference may include the appellant, architects and engineers and other appropriate consultants under contract to the appellant or the appellant’s legal counsel.

(d) The purpose of the informal conference shall be to discuss the ruling, order, decision or act of the Office with the intent to resolve the issue.

(e) Within 10 business days following the informal conference, the Office shall notify the appellant in writing as to the Office’s action on the ruling, order, decision or act. Such action shall be to confirm, modify, or reverse the original ruling, order, decision or act.

Authority: Health and Safety Code Sections 18929 and 129675-130070
Reference: Health and Safety Code Section 129955

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-161. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

7-163. Formal hearing request.

(a) If the appellant wishes to continue an appeal after the Office’s decision following the informal conference, a formal hearing may be requested of the Hospital Building Safety Board. The appellant shall submit a written request for an appeal to the Hospital Building Safety Board through the Office within 15 business days of receipt of the notice of the result of the informal conference.

(b) The notice of appeal shall be followed within 60 business days by documents supporting the request for a formal hearing before the Hospital Building Safety Board. Such documents shall be submitted to the Office and shall contain specific information regarding the Office’s ruling, order, decision or act and the basis for the appeal.

Authority: Health and Safety Code Sections 18929 and 129675-130070
Reference: Health and Safety Code Section 129955

HISTORY:
1. (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-163. Filed with the secre-
7-167. Rights of the appellant.

(a) The appellant shall have the right to counsel, to submit documentary evidence and exhibits, and to have witnesses appear and testify. These rights shall be executed by the appellant at the appellant's own expense.

(b) The appellant shall have the right to question representatives of the Office and other witnesses presenting testimony or documents in the hearing.

(c) The appellant shall have the right to question potential conflicts of interest of any voting member of the Hospital Building Safety Board or committee of the Board hearing an appeal. The Chair of the hearing will rule on such potential conflict and the ruling shall be entered in the record of the hearing.

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1 (OSHHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-167. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996

7-169. Appeal hearing procedure.

(a) An appeal hearing conducted by the Hospital Building Safety Board or a committee of the Board shall not be conducted in accordance with strict rules of evidence or courtroom procedure. During the hearing, the Chair may accept into the record without formal proof any generally accepted technical or scientific matter related to seismic, architectural, structural, mechanical, electrical, fire and life safety of health facilities. Hearsay evidence may be allowed for the purpose of supplementing or explaining other evidence, but shall not be sufficient in itself to support the findings.

(b) The Chair of the hearing shall determine the order of witnesses and presentation and introduction of documents, evidence and exhibits into the record of the hearing. The Chair may impose reasonable time limits, rule on admissibility of evidence, maintain decorum in the hearings, call recesses and rule on continuation of the hearings.

(c) The Chair may request counsel from the Office for advice on points of law.

(d) Prior to the closing of the hearing, the Chair shall announce either of the following:

1. The recommended decision of the committee of the Board.
2. The decision of the Board.

Authority: Health and Safety Code Sections 127015 and 129850
Reference: Health and Safety Code Sections 129675-129998

HISTORY:
1 (OSHHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-169. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996

7-171. Decision on appeal.

(a) Decision on an appeal heard by a committee of the Board shall be reached as follows:

1. If all parties agree to the decision recommended by a committee of the Board, the agreement and the names of parties to the appeal shall be entered in the record. The appeal action shall be considered terminated when all parties to the appeal have stipulated to the agreement in writing.
2. If all parties to the appeal do not agree with the decision recommended by a committee, the findings of fact, supporting documents, evidence, exhibits and decision recommended by the committee shall be transmitted to the Hospital Building Safety Board.
3. Within 30 business days after the findings of fact, supporting documents, evidence exhibits and a recommended decision are received, the Board shall hear final arguments from the appellant and render a decision on the appeal. The appellant, the appellant’s counsel or the appellant’s representatives may not introduce new evidence without approval of the Board.

(b) Decision on an appeal heard by or referred to the Hospital Building Safety Board shall be reached as follows:

1. The Board shall render a decision in public meeting and transmit such decision in writing to each party to the appeal hearing within 15 business days after the close of the hearing.
2. The Board may affirm, reverse or amend the ruling, order, decision or act being appealed or remand the issue for further study.
3. If the Board remands all or a portion of the issues at appeal for further study, the Board shall specify the issues or matters to be studied, who is to study the issues and completion dates for such further study.
4. Findings and recommendations from further study will be transmitted to all parties to the action prior to the Hospital Building Safety Board’s public hearing for decision.
5. Within 30 business days of receipt of the findings and recommendations from further study of the issues, the Hospital Building Safety Board shall convene a public hearing to consider the findings and recommendations and arguments from the appellant or the appellant’s representatives. The decision of the Hospital Building Safety Board shall be announced in a public hearing and transmitted in writing to all parties involved within 30 business days of the conclusion of the public hearing.
6. Decisions of the Hospital Building Safety Board shall become effective immediately upon their announcement by the Chair of the Board, unless otherwise specified by the Chair.

(c) Should the appellant determine he or she has been adversely affected by the decision of the Hospital Building Safety Board, the appellant may further appeal the issue for resolution by the California Building Standards Commission, in accordance with Health and Safety Code Section 18945.

Authority: Health and Safety Code Sections 18929 and 129675-130070
SAFETY STANDARDS FOR HEALTH FACILITIES

Reference: Health and Safety Code Section 129855

HISTORY:
1 (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-171. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996 Approved by the California Building Standards Commission on March 19, 1996

ARTICLE 6
CONTRACTS

7-191. Contract qualification criteria.

(a) Individuals performing services under contracts entered into with the Office pursuant to Health and Safety Code, Section 129855 shall meet the following qualifications:

1. Plan reviews shall be performed only by architects or engineers validly certified under Division 3 of the Business and Professions Code as follows:

A Selection criteria. The director shall establish selection criteria which will comprise the basis for the selection of eligible firms or local government entities to independently perform the required architectural and engineering services. The criteria will include such factors as:

(1) Professional experience in performing services of similar nature
(2) Knowledge of applicable codes, regulations and technology associated with the services required.
(3) Quality and relevance of recently completed or ongoing work.
(4) Reliability, continuity and proximity of firm or local government entity to the Office.
(5) Demonstrated competence
(6) Staffing capability
(7) Education and experience of key personnel to be assigned.
(8) Current workload and ability to meet review deadlines according to schedule
(9) Other technical factors the director deems relevant to the specific service to be performed.

These factors shall be weighed by the director according to the nature of the proposed project or service, the complexity and special requirements of the specific services and the needs of the Office.

Authority: Health and Safety Code Sections 129850, 129855 and 18949 3; Government Code Section 4526
Reference: Government Code Sections 4526 and 4527

B Announcement

(1) A statewide announcement of specific services sought from firms shall be published in the California State Contracts Register, in accordance with the Government Code (commencing with Section 14825), and whenever possible, in the publications of the respective professional societies. Failure of any professional society to publish the announcement shall not invalidate any contract. Services sought from the local government entities are exempt from advertising in the California State Contracts Register pursuant to standard State of California operating procedures.

(2) The announcement for each proposed project or service shall include, at a minimum, a brief description of the project or services required, location, duration, submittal requirements, contact person for the Office, and the final response date for receipt of statements from firms of their demonstrated competence and professional qualifications.

(3) The director shall identify potentially qualified minority, women and disabled veteran business enterprises and small businesses interested in contracting with the Office, and shall provide copies of announcements to those businesses that have indicated an interest in receiving the announcements. Failure of the director to send a copy of an announcement to any business shall not invalidate any contract.

Authority: Health and Safety Code Sections 129850, 129855 and 18949 3; Government Code Section 4526
Reference: Government Code Sections 4526 and 4527

C Selection of qualified firms.

(1) After the expiration of the final response date in the published announcement, the director shall review and evaluate the written responses to the announcement, using the selection criteria contained in Section 7-191 (a) 1 A, and rank, in order of qualifications, the firms determined as eligible to perform the required services.

(2) The director shall conduct discussions with at least the three most eligible firms, or a lesser number if fewer than three eligible firms have responded, to further expand on those qualifications and experience required to perform the services sought. From the firms with which discussions are held, the director shall select, in order of qualification, not less than three firms, or lesser number if fewer than three eligible firms responded, deemed to be the most highly qualified to perform the required services.

Authority: Health and Safety Code Sections 129850, 129855 and 18949 3; Government Code Section 4526
Reference: Government Code Sections 4526 and 4527

D Selection of qualified local government entities.

(1) For specific services to be performed by local government entities, the director shall solicit, review and evaluate the qualifications of the local government entities using the selection criteria contained in Section 7-191 (a) 1 A.

(2) The director shall select, in order of qualification, those local government entities deemed to
E Estimate of value of services.

(1) Before entering into fee negotiations with any firm or local government entity selected pursuant to Section 7-191 (a) (1) C (2) or D, the Office shall prepare an estimate of the value of the proposed services based on accepted billable rates for comparable services.

(2) At any time the director determines the Office’s estimate to be unrealistic, the director shall require the estimate to be reevaluated and, if deemed necessary, modified. If the director modifies an estimate, negotiations will resume with the best qualified firm or local government entity.

Authority: Health and Safety Code Sections 129850, 129855 and 18949; Government Code Section 4526
Reference: Government Code Sections 4526 and 4528

F Fee Negotiation with firms.

(1) The director shall ask firms selected pursuant to Section 7-191 (a) (1) C (2) to submit a fee schedule of hourly billable rates. The director shall then attempt to negotiate hourly billable rates determined to be fair and reasonable with the firms, beginning with the best qualified and continuing with the remaining firms, in order of qualifications.

(i) The firm negotiating with the director shall be given two opportunities to respond to the Office’s request to meet the fair and reasonable estimate for hourly billable rates for the contract services.

(ii) The firm must respond within 7 business days to each request by the Office for a new estimate which either meets or does not exceed by more than 10 percent the Office’s fair and reasonable estimate for hourly billable rates; and

(iii) If after the second attempt, the firm is nonresponsive or a satisfactory hourly billable rate cannot be negotiated, the director shall terminate negotiations with that firm.

(2) After successful negotiations, a retainer contract will be executed with the firm. There may be multiple contracts awarded and each shall specify a contract period and monetary limitation. Work shall commence only upon execution of an assignment. Assignments will be negotiated pursuant to Section 7-191(a)1G.

(3) For firms selected pursuant to Section 7-191 (a) (1) C (2) to provide services for a specific project where the scope of work is extremely complex or unusual, fee negotiations will proceed in accordance with Section 7-191 (a) 1 G.

Authority: Health and Safety Code Sections 18929 and 129675-130070

G Services negotiations with firms.

(1) From among the firms selected in Section 7-191 (a) (1) C (2), as most highly qualified to perform services required, the director shall attempt to negotiate a satisfactory assignment or contract with the best qualified firm at a compensation which the Office determines to be fair and reasonable.

(i) The firm negotiating with the director shall be given two opportunities to respond to the Office’s request to meet the fair and reasonable estimate for assignment or contract services;

(ii) The firm must respond within 7 business days to each request by the Office for a new estimate which either meets or does not exceed by 10 percent the Office’s fair and reasonable estimate;

(iii) If after the second attempt, the firm is nonresponsive or a satisfactory rate cannot be negotiated, the director shall terminate negotiations with that firm; and

(iv) Negotiations with the next-best qualified firm shall commence.

(2) The director shall continue the negotiation process with the remaining qualified firms, if any, in order of qualifications, until a satisfactory assignment or contract is reached. If unable to negotiate a satisfactory assignment or contract with any of the qualified firms, the director shall abandon the negotiation process for the required services.

Authority: Health and Safety Code Sections 18929 and 129675-130070

H Fee and services negotiation with local government entities.

(1) From among the local government entities selected in Section 7-191 (a) (1) D (2), as most highly qualified to perform services required, the director shall attempt to negotiate a satisfactory contract with the best qualified local government entity at a compensation which the Office determines to be fair and reasonable.

(2) If the director is unable to negotiate a satisfactory contract with the best qualified local government entity at a compensation which is determined to be fair and reasonable, negotiations with that local government entity shall be terminated and negotiations undertaken with the second best qualified local government entity. If unable to negotiate a satisfactory con-
tract with the second best qualified local government entity at a compensation which the Office determines is fair and reasonable, negotiations with that local government entity shall be terminated and negotiations undertaken with the third best qualified local government entity. If unable to negotiate a satisfactory contract with the third best qualified local government entity at a compensation which the Office determines is fair and reasonable, negotiations with that local government entity shall be terminated.

The director shall continue the negotiation process with the remaining qualified local government entities, if any, in order of qualifications, until a satisfactory contract is reached. If unable to negotiate a satisfactory contract with any of the qualified local government entities, the director shall abandon the negotiation process for the required services.

Authority: Health and Safety Code Sections 129850, 129855 and 18949 3; Government Code Section 4526
Reference: Government Code Sections 4526 and 4528

I. Amendments. When the director determines that a change in the assignment or contract is necessary during the performance of the services, the parties may, by mutual consent, in writing, agree to modifications, additions or deletions in the general terms, conditions and specifications for the services involved, with an appropriate adjustment in the firm’s or local government entity’s compensation, if necessary.

Authority: Health and Safety Code Sections 129850, 129855 and 18949 3; Government Code Section 4526
Reference: Government Code Sections 4526 and 4528

J. Contracting in phases. When the director determines it is necessary or desirable for a project to be performed in separate phases, increments or stages due to a change in design or scope of work, the director may negotiate compensation for the initial phase, increment or stage of the services required; provided, however, the director first determines that the firm selected is best qualified to perform the entire project. The assignment shall include a provision that the Office may, at its option, utilize the firm to perform other phases, increments or stages of the services under terms which the Office determines to be fair and reasonable, to be later negotiated and included in a mutual written agreement. In the event that the Office exercises its option under the contract to utilize the firm to perform other phases, increments or stages of the project, the procedures of this article regarding estimates of value of services and negotiation shall be followed.

Authority: Health and Safety Code Sections 18929 and 129675–130070

K. Statewide participation goals. In the negotiation of a satisfactory contract as provided in Section 7-191 (a) 1 F and G, qualified firm(s) must meet the statewide participation goals for minority, women and disabled veteran business enterprises or demonstrate that a good faith effort was made to meet them. The best qualified firm shall comply with the statewide participation goals or demonstrate a good faith effort as required by the regulations contained in Title 2, California Code of Regulations, Sections 1896.61-1896.67 and 1896.90-1896.96

Authority: Government Code Section 4526; Public Contract Code Section 10115.3
Reference: Government Code Section 4528; Public Contract Code Sections 10115, 10115.1, 10115.2 and 10115.3

L. Emergency. When the director makes a finding that the public health, safety or welfare would be adversely affected in a significant way because insufficient time exists within which to implement the foregoing procedure to secure necessary services, the director may negotiate a contract for such services without the necessity of following such procedure, or any part thereof.

Authority: Health and Safety Code Sections 129850, 129855 and 18949 3; Government Code Section 4526
Reference: Government Code Section 4526

M. Unlawful considerations. Each contract shall include a provision by which the firm or local government entity warrants that the contract was not obtained or secured through rebates, kickbacks or other unlawful considerations either promised or paid to any Office employee. Failure to adhere to this warranty may be cause for contract termination and recovery of damages under the rights and remedies due the Office under the default provision of the contract.

Authority: Government Code Section 4526
Reference: Government Code Section 4526

N. Prohibited relationships. No Office employee who participates in the evaluation or selection process leading to award of a contract shall have a relationship with any of the firms or local government entity seeking that contract, if that relationship is subject to the prohibition of Government Code Section 87100.

Authority: Government Code Section 4526
Reference: Government Code Sections 4526, 87100 and 87102

HISTORY:

1 (OSHPD 2/95) Regular order by the Office of Statewide Health Planning and Development to amend Section 7-191. Filed with the secretary of state on August 14, 1996, becomes effective September 13, 1996. Approved by the California Building Standards Commission on March 19, 1996.

ARTICLE 7
TESTING AND INSPECTION

Testing and inspection requirements are found in the California Building Standards Code.
ARTICLE 8
CALIFORNIA BUILDING STANDARDS

Architectural, mechanical, electrical, structural, and fire and life safety and accessibility standards are found in the California Building Standards Code.

ARTICLE 19
CERTIFICATION AND APPROVAL OF HOSPITAL INSPECTORS

7-200. Administration of hospital inspector examination and certification.

(a) The Office shall test and certify inspectors in one or more of the following classes:

1. Class “A” Hospital Inspector may inspect all areas of construction, including: architectural, mechanical, plumbing, electrical, fire and life safety, and structural elements.

2. Class “B” Hospital Inspector may inspect only the following areas of construction: architectural, mechanical, plumbing, electrical, fire and life safety, and anchorage of nonstructural elements.

3. Class “C” Hospital Inspector may inspect one or more areas of construction specialty, including but not limited to the areas listed in Section 7-204(c), but may not inspect the complete scope of construction authorized for “A” or “B” inspectors.

(b) In order to be certified in and perform the scope of responsibilities of a hospital inspector as specified in paragraph (a)(1), (2) or (3), an individual must be successful in the examination for that classification.

Authority: Health and Safety Code Sections 18929 and 129675–130070
Reference: Health and Safety Code Section 129825

7-201. Location of office. All correspondence, applications and remittances related to the certification or recertification of Hospital Inspector shall be directed to: Office of Statewide Health Planning and Development, Facilities Development Division, 1600 Ninth Street, Room 420, Sacramento, CA 95814.

Authority: Health and Safety Code Sections 1275, 127010, 127015, 129680 and 129825
Reference: Health and Safety Code Sections 129680 and 129825

7-202. Filing change of name, address or telephone number. An applicant for the certification examination or a Hospital Inspector possessing a valid certificate issued by the Office, shall file name, mailing address or telephone number changes with the Office in Sacramento within 10 working days of that change. The information filed shall include both the new and former name, mailing address or telephone number.

Authority: Health and Safety Code Sections 1275, 127010, 127015, 129680 and 129825
Reference: Health and Safety Code Sections 129680 and 129825

7-203. Applying for the certification examination.

(a) An applicant may apply for the Hospital Inspector Certification Exam by submitting, to the Office, the following items prior to the final filing date announced for a scheduled exam:

1. A completed original application, provided by the Office, shall be submitted to the Office in Sacramento and shall include the exam title, preferred examination location, applicant’s name, mailing address and telephone number.

2. Certificates or transcripts indicating educational courses completed by the applicant which relate to the minimum qualifying requirements stated in Section 7-204.

3. Work verification form or letter from current and/or previous employer(s) regarding any job which meets the minimum qualifications for the certification examination and which includes the applicant’s name, dates of employment, job description and employer’s signature.

4. An “Application Review Fee” in the amount specified on a certification examination announcement for a scheduled exam and pursuant to Section 7-206.


(b) Incomplete submittals may be rejected by the Office. The application, documents and fees will be returned to the applicant with a statement of reason for nonacceptance.

(c) Upon review, verification and evaluation of the applicant's qualifications, the Office will notify the applicant, in writing, of eligibility or ineligibility for entrance to the requested certification examination.

Authority: Health and Safety Code Sections 1892 and 129675–130070
Reference: Health and Safety Code Section 129825

7-204. Minimum qualification for examination.

An applicant must meet the following criteria to be eligible to participate in the certification examination for a Class “A,” “B,” or “C” Hospital Inspector:

(a) Minimum qualifications for Class “A” Hospital Inspector Exam:

1. High school graduation or the equivalent and six years experience involving building projects of Type I or II construction as an architect’s, engineer’s, owner’s, local building official’s or general contractor’s representative in technical inspection or inspection supervision [Note: Experience in subsection (a)(1) may be substituted with college education with major work in architecture, engineering, building inspection and/or construction on a year-for-year basis for a maximum of two years]; or

2. Possess a valid California registration/license as a mechanical, electrical, or civil engineer and two years experience involving building projects of Type I or II construction as an architect’s, engineer’s, owner’s, local building official’s or general contractor’s representative in technical inspection or inspection supervision; or

3. High school graduation or the equivalent and two years of working experience as a Class “B” Hospital Inspector; or
4. Possess a valid California registration/license as a structural engineer or a valid California license as an architect.

(b) Minimum qualifications for Class “B” Hospital Inspector Exam:

1. High school graduation or the equivalent and four years experience involving building projects of Type I or II construction as an architect’s, engineer’s, owner’s, local building official’s or general contractor’s representative in technical inspection or inspection supervision. [Note: Experience in subsection (b) 1 may be substituted with college education with major work in architecture, engineering, building inspection and/or construction on a year-for-year basis for a maximum of two years; or

2. Possess a valid California registration/license as a civil engineer and two years experience involving building projects of Type I or II construction as an architect’s, engineer’s, owner’s, local building official’s or general contractor’s representative in technical inspection or inspection supervision; or

3. Possess a valid California registration/license as a structural, mechanical or electrical engineer, or a valid California license as an architect.

(c) Minimum qualifications for Class “C” Hospital Inspector Exam:

1. High school graduation or the equivalent and four years experience involving building projects as the representative in testing, inspection or observation of construction for an architect, engineer, owner, local building official, local fire authority, testing lab, specialty contractor or general contractor and possess a valid certificate issued by:

   Fire Alarm—NICET, Level III
   Fire Extinguishing Systems—NICET, Level III
   Fire Resistive Construction—ICC Building Inspector Certification
   Medical Gas Systems—PIPE Certification
   Plumbing—JAPMO Certification
   Mechanical—JAPMO Certification
   Electrical—ICC Certification
   Concrete (Prestressed and Reinforced)—ICC Certification
   Masonry—ICC Certification
   Steel—ICC, Structural Steel Certification
   Welding—AWS Certification
   Framing and Drywall—ICC Building Inspector Certification
   Roofing—National Roofing Contractors Association Anchorage/Bracing of Nonstructural Components—Certification to be administered by the Office
   Architectural—Certification to be administered by the Office

   In addition to these certification organizations listed, the Office may accept the equivalent certification by a state- or nationally-recognized organization. [Note: Experience in subsection (c) (1) may be substituted with college education with major work in architecture, engineering, building inspection and/or construction on a year-for-year basis for a maximum of two years; or

2. Possess a valid California registration/license as an engineer and two years experience involving building projects as an architect’s, engineer’s, owner’s, local building official’s, local fire authority’s, specialty contractor’s or general contractor’s representative in testing inspection or observation of construction and must possess at least one valid certificate issued by an organization that is listed or described in (c) (1) above; or

3. Possess a valid California registration/license as a structural, mechanical or electrical engineer, or a valid California license as an architect and must possess at least one valid certificate issued by an organization that is listed or described in (c) (1) above.

Authority: Health and Safety Code Sections 18929 and 129675 - 130070
Reference: Health and Safety Code Section 129625

7-206. Fees.

(a) Fees required pursuant to subsection (b), shall be transmitted by credit card, money order, cashier check, certified check or personal check, and payable to the Office of Statewide Health Planning and Development.

(b) The prescribed fees relative to the Hospital Inspector Certification Program shall be specifically charged to the applicant to recover reasonable costs of administering the certification program. Fees shall be charged as follows:

   Application review $100.00 (nonrefundable)
   Exam for Class “A” Inspector Certification $300.00
   Exam for Class “B” Inspector Certification 300.00
   Exam for Class “C” Inspector Certification 100.00 for each specialty certificate

   Recertification exam 100.00
   Delinquency fee 100.00
   Duplicate certificate 25.00

(c) An application review fee must accompany an application for a certification examination. This fee is nonrefundable. An application for an examination is valid for one year.

(d) An exam fee shall be submitted by an applicant for a specified examination prior to participation in the examination.

(e) An applicant shall forfeit the exam fee if the applicant fails to appear for any portion of the exam for which the applicant is scheduled.

(f) If the Office has a need to reschedule an exam, a qualified applicant who has submitted the exam fee prior to the reschedule will be either reimbursed or credited for the exam fee amount.

Authority: Health and Safety Code Sections 18929 and 129675-130070
Reference: Health and Safety Code Section 129625

7-207. Examination for certification.

(a) The Office shall administer an exam not less than once in every calendar year in the Sacramento and Los Angeles areas. The certification exam will consist of a written exam.
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(b) The scope of the written certification examinations is as follows:

1. The examinations for Class “A” and “B” Hospital Inspectors will measure the applicant’s ability to read and understand construction plans and specifications; ability to identify and understand the application of various California Building Standards Code requirements; knowledge of appropriate inspector duties and ability to communicate in writing. The test will be divided into sections covering the following code enforcement areas of construction inspection, where applicable: structural, architectural, mechanical, electrical, fire and life safety, and administrative.

2. The examination for Class “C” Hospital Inspectors will measure the applicant’s ability to identify and understand the application of various California Building Standards Code requirements; knowledge of appropriate inspector duties and ability to communicate in writing. The candidate’s inspection certification, pursuant to Section 7-204(c)(1) above, may be substituted for the technical aspect of the written certification examination for Class “C” Hospital Inspector.

3. In order to be successful in the Class “A” and “B” certification exam, a candidate must obtain a passing score of at least 75 percent in each section of the written exam.

4. In order to be successful in the Class “C” certification exam, a candidate must obtain an overall passing score of at least 75 percent.

5. It is not necessary for a candidate who has passed the administrative section of the Class “A”, “B” or “C” certification exam to retake this section if the candidate applies for additional certification(s) within three years of passing the administrative section of the exam.

Authority: Health and Safety Code Sections 18929 and 129675-130070
Reference: Health and Safety Code Section 189825

7-208. Conduct relative to the examination.

(a) An applicant who participates in any of the following acts before, during or after the administration of the examination, shall be disqualified by the Office. The applicant shall not:

1. Copy any portion of the exam.
2. Participate in collusion regarding the exam.
3. Disclose the contents of the examination questions to anyone other than a person authorized by the Office.
4. Solicit, accept or compile information regarding the contents of the examination.
5. Falsify documents required for exam entrance.

(b) If an applicant is disqualified from the exam, they shall result in denial of the application and forfeiture of fees submitted to the Office as specified in Section 7-206.

Authority: Health and Safety Code Sections 1275, 127010, 127015, 129680 and 129825
Reference: Health and Safety Code Sections 129680 and 129825

7-209. Reexamination.

(a) A candidate who has failed an examination may participate in a reexamination no sooner than six months from the exam previously taken by the candidate.

(b) An applicant or candidate who is disqualified from an examination may not participate in an examination or reexamination for a period of one year from the date of disqualification.

(c) The applicant may refute an examination by submitting an application, documents and fees pursuant to Sections 7-203 and 7-206.

Authority: Health and Safety Code Sections 1275, 127010, 127015, 129680 and 129825
Reference: Health and Safety Code Sections 129680 and 129825

7-210. Issuance of certification.

(a) If a candidate is successful in the certification or recertification examination, a certificate will be issued to the Hospital Inspector by the Office. Certificates will expire three years from the date of issuance with the following exception:

1. Certification may be revoked or suspended pursuant to Section 7-214.

(b) A duplicate certificate will be granted to a Hospital Inspector for replacement of an original certificate that is lost, destroyed or mutilated upon written request and payment of the duplication fee, as required in Section 7-206.

Authority: Health and Safety Code Sections 18929 and 129675-130070
Reference: Health and Safety Code Section 129825

7-211. Renewal of a hospital inspector certificate.

(a) A Hospital Inspector shall participate in a written recertification exam prior to the expiration of the certification in order to renew and maintain valid certification.

(b) To be eligible for the recertification exam, a Hospital Inspector shall meet the following minimum criteria:

1. Possess a valid unexpired Hospital Inspector Certificate (or Construction Inspector Certificate) or an expired certificate that meets the delinquency criteria in subsection (c).
2. Complete a seminar conducted, sponsored, or cosponsored by the Office within the three-year certification period.
3. Submit a recertification exam fee pursuant to Section 7-206.

(c) Expiring certification may be renewed after the expiration date, but within six months past that date. The Hospital Inspector will be required to pay a delinquency fee, pursuant to Section 7-206, in order to recertify during the six-month delinquency period.

(d) The scope of the recertification exam will be a written test measuring the Hospital Inspector’s knowledge of new and/or revised California Building Standards Codes, new construction materials and inspection procedures.

Authority: Health and Safety Code Sections 1275, 127010, 127015, 129680 and 129825
Reference: Health and Safety Code Sections 129680 and 129825

7-212. Approval of hospital inspector of record for construction projects.

(a) It is incumbent upon the hospital governing board or authority and the architect or structural engineer, or both, in responsible charge of the work, or the engineer in responsible charge of the work, to select the appropriate inspector(s) for a project. The hospital governing board or authority shall submit
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to the Office an application for each Hospital Inspector of Record proposed to perform construction inspection on a specified hospital construction project. The hospital governing board or authority shall obtain Office approval of proposed Hospital Inspector(s) of Record prior to commencement of the hospital construction project in accordance with Section 7-135.

(b) The Office shall not approve a proposed Hospital Inspector of Record for a specified hospital construction project if the Office determines one of the following:

1. The Hospital Inspector of Record applicant does not hold a valid Hospital Inspector certificate pursuant to the provisions of these regulations.
2. The Hospital Inspector is not appropriately certified in the class of inspection required for the scope of the construction project. The Class "C" inspector does not possess a current certificate for the area of inspection proposed per Section 7-204(c).
3. The Hospital Inspector is a former Office employee pursuant to subsection (c) and is within the one year restriction period governing the Office’s approval of an inspector.
4. The Hospital Inspector is committed to a workload outside the specified hospital construction project and is unable to allot adequate time to perform the work on the specified construction project, as determined by the process set forth in subsection (d).
5. The Hospital Inspector is the architect or engineer in responsible charge of the work for the construction project specified on the Hospital Inspector of Record application.

Exception: The Office may approve the architect or engineer in responsible charge of the work, when, in the determination of the Office: (A) the project scope, duration and complexity do not merit a separate individual to serve as the Hospital Inspector of Record, and (B) the ability of the Office to obtain accurate and impartial inspection will not be jeopardized.

(c) A former employee of the Office who performed field inspections/observations or supervised staff performing field inspections/observations during employment with the Office shall not be approved for a project by the Office as a Hospital Inspector of Record within one year from the effective date of separation from the Office.

(d) When the Office determines that the cumulative workload of a Hospital Inspector of Record applicant appears excessive and may hinder competent and adequate inspection of a specified hospital construction project, the Office may request that the Hospital Inspector of Record applicant submit a written plan including a work schedule and indicating a means to perform inspection on the specified hospital construction project.

The Office will consider specific work-related factors when reviewing the Hospital Inspector’s work schedule to determine approval, pursuant to subsection (b) 4. These work-related factors are limited to the following:

1. The geographic location of current work sites,
2. The scope of current projects,
3. The current phase of each project, and
4. The number of current projects.

(e) When an inspector is approved by the Office, written notification will be sent to the hospital governing board or authority; the architect and/or engineer in responsible charge of the construction project; and the inspector of record applicant. The inspector must be in possession of this approval notice prior to commencement of construction.

(f) A Hospital Inspector of Record who has been approved by the Office must maintain valid certification throughout the term of the specified project in order to remain a Hospital Inspector of Record on the project. The Office shall rescind approval of a Hospital Inspector of Record on a project if the inspector does not comply with this provision.

Authority: Health and Safety Code Sections 18929 and 129675-130070
Reference: Health and Safety Code Section 129825

7-213. Monitoring of the hospital inspector of record’s performance. When the Office determines that a Hospital Inspector of Record has violated a provision of these regulations or that the inspector is not competent or adequately providing inspection of a facility to ensure the hospital construction is in compliance with the plans and specifications, the Office will notify the inspector, the hospital governing board or authority, and the architect and/or engineer in responsible charge. The written notification will include the Office’s findings, reference to the statute and/or regulation being violated, and statement of the Office’s intent to issue a “stop work” order unless the violation ceases and is rectified immediately.

Authority: Health and Safety Code Sections 1275, 127010, 127015, 129680 and 129825
Reference: Health and Safety Code Sections 129680, 129825 and 129908

7-214. Suspension or revocation of certification. A Hospital Inspector Certificate issued by the Office may be suspended or revoked by the Office if the certificate holder misrepresents any facts presented to the Office, pursuant to these regulations.

Authority: Health and Safety Code Sections 1275, 127010, 127015, 129680 and 129825
Reference: Health and Safety Code Sections 129680 and 129825

7-215. Appeals.

(a) The applicant, candidate or certificate holder may submit a written request for an appeal within 60 days of any determination by the Office pursuant to this article and accompanied by a detailed statement of reasons.

(b) The Deputy Director of the Office or designee shall review the issue and when requested appoint a peer board of appeals to hear the issue and recommend resolution. The Deputy Director will review the recommendation and render a final decision.

(c) The peer board of appeals shall consist of a minimum of three Hospital Inspectors, one Regional Compliance Officer, one Compliance Officer, one architect, one structural engineer and one hospital representative.

(d) The applicant, candidate or certificate holder may appeal the decision to the Hospital Building Safety Board, pursuant to Section 7-159 of these regulations.

Authority: Health and Safety Code Sections 1275, 127010, 127015, 129680 and 129825
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7-216. Verification of citizenship or qualified alien status.

(a) All eligibility requirements contained herein shall be applied without regard to the race, creed, color, gender, religion or national origin of the individual applying for the public benefit.

(b) Pursuant to Section 411 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 [Pub. L. No. 104-193 (PRWORA)], (8 U.S.C. § 1621), and notwithstanding any other provision of this division, aliens who are not qualified aliens, nonimmigrant aliens under the Immigration and Nationality Act (INA) [8 U.S.C. § 1182(d)(5)] for less than one year, are not eligible to receive certification as set forth in Article 19, “Certification and Approval of Hospital Inspectors”.

(c) A qualified alien is an alien who, at the time he or she applies for the Hospital Inspector examination is, under Section 431(b) of the PRWORA [8 U.S.C. §§ 1641(b) and (c)], any of the following:

1. An alien lawfully admitted for permanent residence under the INA (8 U.S.C. §§ 1101 et seq.)
2. An alien who is granted asylum under Section 208 of the INA (8 U.S.C. § 1158).
3. A refugee who is admitted to the United States under Section 207 of the INA (8 U.S.C. § 1157).
4. An alien who is paroled into the United States under Section 212(d)(5) of the INA (8 U.S.C. § 1182(d)(5)) for a period of at least one year.
5. An alien whose deportation is being withheld under Section 243(h) of the INA (8 U.S.C. § 1253(h)) [as in effect immediately before the effective date of Section 307 of Division C of Public Law 104-208) or Section 241(b)(3) of such act [8 U.S.C. §1251(b)(3)] as amended by Section 305(a) of Division C of Public Law 104-208].
7. An alien who is a Cuban or Haitian entrant [as defined in Section 501(e) of the Refugee Education Assistance Act of 1980 (8 U.S.C. § 1522 note)].
8. An alien who meets all of the conditions of subparagraph A, B, C and D below:
   A. The alien has been battered or subjected to extreme cruelty in the United States by a spouse or a parent, or by a member of the spouse’s or parent’s family residing in the same household as the alien, and the spouse or parent of the alien consented to, or acquiesced in, such battery or cruelty. For purposes of this subsection, the term “battered or subjected to extreme cruelty” includes, but is not limited to being the victim of any act or threatened act of violence including any forceful detention, which results or threatens to result in physical or mental injury. Rape, molestation, incest (if the victim is a minor) or forced prostitution shall be considered acts of violence.

B. There is a substantial connection between such battery or cruelty and the need for the benefits to be provided in the opinion of the Office of Statewide Health Planning and Development. For purposes of this subsection, the following circumstances demonstrate a substantial connection between the battery or cruelty and the need for the benefits to be provided:

1. (1) The benefits are needed to enable the alien to become self-sufficient following separation from the abuser.
2. (2) The benefits are needed to enable the alien to escape the abuser and/or the community in which the abuser lives, or to ensure the safety of the alien from the abuser.
3. (3) The benefits are needed due to a loss of financial support resulting from the alien’s separation from the abuser.
4. (4) The benefits are needed because the battery or cruelty, separation from the abuser, or work absences or lower job performance resulting from the battery or extreme cruelty or from legal proceedings relating thereto (including resulting child support, child custody and divorce actions) cause the alien to lose his or her job or to earn less or to require the alien to leave his or her job for safety reasons.
5. (5) The benefits are needed because the alien requires medical attention or mental health counseling, or has become disabled, as a result of the battery or extreme cruelty.
6. (6) The benefits are needed because the loss of a dwelling or source of income or fear of the abuser following separation from the abuser jeopardizes the alien’s ability to care for his or her children (e.g., inability to house, feed or clothe children or to put children into a day care for fear of being found by the abuser).
7. (7) The benefits are needed to alleviate nutritional risk or need resulting from the abuse or following separation from the abuser.
8. (8) The benefits are needed to provide medical care during a pregnancy resulting from the abuser’s sexual assault or abuse of, or relationship with, the alien and/or to care for any resulting children.
9. (9) Where medical coverage and/or health care services are needed to replace medical coverage or health care services the alien had when living with the abuser.
C The alien has been approved or has a petition pending which sets forth a prima facie case for:

(1) Status as a spouse or child of a United States citizen pursuant to clause (ii), (iii) or (iv) of Section 204(a)(1)(A) of the INA [8 U.S.C. §1154(a)(1)(A)(ii), (iii) or (iv)],

(2) Classification pursuant to clause (ii) or (iii) of Section 204(a)(1)(B) of the INA [8 U.S.C. §1154(a)(1)(B)(ii) or (iii)],

(3) Cancellation of removal under 8 U.S.C. § 1229b as in effect prior to April 1, 1997,

(4) Status as a spouse or child of a United States citizen pursuant to clause (i) of Section 204(a)(1)(A) of the INA [8 U.S.C. §1154(a)(1)(A)(i) or classification pursuant to clause (i) of Section 204(a)(1)(B) of the INA [8 U.S.C. §1154(a)(1)(B)(i)] or classification pursuant to clause (i) of Section 204(a)(1)(B) of the INA [8 U.S.C. §1154(a)(1)(B)(i)], or

(5) Cancellation of removal pursuant to Section 240A(b)(2) of the INA [8 U.S.C. §1229(b)(2)]

D For the period for which benefits are sought, the individual responsible for the battery or cruelty does not reside in the same household or family eligibility unit as the individual subjected to the battery or cruelty

9 An alien who meets all of the conditions of subparagraphs A, B, C, D and E below:

A The alien has a child who has been battered or subjected to extreme cruelty in the United States by a spouse or a parent of the alien (without the active participation of the alien in the battery or cruelty), or by a member of the spouse's or parent's family residing in the same household as the alien, and the spouse or parent consented or acquiesced to such battery cruelty. For purposes of this subsection, the term "battered or subjected to extreme cruelty" includes, but is not limited to, being the victim of any act or threatened act of violence including any forceful detention, which results or threatens to result in physical or mental injury. Rape, molestation, incest (if the victim is a minor) or forced prostitution shall be considered acts of violence.

B The alien did not actively participate in such battery or cruelty

C There is a substantial connection between such battery or cruelty and the need for the benefits to be provided in the opinion of the Office of Statewide Health Planning and Development. For purposes of this subsection, the following circumstances demonstrate a substantial connection between the battery or cruelty and the need for the benefits to be provided:

(1) The benefits are needed to enable the alien's child to become self-sufficient following separation from the abuser.

(2) The benefits are needed to enable the alien's child to escape the abuser and/or the community in which the abuser lives, or to ensure the safety of the alien's child from the abuser.

(3) The benefits are needed due to a loss of financial support resulting from the alien's child's separation from the abuser.

(4) The benefits are needed because the battery or cruelty, separation from the abuser, or work absences or lower job performance resulting from the battery or extreme cruelty or from legal proceedings relating thereto (including resulting child support, child custody and divorce actions) cause the alien's child to lose his or her job or earn less or to require the alien's child to leave his or her job for safety reasons.

(5) The benefits are needed because the alien's child requires medical attention or mental health counseling, or has become disabled, as a result of the battery or extreme cruelty.

(6) The benefits are needed because the loss of a dwelling or source of income or fear of the abuser following separation from the abuser jeopardizes the alien's child's ability to care for his or her children (e.g., inability to house, feed or clothe children or to put children into a day care for fear of being found by the abuser).

(7) The benefits are needed to alleviate nutritional risk or need resulting from the abuse or following separation from the abuser.

(8) The benefits are needed to provide medical care during a pregnancy resulting from the abuser's sexual assault or abuse of, or relationship with, the alien's child and/or to care for any resulting children.

(9) Where medical coverage and/or health care services are needed to replace medical coverage or health care services the alien's child had when living with the abuser

D The alien meets the requirements of (c) 8 C above

E For the period for which benefits are sought, the individual responsible for the battery or cruelty does not reside in the same household or family eligibility unit as the individual subjected to the battery or cruelty.

10 An alien child who meets all of the conditions of subparagraphs A, B or C below:

A The alien child resides in the same household as a parent who has been battered or subjected to extreme cruelty in the United States by that parent's spouse or by a member of the spouse's family residing in the same household as the parent and the spouse consented or acquiesced to such batter or cruelty. For purposes of this subsection, the term "battered or subjected to extreme cruelty" includes, but is not limited to, being the victim of any act or
threatened act of violence including any forceful detention, which results or threaten to result in physical or mental injury. Rape, molestation, incest (if the victim is a minor) or forced prostitution shall be considered acts of violence.

B. There is a substantial connection between such battery or cruelty and the need for the benefits to be provided in the opinion of the Office of Statewide Health Planning and Development. For purposes of this subsection, the following circumstances demonstrate a substantial connection between the battery or cruelty and the need for the benefits to be provided:

(1) The benefits are needed to enable the alien child’s parent to become self-sufficient following separation from the abuser.

(2) The benefits are needed to enable the alien child’s parent to escape the abuser and/or the community in which the abuser lives, or to ensure the safety of the alien child’s parent from the abuser.

(3) The benefits are needed due to a loss of financial support resulting from the alien child’s parent’s separation from the abuser.

(4) The benefits are needed because the battery or cruelty, separation from the abuser, or work absences or lower job performance resulting from the battery or extreme cruelty or from legal proceedings relating thereto (including resulting child support, child custody and divorce actions) cause the alien child’s parent to lose his or her job or to earn less or to require the alien child’s parent to leave his or her job for safety reasons.

(5) The benefits are needed because the alien child’s parent requires medical attention or social services, or has become disabled, as a result of the battery or extreme cruelty.

(6) The benefits are needed because the loss of a dwelling or source of income or fear of the abuser following separation from the abuser jeopardizes the alien child’s parent’s ability to care for his or her children (e.g., ability to house, feed or clothe the children or to put children into a day care for fear of being found by the abuser).

(7) The benefits are needed to alleviate nutritional risk or need resulting from the abuse or following separation from the abuser.

(8) The benefits are needed to provide medical care during pregnancy resulting from the abuser’s sexual assault or abuse of, or relationship with, the alien child’s parent and/or to care for any resulting children.

(9) Where medical coverage and/or health care services are needed to replace medical coverage or health care services the alien child’s parent had when living with the abuser.

C. The alien meets the requirements of 3H(3) above.

(d) For purposes of this section, “nonimmigrant” is defined the same as in Section 101(a)(15) of the INA [8 U.S.C. § 1101(a)(15)].

(e) For purposes of establishing eligibility for “Certification and Approval of Hospital Inspectors” examination, as authorized by Sections 1275, 127010, 127015, 129689 and 129825 of the Health and Safety Code, all of the following must be met:

1. The applicant must declare himself or herself to be a citizen of the United States, a qualified alien under subsection (c), a nonimmigrant alien under subsection (d), or an alien paroled into the United States for less than one year under Section 212(d)(5) of the INA [8 U.S.C. § 1182(d)(5)]. The applicant shall declare that status through use of a form provided by the Office of Statewide Health Planning and Development.

2. The applicant must present documents of a type acceptable to the Immigration and Naturalization Service (INS) which serve as reasonable evidence of the applicant’s declared status. A fee receipt from the INS for replacement of a lost, stolen or unreadable INS document is reasonable evidence of the alien’s declared status.

3. The applicant must complete and sign the form provided by the Office of Statewide Health Planning and Development.

4. Where the documents presented do not on their face appear to be genuine or to relate to the individual presenting them, the government entity that originally issued the documents should be contacted for verification. With regard to naturalized citizens and derivative citizens presenting certificates of citizenship and aliens, the INS is the appropriate government entity to contact for verification. The Office of Statewide Health Planning and Development should request verification from the INS by filing INS Form G-845 with copies of the pertinent documents provided by the applicant with the local INS office. If the applicant has lost his or her original documents or presents expired documents or is unable to present any documentation evidencing his or her immigration status, the applicant should be referred to the local INS office to obtain the proper documentation.

5. The type of documentation referred to the INS for verification pursuant to INS Form G-845 shall include the following:

A. The document presented indicates immigration status but does not include an alien registration or alien admission number.

B. The document is suspected to be counterfeit or to have been altered.

C. The document includes an alien registration number in the A6 000 000 (not yet issued) or A80 000 000 (illegal border crossing) series.
D The document is one of the following: an INS Form I-181b notification letter issued in connection with an INS Form I-181b Memorandum of Creation of Record of Permanent Residence, an Arrival-Departure Record (INS Form I-94) or a foreign passport stamped “PROCESSED FOR I-551, TEMPORARY EVIDENCE OF LAWFUL PERMANENT RESIDENCE” that INS issued more than one year before the date of application for the Hospital Inspector Certification exam.

6 If the INS advises that the applicant has citizenship status or immigration status which makes him or her a qualified alien under the PRWORA, the INS verification should be accepted. If the INS advises that it cannot verify that the applicant has citizenship status or an immigration status that makes him or her a qualified alien, benefits should be denied and the applicant notified pursuant to the Hospital Inspector Certification Examination regular procedures of his or her rights to appeal the denial of benefits.

(f) Pursuant to Section 434 of the PRWORA (8 U.S.C. § 1644), where the Office of Statewide Health Planning and Development reasonably believes that an alien is unlawfully in the state based on the failure of the alien to provide reasonable evidence of the alien's declared status, after an opportunity to do so, said alien shall be reported to the Immigration and Naturalization Service.

(g) Provided that the alien has completed and signed the form provided by the Office of Statewide Health Planning and Development under penalty of perjury, eligibility for the Hospital Inspector Certification Examination shall not be delayed, denied, reduced or terminated while the status of the alien is verified.

(h) Pursuant to Section 432(d) of the PRWORA (8 U.S.C. § 1642 (d)), a nonprofit charitable organization that provides federal, state or local public benefits shall not be required to determine, verify or otherwise require proof of eligibility of any applicant or beneficiary with respect to his or her immigration status or alienage.

(i) Any applicant who is determined to be ineligible pursuant to subsections (b) and (e) or who was made eligible for the Hospital Inspector Certification Examination, whose services are terminated, suspended or reduced pursuant to subsections (b) and (e), is entitled to an appeal, pursuant to Section 7-215 of Article 19, Chapter 7, Part 1.

Authority: Health and Safety Code Sections 129850
Reference: Health and Safety Code Sections 129785, 129787 and 129820

ARTICLE 20
REPAIR OF EARTHQUAKE DAMAGE

7-300. Plan review and approval.

(a) All repair projects are subject to prior plan review, plan approval and construction permit by the Office except as noted in subsection (b).

(b) For emergency repairs carried out without the Office plan review and permit the aftermath of an earthquake, an application for plan review must be submitted with construction documents, fees and a letter of transmittal stating the reasons for emergency repairs. Photographs, if available, and reports of damage and repairs should also be submitted with the application. Additional repairs may be required if the emergency repairs do not comply with the code. For alternate fee payment methodology, see Section 129787 of the Health and Safety Code.

(c) Plan reviews for earthquake damage repairs will be performed on a priority basis. The application for plan review should clearly state that the scope of the project is to repair the damage from the earthquake. Where possible, reviews will be made over the counter.

(d) Plan review fees shall be payable for all damage repair projects per the following:

1. 1.64 percent of estimated construction costs for hospitals.
2. 1.50 percent of estimated construction cost for skilled nursing facilities (SNF) or intermediate care facilities (ICF).
3. For alternate fee payment methodology, see Section 129787 of the Health and Safety Code.
4. An examination fee where review of existing plans is required. The fee will be calculated on a time and material basis at the prevailing hourly rates applicable for the review personnel.

(e) Office recommends predesign conference with architects/engineers to resolve code issues relevant to the repair projects.

Authority: Health and Safety Code Section 129850
Reference: Health and Safety Code Sections 129785, 129787 and 129820

7-301. Appeals. The Hospital Building Safety Board shall act as a board of appeals with regard to disagreements between the Office and hospital/SNF/ICF authorities on interpreting the repair policy or the establishment of the degree of damage (Section 7-159 of Administrative Regulations for the Office).

Authority: Health and Safety Code Section 129850
Reference: Health and Safety Code Section 129925

7-302. Pre-1973 structures. These hospital buildings were approved for construction by local building departments prior to March 7, 1973.

(a) All structural repairs shall be made to conform to vertical load requirements of the California Building Code (CBC).

(b) Where lateral load resisting capacity of the building at any level is reduced by 15 percent or less due to earthquake damage, the repairs may be made with the same construction as before, subject to structural detailing requirements of the CBC.

(c) Where lateral load resisting capacity of the building at any level is reduced by more than 5 percent but not more than 10 percent due to earthquake damage, the repairs shall be made in accordance with Section 3411A.3.2.2 of the CBC.

(d) Where lateral load resisting capacity of the building at any level is reduced by more than 10 percent due to earthquake damage, the repairs shall be made in accordance with Section 3411A.3.2.2 of the CBC.
damage, the repairs shall be made such that the primary structural system and the seismic bracing of other components and systems shall conform to the requirements of Section 3411 A 3 2 3 of the CBC.

(e) Where earthquake repairs consist of alterations which involve removal of one or more entire stories, permission for repairs will be granted if lateral load resisting capacity of the remaining structure is not reduced (Section 3411A 3 2 4, CBC).

(f) Repair/reconstruction of structures should comply with the design and detailing requirements of engineering materials stated in Chapters 19A, 20, 21A, 22A and 23 as applicable and applicable fire-resistive requirements of the CBC.

(g) Epoxy injection repairs shall require submittal of backup information per Section 104.11, Appendix Chapter 1 of the CBC.

(h) Repair of damage to seismic anchorage of equipment and nonstructural items shall comply with Section 3403A 2 3 of the CBC.

Authority: Health and Safety Code Section 129850
Reference: Health and Safety Code Section 129725

7-303. Post-1973 structures. These hospital structures were approved for construction by the Office of the State Architect or Office after March 7, 1973. They are also referred to in the regulations as approved existing buildings.

(a) Repairs to the damage shall be made to restore the load carrying capacities of the affected elements per Section 3411A 3 1 of the CBC.

(b) Repair of damage to seismic anchorage of equipment and nonstructural items shall comply with Section 3403A 2 3 of the CBC.

Authority: Health and Safety Code Section 129850
Reference: Health and Safety Code Section 129725

7-304. Type V Single-story SNF or ICF.

(a) All structural repairs shall be made to conform to vertical load requirements of the CBC.

(b) Repair of damage to seismic anchorage of equipment shall comply with the CBC.

(c) Where damage has reduced the lateral load capacity by more than 10 percent in any one line of the lateral force resisting system in the building, repairs of structural elements shall conform to Section 3403 2 of the CBC.

Authority: Health and Safety Code Section 129850

7-305. All hospital buildings.

(a) Where architectural, mechanical, electrical, fire and life safety systems and components damaged by the earthquake are to be replaced, new systems and components shall comply with the current applicable Title 24 codes where practicable in consultation with the Office.

(b) Where the repairs to earthquake damage are required in accordance with Section 7-302 or 7-303, hospital facilities may reopen, after temporary repairs, for a limited period of time subject to the following:

1 Temporary repairs: The hazard resulting from damage to the facility is abated and the facility is at least restored to its pre-earthquake condition or its equivalent.

2 Permanent repairs/retrofit: The hospital successfully negotiates with the Office a time bound plan for the permanent repairs/retrofit of the damaged facilities required by these regulations.

Authority: Health and Safety Code Section 129850

HISTORY:

1 (OSH/PDF/EF 1/91) Emergency order by the Office of Statewide Health Planning and Development to amend Section 7-133, Part 1, Title 24, California Code of Regulations. Filed as an emergency order with the secretary of state September 25, 1991; effective September 25, 1991. Approved as an emergency by the California Building Standards Commission on September 20, 1991

2 (OSH/PDF/EF 1/91) Permanent order by the Office of Statewide Health Planning and Development to amend Section 7-133, Part 1, Title 24, California Code of Regulations. Filed as a permanent order with the secretary of state February 25, 1992; effective September 25, 1991. Approved as an emergency by the California Building Standards Commission on February 24, 1992

3 (OSH/PDF/EF 1/92) Emergency order by the Office of Statewide Health Planning and Development to amend Sections 7-111 and 7-191, Part 1, Title 24, California Code of Regulations. Filed as an emergency order with the secretary of state September 1, 1992; effective September 1, 1992. Approved as an emergency by the California Building Standards Commission on August 27, 1992

4 (OSH/PDF/EF 1/92, permanent) Emergency order by the Office of Statewide Health Planning and Development to amend Sections 7-111 and 7-191, Part 1, Title 24, California Code of Regulations. Filed as a permanent order with the secretary of state on March 9, 1993; effective March 3, 1993. Approved as a permanent order by the California Building Standards Commission on March 5, 1993

5 (OSH/PDF/EF 1/93) Emergency order by the Office of Statewide Health Planning and Development to add Sections 7-300 through 7-305, Part 1, Title 24, California Code of Regulations. Filed as an emergency order with the secretary of state on September 8, 1995; effective September 8, 1995. Approved as an emergency by the California Building Standards Commission on September 7, 1995

6 (OSH/PDF/EF 1/95, permanent) Emergency order by the Office of Statewide Health Planning and Development to add Sections 7-300 through 7-305, Part 1, Title 24, California Code of Regulations. Filed as a permanent order with the secretary of state on November 30, 1995. Since there were no changes, effective date remains September 8, 1995.

ARTICLE 21
PLAN REVIEW, BUILDING INSPECTION AND CERTIFICATION OF SURGICAL CLINICS, CHRONIC DIALYSIS CLINICS AND OUTPATIENT SERVICES CLINICS

7-2100. Scope of responsibilities.

(a) Except as otherwise provided in these regulations, a city or county building jurisdiction shall be responsible for plan review and building inspection of new construction or alteration of clinic facilities specified in 7-2100 (a) (1), (2), (3) and (4) and shall also provide certification that the clinic facilities identified in 7-2100 (a) (1), (2) and (3) are in conformance with the applicable clinic provisions in the latest edition of the California Building Standards Code. For clinic facilities identified in 7-2100 (a) (1), (2) or (3), construction or alteration shall include buildings converted to the specific purpose.

1 Surgical clinic as defined in Health and Safety Code, Section 1204 (b) (1)
2 Chronic dialysis clinic as defined in Health and Safety Code, Section 1204 (b) (2).
3 Surgical and/or chronic dialysis clinic building which is freestanding from a building where hospital services are provided and as defined in Health and Safety Code, Section 129725 (b) (1)
4. Any building where hospital outpatient clinical services are provided that is freestanding from a hospital building, as defined in Health and Safety Code, Section 129725 (a), except those buildings identified in 7-2100 (a) (3)

(b) The city or county shall not establish or apply building standards for the construction or alteration of hospital licensed freestanding clinics, as described in Section 7-2100 (a) (3) and (4), which are more restrictive or comprehensive than comparable building standards established or applied to clinic facilities which are not hospital licensed pursuant to Health and Safety Code, Chapter 1 (commencing with Section 1200) of Division 2.

Reference: Health and Safety Code Section 129885

7-2101. Surgical clinic and chronic dialysis clinic project submittal to the local building jurisdiction.

(a) The governing authority or owner of a clinic, as described in Section 7-2100 (a) 1 and 2, shall submit construction plans to the city or county, as applicable, for plan review, building inspection and certification. Certification by the local building jurisdiction shall indicate that the project clinic is in conformance with the applicable clinic provisions in the latest edition of the California Building Standards Code.

Exception: Notwithstanding Section 7-2100 (a) (1) and (2), the governing authority or owner may require the Office to perform the plan review and certification, pursuant to Section 7-2102.

(b) Upon the clinic’s initial submittal of project plans, the city or county shall advise the governing authority or owner, in writing, of its decision that plan review services will either include certification or not include certification.

(c) If the city or county indicates to the governing authority or owner that it will include certification with plan review of the specified clinic project, the city or county shall:

1. Review plans to all applicable provisions in the latest edition of the California Building Standards Code and;
2. Provide written certification to the applicant within 30 days of completion of construction that the applicable clinic provisions have been met.

(d) If the city or county indicates to the applicant that it will not include certification with plan review of the specified clinic project, the city or county shall review the plans to the provisions of the latest edition of the California Building Standards Code, excluding the clinic provisions. The governing authority or owner shall also submit the following items to the Office:

1. A completed application, design plans and specifications for the clinic project, pursuant to Section 7-113, and;
2. A fee, pursuant to Section 7-2106.

(e) The Office shall review the plans and specifications to determine whether or not the clinic project meets the applicable clinic provisions in the latest edition of the California Building Standards Code.

(f) Upon completion of plan review and receipt of all applicable fees, the Office shall provide the clinic applicant with written certification that the project design plans and specifications meet the clinic provisions in the latest edition of the California Building Standards Code.

(g) Building construction inspection for the clinic project shall be performed by the local jurisdiction.

7-2102. Request for the office to provide plan review for surgical clinics and chronic dialysis clinics.

(a) If the governing authority or owner of a clinic, as described in Section 7-2100 (a) (1) or (2), elects to request the Office to provide plan review services for a clinic project, in lieu of the city or county, the request shall be submitted to the Office in writing. The Office will consult with the applicable local building jurisdiction prior to acceptance or nonacceptance of the plan review request and subsequently notify the clinic, in writing, of its decision.

(b) If the Office agrees to provide plan review and certification services for the governing authority or owner, the applicant shall submit the following items to the Office:

1. A completed application, design plans and specifications for the clinic project, pursuant to Section 7-113, and;
2. A fee, pursuant to Section 7-2106.

(c) The Office shall review the plans to all applicable provisions in the latest edition of the California Building Standards Code.

(d) Upon completion of plan review and receipt of all applicable fees, the Office shall provide the applicant with written certification that the project design plans and specifications meet the applicable clinic provisions in the latest edition of the California Building Standards Code.

(e) Building construction inspection for the project clinic shall be performed by the local building jurisdiction. Therefore, the governing authority or owner shall submit to the city or county applicable project documents required for these building inspection services.

7-2103. Hospital outpatient services clinic project submittal to local building jurisdiction.

(a) The hospital governing authority or owner of a freestanding outpatient services clinic, as described in Section 7-2100 (a) (3) or (4), shall submit construction plans to the city or county, as applicable, for plan review and building inspection, pursuant to this section or may request the Office to perform plan review and building inspection, pursuant to Section 7-2104. Certification by the local building jurisdiction that the project clinic is in conformance with the applicable clinic provisions in the latest edition of the California Building Standards Code is also required for clinics described in 7-2100 (a) (3)

(b) If the hospital governing authority or owner of a clinic, as described in Section 7-2100 (a) (3), initially submits clinic plans to the city or county for plan review, the city or county shall respond to the clinic owner, in writing, stating its decision of whether or not the plan review will include certification.

(c) If the city or county indicates to the hospital governing authority or owner that it will include certification with plan review of the specified clinic project, the city or county shall:
1. Review plans to all applicable provisions in the latest edition of the California Building Standards Code and;

2. Provide written certification to the applicant within 30 days of completion of construction that the applicable clinic provisions have been met.

(d) If the city or county indicates to the hospital governing authority or owner that it will not include certification with plan review of the specified clinic project, the city or county shall review the plans to the provisions of the latest edition of the California Building Standards Code, excluding the clinic provisions. The applicant shall also submit the following items to the Office:

1. A completed application, design plans and specifications for the clinic project, pursuant to Section 7-113, and;

2. A fee, pursuant to Section 7-2106.

(e) The Office shall review the plans and specifications for certification to determine whether or not the clinic project meets the applicable clinic provisions in the latest edition of the California Building Standards Code.

(f) Upon completion of plan review and receipt of all applicable fees, the Office shall provide the clinic applicant with certification that the project design plans and specifications meet the applicable clinic provisions in the latest edition of the California Building Standards Code.

(g) Building construction inspection for the project clinic shall be performed by the local building jurisdiction.

7-2104. Plan review and building inspection by the office for hospital outpatient services clinics.

(a) The hospital governing authority, as described in Section 7-2100 (a) (1) or (4), may request that the Office perform plan review and building inspection for a clinic project, in lieu of the city or county performing these services. This request shall be submitted to the Office in writing.

(b) The Office shall perform the requested plan review and building inspection services when the hospital governing authority submits the following items to the Office:

1. A completed application, design plans and specifications for the clinic project, pursuant to Section 7-113; and

2. A fee, pursuant to Section 7-2106.

(c) For clinic facilities described in Section 7-2100 (a) (3), upon completion of the building construction and receipt of all applicable fees, the Office will provide certification that the plans and construction comply with the applicable provisions in the California Building Standards Code.

(d) A clinic building which has been accepted by the Office, pursuant to paragraph (a) of this section, shall remain under the jurisdiction of the Office for plan review and building inspection of any subsequent alterations, unless the hospital governing authority or owner submits written notification to the Office, requesting the applicable city or county building jurisdiction to conduct plan review and building inspection for subsequent construction projects of the specified clinic.

7-2105. “Hospital Building” designation of a freestanding hospital-owned clinic.

(a) A building which is under the Office’s jurisdiction, pursuant to Section 7-2104 (d) may be designated as a “hospital building” by the hospital governing authority or owner under the following conditions:

1. The hospital governing authority or owner submits written notification to the Office indicating the determination to designate the building as a “hospital building” and;

2. The subject building remains under the jurisdiction of the Office for plan review and building inspection.

(b) A building designated as a “hospital building,” pursuant to Section 7-2105 (a), shall be reviewed and inspected to verify compliance with the standards and requirements for a hospital building, as defined in Health and Safety Code, Part 7, Chapter 1, (commencing with Section 129675).

7-2106. Fees for review of specified clinics.

(a) Fees for plan review services of clinic buildings described in Section 7-2100 (a) 1, 2 and 3, shall be in an amount not to exceed the actual cost of performing the services.

Exception: When the Office accepts a request from the hospital governing authority or owner to perform plan review and building inspection services for those buildings described in Section 7-2100 (a) 3, the fee requirements of Section 7-133 (a) (1) which apply to hospital buildings shall also apply to the project building.

(b) When the Office accepts a request from the hospital governing authority or owner to perform plan review and building inspection services for those buildings described in Section 7-2100 (a) (4), the fee requirements of Section 7-133 (a) (1) which apply to hospital buildings shall also apply to the project building.

(c) Fees shall be paid as follows:

1. A nonrefundable filing fee of $250.00 shall accompany the application for plan review. This filing fee will be applied toward the total fees due for the project.

2. After a preliminary review of the required documents received and determination of the services to be performed, the Office will provide an estimate of the total review fee due based on costs to be incurred.

3. The applicant shall submit payment of the estimated fee prior to start of the plan review and building inspection services.

4. If during the review/inspection process it appears that actual costs will exceed the estimate by more than five percent (5%), the applicant will be informed that additional fees, not to exceed the actual cost will be due and payable immediately upon project completion.

5. All applicable fees for a completed project shall be paid prior to certification by the Office.

Authority: Health and Safety Code Sections 18929 and 129675-130070
Reference: Health and Safety Code Section 129885

7-2107. Fee refund.

(a) Upon written request from the applicant, a fee refund may be issued pursuant to this section.
SAFETY STANDARDS FOR HEALTH FACILITIES

1. The written request must be submitted to the office within:
   a. One year of the date of written certification of compliance with the applicable clinic provisions
   b. One year of the date the project is withdrawn by the applicant
   c. The time limits specified in Section 7-134 for building(s) as described in Section 7-2104

2. No refund shall be issued before written certification is provided, or the project is withdrawn or closed.

3. Refunds shall be exclusive of the $250 filing fee

4. Refunds shall be calculated pursuant to Section 7-2107(b), (c) or (d)

(b) Fees paid for a project, involving a building(s) as described in Section 7-2100(a)(1), (2) or (3), which exceed the actual cost for performing plan review and inspection services by more than five percent (5%), shall be refunded by the Office

   Exception: Refunds for building(s) described in Section 7-2104 shall be calculated pursuant to the applicable requirements of Section 7-134

(c) If an applicant withdraws a project that has been submitted to the Office for plan review of a building(s), as described in Section 7-2100(a)(1), (2) or (3), the unexpended balance of fees paid to the Office for actual cost of plan review services provided shall be refunded to the applicant

   Exception: Refunds for building(s) described in Section 7-2104 shall be calculated pursuant to the applicable requirements of Section 7-134

(d) If an applicant requests a refund of fees for a project that has been submitted to the Office for plan review and building inspection, as described in Section 7-2100(a)(4), a fee may be refunded to the applicant pursuant to the applicable requirements of Section 7-134

Authority: Health and Safety Code Sections 1226, 18929 and 129675-130070.
Reference: Health and Safety Code Section 129885
HISTORY NOTE APPENDIX FOR CHAPTER 7

Administrative Regulations for the
Office of Statewide Health Planning and Development
(Title 24, Part 1, California Code of Regulations)

The format of the history notes has been changed to be consistent with the other parts of the California Building Standards Code. The history notes for prior changes remain within the text of this code.

1. (OSHPD 1/97) Regular order by the Office of Statewide Health and Planning and Development to amend Chapters 6 and 7 as a result of SB 1953. Filed at the secretary of state on March 25, 1998; effective March 25, 1998. Approved by the California Building Standards Commission on March 18, 1998.


6. (OSHPD 10/99) Filing Fee/Personal Knowledge Verified Reports. Amend Sections 7-103, 7-111, 7-113, 7-133, 7-151. Approved as submitted by the California Building Standards Commission on May 24, 2000. Filed with the Secretary of State on June 8, 2000, effective July 7, 2000.


8. (OSHPD 01/01) 7-115 Preparation of Plans and Specifications. 7-152 Supplantation of an Architect, Engineer or Inspector of Record, Special Inspector or Contractor. Approved as submitted by the California Building Standards Commission on September 25, 2001. Filed with the Secretary of State on November 6, 2001, effective December 6, 2001.

9. October 1, 2002 Errata adding Number 8 above.


13. (OSHPD 01/04) Amend Chapter 6, Article 1 for change in Seismic Performance Category nonconforming building. Amend Chapter 7, Article 3 for plan review, Article 4 for construction inspection, Article 5 for appeals to the Hospital Building Safety Board, Article 6 for contract services, Article 19 for certification of hospital inspectors, and Article 21 for fees for review of specified clinics. Filed with Secretary of State on May 23, 2006, and effective on the 30th day of filing with the Secretary of State.

14. (OSHPD 01/06) Amendments to administrative standards for the review and construction of health facilities: preparation of plans and specifications, Hospital Inspector certification, and plan review and inspection of outpatient clinics. Filed with the Secretary of State on February 15, 2007, and effective 30 days thereafter.

15. (OSHPD EF 01/07) Amend Title 24, Part 1, Chapter 7, Article 1, Article 2, Article 3, Article 20. Approved by the California Building Standards Commission on July 19, 2007. Filed with Secretary of State on July 20, 2007, effective on July 20, 2007.
CHAPTER 10
ADMINISTRATIVE REGULATIONS FOR THE
CALIFORNIA ENERGY COMMISSION (CEC)

ARTICLE 1
ENERGY BUILDING REGULATIONS

(a) This article contains administrative regulations relating to the energy building regulations in Title 24, Part 6. This article applies to all residential and nonresidential buildings.
(b) Nothing in this article lessens any necessary qualifications or responsibilities of licensed or registered building professionals or other designers or builders, or the duties of enforcement agencies, that exist under state or local law.

Authority: Sections 25402 and 25402.1, Public Resources Code
Reference: Sections 25402 and 25402.1, Public Resources Code

HISTORY:
1 New Article 1 (Section 1401) filed 5-3-76; effective thirtieth day thereafter (Register 76, No. 19)
2 Amendment filed 8-17-77; designated effective 3-11-78 (Register 77, No. 34)
3 Repealer of Article 1 (Section 1401) and new Article 1 (Sections 1401-1408, not consecutive) filed 12-9-81; designated effective 7-1-82 (Register 81, No.50)
4 Amendment filed 12-27-84; designated effective 1-1-85 pursuant to Government Code Section 11346 2 (d) (Register 84, No. 52)

10-102. Definitions. In this article the following definitions apply:

ACCEPTANCE REQUIREMENTS are “acceptance requirements for code compliance” as defined in Section 101 (b) of Part 6.


APPLIANCE EFFICIENCY REGULATIONS are the regulations in Title 20, Section 1601 et Seq. of the California Code of Regulations.

APPROVED CALCULATION METHOD is a Public Domain Computer Program approved under Section 10-109 (a), or any Alternative Calculation Method approved under Section 10-109 (b)

BUILDING PERMIT is an electrical, plumbing, mechanical, building or other permit or approval, that is issued by an enforcement agency, and that authorizes any construction that is subject to Part 6.

COMMISSION is the State Energy Resources Conservation and Development Commission.

COMPLIANCE APPROACH is any one of the allowable methods by which the design and construction of a building may be demonstrated to be in compliance with Part 6. The compliance approaches are the performance compliance approach and the prescriptive compliance approach. The requirements for each compliance approach are set forth in Section 100 (c) 2 of Part 6.

CONDITIONED FLOOR AREA is “conditioned floor area” as defined in Section 101 (b) of Part 6.

CRRC-1 is the Cool Roof Rating Council document entitled “Product Rating Program.”

ENERGY BUDGET is the “energy budget” as defined in Section 101(b) of Part 6.

ENFORCEMENT AGENCY is the city, county or state agency responsible for issuing a building permit.

EXECUTIVE DIRECTOR is the executive director of the Commission.

HVAC SYSTEM is the “HVAC system” as defined in Section 101(b) of Part 6.

MANUFACTURED DEVICE is “manufactured device” as defined in Section 101(b) of Part 6.

NFRC 100 is the National Fenestration Rating Council document entitled “NFRC 100: Procedure for Determining Fenestration Product U-factors” (1997 or November 2002; NFRC 100 includes procedures for site built fenestration formerly included in a separate document, NFRC 100-SB)1


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1 Either the 1997 edition or the November 2002 edition may be used for product rating prior to April 1, 2004. Product ratings authorized by NFRC prior to April 1, 2004 are valid for the full certification period. Beginning April 1, 2004 only the November 2002 edition may be used for new product rating.

2 Either the 1995 edition or the November 2002 edition may be used for product rating prior to April 1, 2004. Product ratings authorized by NFRC prior to April 1, 2004 are valid for the full certification period. Beginning April 1, 2004 only the November 2002 edition may be used for new product rating.

PART 6 is Title 24, Part 6 of the California Code of Regulations.

PUBLIC ADVISER is the Public Adviser of the Commission.

R-VALUE is the measure of the thermal resistance of insulation or any material or building component expressed in ft²·°F/Btu.

RECORD DRAWINGS are drawings that document the as-installed location and performance data on all lighting and space conditioning system components, devices, appliances, and equipment, including but not limited to wiring sequences, control sequences, duct and pipe distribution system layout and sizes, space conditioning system terminal device layout and air flow rates, hydronic system and flow rates, and connections for the space conditioning system. Record drawings are sometimes called “as built.”

Authority: Sections 25402 and 25402 1, Public Resources Code
Reference: Sections 25402 and 25402 1, Public Resources Code

HISTORY:
1. Amendment filed 12-27-84; designated effective 1-1-85 pursuant to Government Code Section 11346.2 (d) (Register 84, No 52).
2. Amendment filed 12-4-86; effective thirtieth day thereafter (Register 87, No. 1).
3. (CEC 1/92) Regular order by the California Energy Commission to amend Section 10-102, Part 1, Title 24, California Code of Regulations. Filed with the secretary of state June 12, 1992; publication date July 15, 1992; effective 30 days thereafter. Approved as a regular order by the California Building Standards Commission on June 8, 1992.
4. (CEC 1/94) Regular order by the California Energy Commission to amend Section 10-102, Part 6, Title 24, California Code of Regulations. Filed with the secretary of state May 24, 1995; effective 30 days thereafter. Approved as a regular order by the California Building Standards Commission on May 23, 1995.

10-103. Permit, certificate, informational and enforcement requirements for designers, installers, builders, manufacturers and suppliers.

(a) Documentation.

1. Certificate of Compliance. The Certificate(s) of Compliance described in Section 10-103 shall be signed by the person(s) responsible for the building design to certify conformance with Part 6. The signers(s) shall be eligible under Division 3 of the Business and Professions Code to sign such documents. If more than one person has responsibility for building design, each person may sign the document or documents applicable to that portion of the design for which the person is responsible. Alternatively, the person with chief responsibility for design may prepare and sign the document for the entire design.

Subject to the preceding paragraph, persons who prepare energy compliance documentation shall sign a statement that the documentation is accurate and complete.

2. Application for a building permit. Each application for a building permit subject to Part 6, shall contain at least one copy of the documents listed in Sections 10-103 (a) 2 A, 10-103 (a) 2 B and 10-103 (a) 2 C.

A. For all newly constructed buildings, additions, alterations or repairs regulated by Part 6, the applicant shall file the appropriate Certificate(s) of Compliance on the plans. The certificate(s) shall indicate the features and performance specifications needed to comply with Part 6, and shall be approved by the local enforcement agency by stamp or authorized signature. The Certificate(s) of Compliance and supporting documentation shall be readily legible and of substantially similar format and informational order and content to the appropriate Certificate(s) of Compliance and supporting documentation in the appropriate Residential or Nonresidential Manual, as defined in Part 6.

B. Plans and specifications submitted with each application for a building permit shall show the characteristics of each feature, material, component and manufactured device proposed to be installed in order to have the building meet the requirements of Part 6, and of any other feature, material, component or manufactured device that Part 6 requires be indicated on the plans and specifications. Plans and specifications submitted with each application for a building permit for nonresidential buildings, high rise residential buildings, and hotels and motels shall provide acceptance requirements for code compliance of each feature, material, component or manufactured device when acceptance requirements are required under Part 6. Plans and specifications for nonresidential buildings, high rise residential buildings, and hotels and motels shall require that within 90 days after the enforcement agency issues a final occupancy permit, record drawings be provided to the building owner. If any characteristic is materially changed before final construction and installation, such that the building may no longer comply with Part 6, the building must be brought back into compliance and so indicated on amended plans, specifications, and Certificate(s) of Compliance and shall be submitted to the enforcement agency. Such characteristics shall include the efficiency (or other characteristic regulated by Part 6) of each device.

C. All documentation necessary to demonstrate compliance for the building, and of the sections of Part 6 with which the building is intended to comply shall be submitted with each application for a building permit.
permit. The forms used to demonstrate compliance shall be readily legible and of substantially similar format and informational order and content to the appropriate forms in the Residential or Nonresidential Manual, as defined in Part 6.

3 Installation certificate.

A. The person with overall responsibility for construction or the person or persons responsible for the installation of regulated manufactured devices shall post, or make available with the building permit(s) issued for the building, the Installation Certificate(s) for manufactured devices regulated by the Appliance Efficiency Regulations of Part 6. Such Installation Certificate(s) shall be made available to the enforcement agency for all appropriate inspections. These certificates shall:

1. Identify the features required to verify compliance with the Appliance Efficiency Regulations and Part 6.

2. Include a statement indicating that the installed devices conform to the Appliance Efficiency Regulations and Part 6 and the requirements for such devices given in the plans and specifications approved by the local enforcement agency.

3. State the number of the building permit under which the construction or installation was performed.

4. Be signed by the individual eligible under Division 3 of the Business and Professions Code to accept responsibility for construction, or their authorized representative. If more than one person has responsibility for building construction, each person may prepare and sign the part of the document applicable to the portion of the construction for which they are responsible; alternatively, the person with chief responsibility for construction may prepare and sign the document for the entire construction.

B. The enforcement agency may require the person with overall responsibility for the construction to provide any other reasonable information to determine that the building as constructed is consistent with approved plans and specifications and complies with Part 6.

C. If construction on any portion of the building subject to Part 6 will be impossible to inspect because of subsequent construction, the enforcement agency may require the installation certificate(s) to be posted upon completion of that portion.

4 Insulation certificate. After installing wall, ceiling or floor insulation, the installer shall make available to the enforcement agency or post in a conspicuous location in the building a certificate signed by the installer stating that the installation is consistent with the plans and specifications described in Section 10-103 (a) 2 A and for which the building permit was issued and conforms with the requirements of Part 6. The certificate shall also state the manufacturer's name and material identification, the installed R-value, and (in applications of loose-fill insulation) the minimum installed weight per square foot consistent with the manufacturer's labeled installed design density for the desired R-value.

Exception to Section 10-103 (a): Enforcing agencies may exempt nonresidential buildings that have no more than 1,000 square feet of conditioned floor area in the entire building and an occupant load of 49 persons or less from the documentation requirements of Section 10-103 (a), provided a statement of compliance with Part 6 is submitted and signed by a licensed engineer or the licensed architect with chief responsibility for the design.

(b) Certificate of acceptance. For all new nonresidential buildings, high-rise residential buildings and hotels and motels designated to allow use of an occupancy group or type regulated by Part 6, the applicant shall file Certificate(s) of Acceptance with the enforcement agency prior to receiving a final occupancy permit. The signer(s) shall be eligible under Division 3 of the Business and Professions Code to sign such documents. The certificate(s) shall be readily legible and of substantially similar format and informational order and content to the Certificate(s) of Acceptance in the Nonresidential Manual, as defined in Part 6. The certificate(s) shall be approved by the local enforcement agency by stamp or authorized signature and shall indicate that:

1. The applicant has demonstrated acceptance requirements as indicated in the plans and specifications submitted under Section 10-103 (a);

2. Installation certificates described in Section 10-103 (a) 3 are posted, or made available with the building permit(s) issued for the building; and

3. That operating and maintenance information described in Sections 10-103 (b) and 10-103 (c) were provided to the building owner.

(c) Operating and maintenance information to be provided by builder.

1 Operating information. The builder shall provide the building owner at occupancy the appropriate Certificate(s) of Compliance and a list of the features, materials, components, and mechanical devices installed in the building and instructions on how to operate them efficiently. The instructions shall be consistent with specifications set forth by the Executive Director.

For low-rise residential buildings, such information shall, at a minimum, include information indicated on forms Certificate of Compliance (CF-1R), Mandatory Measures (MF-1R), Installation Certificate (CF-6R), Insulation Certificate (IC-1), and a manual which provides all information specified in this Section 10-103 (b). The Home Energy Manual (P400-92-031, July 1992) may be used to meet the requirement for providing this manual.

For nonresidential buildings, high-rise residential buildings and hotels and motels, such information shall, at a minimum, include information required by the Certificates of Compliance, Certificate of Acceptance,
forms ENV-1, MECH-1 and LTG-1, an installation certificate and an insulation certificate.

For dwelling units, buildings or tenant spaces which are not individually owned and operated, or are centrally operated, such information shall be provided to the person(s) responsible for operating the feature, material, component or mechanical device installed in the building.

2. **Maintenance information.** The builder shall provide to the building owner at occupancy maintenance information for all features, materials, components and manufactured devices that require routine maintenance for efficient operation. Required routine maintenance actions shall be clearly stated and incorporated on a readily accessible label. The label may be limited to identifying, by title and/or publication number, the operation and maintenance manual for that particular model and type of feature, material, component or manufactured device.

For dwelling units, buildings or tenant spaces which are not individually owned and operated, or are centrally operated, such information shall be provided to the person(s) responsible for maintaining the feature, material, component or mechanical device in the building.

3. **Ventilation information.** For nonresidential buildings, the builder shall provide the building owner at occupancy a description of the quantities of outdoor and recirculated air that the ventilation systems are designed to provide to each area. For buildings or tenant spaces which are not individually owned and operated, or are centrally operated, such information shall be provided to the person(s) responsible for operating and maintaining the feature, material, component or mechanical device installed in the building.

(d) **Equipment information to be provided by manufacturer or supplier.** The manufacturer or supplier of any manufactured device shall, upon request, provide to building designers and installers information about the device. The information shall include the efficiency (and other characteristics regulated by Part 6).

(e) **Enforcement agency requirements.**

1. **Permits.** An enforcement agency shall not issue a building permit for any construction unless the enforcement agency determines in writing that the construction is designed to comply with the requirements of Part 6 that are in effect on the date the building permit was applied for.

   If a building permit has been previously issued, there has been no construction under the permit, and the permit has expired, the enforcement agency shall not issue a new permit unless the enforcement agency determines in writing that the construction is designed to comply with the requirements of Part 6 in effect on the date the new permit is applied for.

   "Determines in writing" includes, but is not limited to, approval of a building permit with a stamp normally used by the enforcement agency.

2. **Inspection.** The enforcement agency shall inspect new construction to determine whether it is consistent with the agency’s approved plans and specifications, and complies with Part 6. Final occupancy permits shall not be issued until such consistency is verified. For occupancy Group R-3, final inspection shall not be complete until such consistency is verified.

   Such verification shall include determining that all installed manufactured devices, regulated by the Appliance Efficiency Regulations or Part 6, are indicated on the Installation Certificate and are consistent with approved plans. This certificate shall include information specified in Section 10-103 (a) 3 A.

   For buildings that have used a compliance option that requires field verification and diagnostic testing, the building department shall not approve the building until the building department has received a Certificate of Field Verification and Diagnostic Testing that has been signed and dated by the HERS Rater.

**Authority:** Section 25402, Public Resources Code.

**Reference:** Section 25402, Public Resources Code

**HISTORY:**

1. Amendment of subsection (e) filed 1-19-84; effective thirtieth day thereafter (Register 84, No 3)

2. Amendment filed 12-27-84; designated effective 1-1-85 pursuant to Government Code Section 11346 2 (d) (Register 84, No 52)

3. Editorial correction of subsection (b) filed 2-5-85; effective upon filing pursuant to Government Code Section 11346 2 (d) (Register 85, No 6)

4. Amendment of subsection (a) filed 12-4-86; effective thirtieth day thereafter (Register 87, No 1)

5. (CEC 1952) Regular order by the California Energy Commission to amend Section 10-103, Part 1, Title 24, California Code of Regulations. Filed with the secretary of state June 12, 1992; publication date July 15, 1992; effective 30 days thereafter. Approved as a regular order by the California Building Standards Commission on June 8, 1992.

6. (CEC 293) Regular order by the California Energy Commission to amend Section 10-103 (a) 1, 2, 3 and 4; (b) 1, 2 and 3; (d) 2, Part 1, Title 24, California Code of Regulations. Filed with the secretary of state May 24, 1995; effective 30 days thereafter. Approved as a regular order by the California Building Standards Commission on May 23, 1995.

10-104. Exceptional designs.

**Note:** See Section 10-109 for approval of calculation methods and Alternative Component Packages

(a) **Requirements.** If a building permit applicant proposes to use a performance compliance approach, and the building designs cannot be adequately modeled by an approved calculation method, an applicant shall be granted a building permit if the Commission finds:

1. That the design cannot be adequately modeled with an approved calculation method;
2. Using an alternative evaluation technique, that the design complies with Part 6; and
3. That the enforcement agency has determined that the design complies with all other legal requirements.

(b) **Applications.** The applicant shall submit four copies of a signed application with the following materials to the Executive Director:

1. A copy of the plans and specifications required by Section 10-103 (a) 2 A;
2. A statement explaining why meeting the energy budget cannot be demonstrated using an approved calculation method;

3. Documentation from the enforcement agency stating that:
   A. Meeting the energy budget requirements cannot be demonstrated using an approved calculation method, and
   B. The design complies with all other legal requirements;

4. A detailed evaluation of the energy consumption of the proposed building and the building's materials, components, and manufactured devices proposed to be installed to meet the requirements of Part 6, using an alternative evaluation technique. The evaluation shall include a copy of the technique, instructions for its use, a list of all input data, and all other information required to replicate the results.

Authority: Sections 25402 and 25402.1, Public Resources Code.
Reference: Sections 25402 and 25402.1, Public Resources Code

HISTORY:
1. New section filed 12-27-84; designated effective 1-1-85 pursuant to Government Code Section 11346.2 (d) (Register 84, No. 52)
2. (CEC 1/92) Regular order by the California Energy Commission to amend Section 10-104, Part 1, Title 24, California Code of Regulations. Filed with the secretary of state June 12, 1992; publication date July 15, 1992; effective 30 days thereafter. Approved as a regular order by the California Building Standards Commission on June 8, 1992.

10-105. Enforcement by the commission.

(a) Where there is no local enforcement agency. Before new construction may begin in an area where there is no local enforcement agency, and on any proposed governmental agency building for which there is no enforcement agency the Executive Director must determine in writing that the building design conforms to the requirements of Part 6. The person proposing to construct the building shall submit the information described in Sections 10-103 (a) 2 and 10-103 (a) 3 to the Executive Director when such a determination is sought.

(b) Where the local enforcement agency fails to enforce. If a local enforcement agency fails to enforce the requirements of this article or of Part 6, the Commission, after furnishing 10 days written notice, may condition building permit issuance on submission of the information described in Sections 10-103 (a) 2 and 10-103 (a) 3 to the Executive Director and on his or her written determination that proposed construction conforms to the requirements of Part 6.

Authority: Code Section 25402.1, Public Resources Code
Reference: Section 25402.1, Public Resources Code

HISTORY:
1. Amendment filed 12-27-84; designated effective 1-1-85 pursuant to Government Code Section 11346.2 (d) (Register 84, No. 52)
2. (CEC 1/92) Regular order by the California Energy Commission to amend Section 10-106, Part 1, Title 24, California Code of Regulations. Filed with the secretary of state June 12, 1992; publication date July 15, 1992; effective 30 days thereafter. Approved as a regular order by the California Building Standards Commission on June 8, 1992.

10-106. Locally adopted energy standards.

(a) Requirements. Local governmental agencies may adopt and enforce energy standards for newly constructed buildings, additions, alterations, and repairs provided the Commission finds that the standards will require buildings to be designed to consume no more energy than permitted by Part 6. Such local standards include but are not limited to adopting the requirements of Part 6 before their effective date, requiring additional energy conservation measures, or setting more stringent energy budgets. Local adoption of the requirements of Part 6 before their effective date is sufficient showing that the local standards meet the requirements of this section and Section 25402.1 (f) (2) of the Public Resources Code; in such a case only the documentation listed in Section 10-106 (b) and a statement that the standards are those in Part 6, need be submitted.

(b) Documentation application. Local governmental agencies wishing to enforce locally adopted energy conservation standards shall submit four copies of an application with the following materials to the Executive Director:

1. The proposed local energy standards
2. A study with supporting analysis showing how the local agency determined energy savings
3. A statement that the local standards will require buildings to be designed to consume no more energy than permitted by Part 6
4. The basis of the agency's determination that the standards are cost effective.

Authority: Section 25402.1, Public Resources Code
Reference: Section 25402.1, Public Resources Code

HISTORY:
1. Amendment filed 12-27-84; designated effective 1-1-85 pursuant to Government Code Section 11346.2 (d) (Register 84, No. 52)
2. (CEC 1/92) Regular order by the California Energy Commission to amend Section 10-107, Part 1, Title 24, California Code of Regulations. Filed with the secretary of state June 12, 1992; publication date July 15, 1992; effective 30 days thereafter. Approved as a regular order by the California Building Standards Commission on June 8, 1992.

10-107. Interpretations.

(a) The Commission may make a written determination as to the applicability or interpretation of any provision of this article or of Part 6, upon written application, if a dispute concerning a provision arises between an applicant for a building permit and the enforcement agency, and the dispute has been heard by the local board of permit appeals or other highest local review body. Notice of any such appeal, including a summary of the dispute and the section of the regulations involved, shall be sent to the Commission by the enforcing agency 15 days before the appeal is heard, and the result of the appeal shall be sent to the Commission within 15 days after the decision is made. Either party to the dispute may apply for a determination but shall concurrently deliver a copy of the application to the other party. The determinations are binding on the parties.

(b) The Executive Director may, upon request, give written advice concerning the meaning of any provision of this article or of Part 6. Such advice is not binding on any person.

Authority: Section 25402.1, Public Resources Code
Reference: Section 25402.1, Public Resources Code

HISTORY:
1. Amendment filed 12-27-84; designated effective 1-1-85 pursuant to Government Code Section 11346.2 (d) (Register 84, No. 52)
2. (CEC 1/92) Regular order by the California Energy Commission to amend Section 10-107, Part 1, Title 24, California Code of Regulations.
10-108. Exemption.

(a) Requirements. The Commission may exempt any building from any provision of Part 6 if it finds that:

1. Substantial funds had been expended in good faith on planning, designing, architecture or engineering of the building before the adoption date of the provision.
2. Compliance with the requirements of the provision would be impossible without both substantial delays and substantial increases in costs of construction above the reasonable costs of the measures required to comply with the provision.

(b) Application. The applicant shall submit four copies of a signed application with the following materials to the Executive Director:

1. A summary of the claimant's contracts for the project;
2. A summary of internal financial reports on the project;
3. Dated schedules of design activities; and
4. A progress report on project completion.

Authority: Section 25402 1, Public Resources Code
Reference: Section 25402 1, Public Resources Code

HISTORY:
1. Amendment filed 8-11-83; effective thirtieth day thereafter (Register 83, No. 33)
2. Amendment filed 12-27-84; designated effective 1-1-85 pursuant to Government Code Section 11346.2 (d) (Register 84, No. 52)
3. (CEC 1992) Regular order by the California Energy Commission to amend Section 10-108, Part 1, Title 24, California Code of Regulations. Filed with the secretary of state June 12, 1992; publication date July 15, 1992; effective 30 days thereafter. Approved as a regular order by the California Building Standards Commission on June 8, 1992.

10-109. Calculation methods and alternative component packages.

Note: See Section 10-104 for approval of exceptional designs

(a) Public domain computer programs. In addition to the present approved public domain computer programs, the Commission may, upon written application or its own motion, approve additional public domain computer programs that may be used to demonstrate that proposed building designs meet energy budgets.

1. The Commission shall ensure that users' manuals or guides for each approved program are available.
2. The Commission shall approve a program only if, when it models building designs or features, it predicts energy consumption substantially equivalent to that predicted by the public domain computer program.

(b) Alternative calculation methods (all occupancies). In addition to public domain computer programs, the Commission may approve alternative calculation methods (ACMs) that applicants for building permits may then use to demonstrate compliance with the performance standards (energy budgets) in Part 6.

1. General requirements. To obtain approval for an ACM, the proponent shall submit an application that demonstrates that the ACM:

A. Makes no changes in any input parameter values specified by the Commission in Item 2 below.
B. Provides input and output documentation that facilitates the enforcement agency's review and meets the formatting and content criteria found in the Residential or Nonresidential ACM manual.
C. Is supported by clear and concise instructions for using the method to demonstrate that the energy budget requirements of Part 6 are met; and
D. Is reliable and accurate relative to the appropriate public domain computer program.

2. Procedural requirements for alternative calculation methods. In order to obtain approval of an ACM, the applicant must comply with the requirements, specifications, and criteria set forth in the Residential or Nonresidential ACM manual. The ACM manuals specify application requirements, minimum modeling capabilities, required output forms and instructions, input assumptions, testing requirements, test approval criteria, vendor requirements and other related requirements. The requirements, specifications, and criteria in the 2005 Residential or Nonresidential ACM manuals are hereby incorporated by reference.

Note: Copies of the ACM manuals may be obtained from the Energy Commission's website at www.energy.ca.gov.

3. Application. The applicant shall submit four copies of a signed application form specified by the Executive Director. The application shall include the following materials:

A. The method's analytical capabilities and limitations with respect to the occupancies, designs, materials and devices covered by Part 6;
B. A demonstration that the criteria in Section 10-109 (b) are met;
C. Each of the items on the "Application Checklist" in the Residential or Nonresidential ACM manual; and
D. An initial fee of one thousand dollars ($1,000). The total fee shall cover the Commission's cost of reviewing and analyzing the proposed method. After the Commission determines the total costs, if the costs exceed the initial fee, the Commission shall assess additional fees to cover those costs; if the costs are less than the initial fee, the Commission shall refund the difference to the applicant.

4. Exceptional methods. If the alternative calculation method analyzes designs, materials or devices that cannot be adequately modeled using the public domain computer program, the method may be approved as an exceptional method. Applications for approval of exceptional methods shall include theoretical and empirical information that verify the method's accuracy, and shall also include the other documentation and fees required by Section 10-109 (b).

5. Approval. The Commission may approve a method unconditionally, may restrict approval to specified
occupancies, designs, materials or devices, or may reject the application.

6 Resubmittal. An applicant may resubmit a rejected method or may request modification of a restricted approval. Such application shall include the information specified in Section 10-109 (b) and shall indicate how the method has been changed to enhance its accuracy or capabilities.

7 Modification. Whenever an approved calculation method is changed in any way, the method shall be resubmitted under this section for reappraisal. The Executive Director may waive any of the requirements of this paragraph for nonsubstantive changes.

(c) The Commission may modify or withdraw certification of a program or method under Section 10-109 (a) or 10-109 (b) based on approval of other programs or methods that are more suitable.

(d) Alternative component packages. The Commission may approve any alternative component package, in addition to the packages in Sections 143 (a) and 151 (f) of Part 6, which it determines will meet the energy budgets and is likely to apply to a significant percentage of newly constructed buildings or to a significant segment of the building construction and design community. Applications for approval of packages shall use application forms specified by the Executive Director and shall be subject to the same fee requirements set forth in subsection (b).

(e) Publication of commission determinations. The Executive Director shall annually publish a manual, newsletter or other administrative guide containing determinations made by the Commission pursuant to this section on or before December 31 of the calendar year.

Authority: Section 25402 1, Public Resources Code
Reference: Section 25402 1, Public Resources Code

HISTORY:
1 New section filed 12-9-81; designated effective 1-15-82 (Register 81, No 50)
2 Amendment filed 8-11-83; effective thirtieth day thereafter (Register 83, No 33)
3 Amendment filed 12-27-84; designated effective 1-1-85 pursuant to Government Code Section 11346.2 (d) (Register 84, No 52)
4 Amendment of subsections (b), (d) and (e) filed 12-4-86; effective thirtieth day thereafter (Register 87, No 1)
5 Change without regulatory effect of subsection (d) filed 4-5-88; operative 5-5-88 (Register 88, No 17)
6 Amendment of subsections (b) and (d) filed 1-20-89; operative 2-19-89 (Register 89, No 4)
7 (CEC 1.92) Regular order by the California Energy Commission to amend Section 10-109, Part 1, Title 24, California Code of Regulations. Filed with the Secretary of State June 12, 1992; publication date July 15, 1992; effective 30 days thereafter. Approved as a regular order by the California Building Standards Commission on June 8, 1992.


(a) If the application is complete, the Executive Director shall make the application available to interested parties. Comments from interested parties must be submitted within 60 days after acceptance of the application.

(b) Within 75 days of receipt of an application, the Executive Director may request any additional information needed to evaluate the application. If the additional information is incomplete, consideration of the application will be delayed until the applicant submits complete information.

(c) Within 75 days of receipt of the application, the Executive Director may convene a workshop to gather additional information from the applicant and other interested parties. Interested parties will have 15 days after the workshop to submit additional information regarding the application.

(d) Within 90 days after the Executive Director receives the application, or within 30 days after receipt of complete additional information requested under Section 10-110 (b) or within 30 days after the receipt of additional information submitted by interested parties under Section 10-110 (c), whichever is later, the Executive Director shall submit to the Commission a written recommendation on the application.

(e) The application and the Executive Director's recommendation shall be placed on the consent calendar and considered at the next business meeting after submission of the recommendation. The matter may be removed from the consent calendar at the request of any person.

(f) The Executive Director may charge a fee to recover the costs of processing and reviewing applications.

(g) All applicants have the burden of proof to establish that their applications should be granted.

Authority: Section 25402 1, Public Resources Code
Reference: Section 25402 1, Public Resources Code

HISTORY:
1 New section filed 12-9-81; designated effective 1-15-82 (Register 81, No 50)
2 Amendment filed 12-27-84; designated effective 1-1-85 pursuant to Government Code Section 11346.2 (d) (Register 84, No 52)
3 Amendment filed 12-4-86; effective thirtieth day thereafter (Register 87, No 1)

10-111. Certification and labeling of fenestration product U-factors, solar heat gain coefficients and air leakage. This section establishes rules for implementing labeling and certification requirements relating to U-factors, solar heat gain coefficients (SHGCs) and air leakage for fenestration products under Section 116 (a) of Title 24, California Code of Regulations, Part 6. This section also provides for designation of the National Fenestration Rating Council (NFRC) as the supervisory entity responsible for administering the state's certification program for fenestration products, provided NFRC meets specified criteria.

(a) Labeling requirements.

1 Temporary labels. Every manufactured and site-built fenestration product or fenestration system installed in construction subject to Title 24, Part 6 shall have attached to it a clearly visible temporary label or have an associated label certificate that lists the U-factor, the solar heat gain coefficient (SHGC) of that product and the method used to derive those values, and certifies compliance with air leakage requirements of Section 116 (a) 1.

A Fenestration products rated and certified using NFRC 100, NFRC 200 or NFRC 400 Rating Procedures. The manufacturer shall stipulate that the ratings were determined in accordance with applicable NFRC procedures. For manufactured fenestration
products, a temporary label approved by the supervisory entity meets the requirements of this section. For site-built fenestration products, a label certificate approved by the supervisory entity meets the requirements of this section.

B. Fenestration products rated using a default value approved by the Commission For manufactured fenestration products, a temporary label with the words “CEC Default U-factor,” followed by the appropriate default U-factor specified in Section 116 (a) 2 and with the words “CEC Default SHGC,” followed by the appropriate default SHGC specified in Section 116 (a) 3 meets the requirements of this section. For site-built fenestration products, a default label certificate approved by the Commission meets the requirements of this section.

C. The temporary label shall also certify that the product complies with the air leakage requirements of Section 116 (a) 1 of the standards.

2 Permanent labels. If a product is rated using the NFRC Rating Procedure, it shall have a permanent label that is either a stand-alone label, an extension or tab of an existing permanent certification label being used by the manufacturer/responsible party, or series of marks on the product The permanent label, coupled with observable product characteristics, can be used to trace the product to certification information on file with the supervisory entity or to a directory of certified products, published by the supervisory entity. For site-built fenestration products, a label certificate approved by the supervisory entity meets the requirements of this section.

Exception to Section 10-111 (a): Field-fabricated fenestration products

(b) Certification requirements.

1 Certification to default ratings. If a product’s U-factor and SHGC are default values approved by the Commission as specified in Sections 116 (a) 2 and 116 (a) 3, the U-factor and SHGC shall be certified by the manufacturer.

A. A temporary label, affixed to the product, that meets the requirements of Section 10-111 (a) 1 B meets this requirement.

B. If the product claims the default U-factor for a thermal break product, the manufacturer shall also certify on the label that the product meets the thermal-break product criteria, specified on the default table, on which the default value is based. Placing the terms “Meets Thermal Break Default Criteria” on the default temporary label or default label certificate meets this requirement.

2 Certification to NFRC Rating Procedure. If a product’s U-factor or SHGC is based on the NFRC Rating Procedure, the U-factor or SHGC shall be certified by the manufacturer according to the procedures of an independent certifying organization approved by the Commission.

A. A temporary label, affixed to the product or label certificate for site-built fenestration, meeting the requirements of Section 10-111 (a) certified by the independent certifying organization complies with this requirement.

B. An “independent certifying organization approved by the Commission” means any organization authorized by the supervisory entity to certify U-factor ratings and solar heat gain coefficient ratings in accordance with the NFRC Rating Procedure. If the Commission designates the NFRC as the supervisory entity, any independent certification and inspection agency (IA) licensed by NFRC shall be deemed to be an “independent certifying organization approved by the Commission.”

C. The “supervisory entity” means the National Fenestration Rating Council (NFRC), except as provided in paragraph (c) 1.

Exception to Section 10-111 (b): Field-fabricated fenestration products.

(c) Designation of supervisory entity. The National Fenestration Rating Council shall be the supervisory entity to administer the certification program relating to U-factors and solar heat gain coefficient ratings for fenestration products, provided the Commission determines that the NFRC meets the criteria in paragraph (d).

1. The Commission may consider designating a supervisory entity other than NFRC only if the Commission determines that the NFRC cannot meet the criteria in paragraph (d). Such other supervisory entity shall meet the criteria in paragraph (d) prior to being designated.

2. The Commission shall periodically review, at least annually, the structure and operations of the supervisory entity to ensure continuing compliance with the criteria in paragraph (d).

(d) Criteria for supervisory entity.

1. Membership in the entity shall be open on a nondiscriminatory basis to any person or organization that has an interest in uniform thermal performance ratings for fenestration products, including, but not limited to, members of the fenestration industry, glazing industry, building industry, design professionals, specifications, utilities, government agencies and public interest organizations. The membership shall be composed of a broad cross section of those interested in uniform thermal performance ratings for fenestration products.

2. The governing body of the entity shall reflect a reasonable cross section of the interests represented by the membership.

3. The entity shall maintain a program of oversight of product manufacturers, laboratories, and independent certifying organizations that ensures uniform application of the NFRC Rating Procedures, labeling and certification, and such other rating procedures for other factors affecting energy performance as the NFRC and the Commission may adopt.
4. The entity shall require manufacturers and independent certifying organizations within its program to use only laboratories accredited by the supervisory entity to perform simulations and tests under the NFRC Rating Procedure.

5. The entity shall maintain appropriate guidelines for testing and simulation laboratories, manufacturers and certifying agencies, including requirements for adequate:
   A. Possession and calibration of equipment;
   B. Education, competence and training of personnel;
   C. Quality control;
   D. Record keeping and reporting;
   E. Periodic review (including, but not limited to, blind testing by laboratories; inspections of products; and inspections of laboratories, manufacturing facilities and certifying agencies);
   F. Challenges to certified ratings; and
   G. Guidelines to maintain the integrity of the program, including, but not limited to, provisions to avoid conflicts of interest within the rating and certification process.

6. The entity shall be a nonprofit organization and shall maintain reasonable, nondiscriminatory fee schedules for the services it provides and shall make its fee schedules, the financial information on which fees are based, and financial statements available to its members for inspection.

7. The entity shall provide hearing processes that give laboratories, manufacturers and certifying agencies a fair review of decisions that adversely affect them.

8. The entity shall maintain a certification policy committee whose procedures are designed to avoid conflicts of interest in deciding appeals, resolving disputes and setting policy for the certifying organizations within its program.

9. The entity shall publish at least annually a directory of products certified and decertified within its program.

10. The entity itself shall be free from conflict-of-interest ties or to undue influence from any particular fenestration manufacturing interest(s), testing or simulation lab(s), or independent certifying organization(s).

11. The entity shall provide or authorize the use of labels and label certificates for site-built fenestration products that can be used to meet the requirements of Section 4.2 and, and this section.

12. The entity’s certification program shall allow for multiple participants in each aspect of the program to provide for competition between manufacturers, between testing labs, between simulation labs, and between independent certifying organizations.

(e) Certification for other factors. Nothing in this section shall preclude any entity, whether associated with a U-factor and SHGC certification program or not, from providing certification services relating to factors other than U-factors and SHGC for fenestration products.

Authority: Section 25402, Public Resources Code
Reference: Section 25402, Public Resources Code

HISTORY:

1. (CEC/2/92) Regular order by the California Energy Commission to adopt Section 10-111, Part 1, Title 24, California Code of Regulations. Filed with the secretary of state August 10, 1993; effective 30 days thereafter (September 9, 1993). Approved as a regular order by the California Building Standards Commission on August 2, 1993.

2. (CEC 2/94) Regular order by the California Energy Commission to amend Section 10-111(a) 1, Part 1, Title 24, California Code of Regulations. Filed with the secretary of state August 24, 1993; effective 30 days thereafter. Approved as a regular order by the California Building Standards Commission on August 2, 1995.


(a) The Commission shall maintain tables of default U-factors and SHGCs for use as an alternative to U-factors and SHGCs derived using the NFRC Rating Procedure. The default values shall meet the following criteria:

1. The values shall be derived from simulations of products using the same computer simulation program(s) used in the NFRC Rating Procedure.

2. The default values shall be set so that they do not provide to any significant number of products a lower U-factor or SHGC than those products would obtain if they were rated using the full NFRC Rating Procedure, including testing and simulation.

(b) The Commission shall periodically review and revise the default tables as necessary to ensure that the criteria are met.

Authority: Section 25402, Public Resources Code
Reference: Section 25402, Public Resources Code

HISTORY:

1. (CEC/2/92) Regular order by the California Energy Commission to adopt Section 10-112, Part 1, Title 24, California Code of Regulations. Filed with the secretary of state August 10, 1993; effective 30 days thereafter (September 9, 1993) Approved as a regular order by the California Building Standards Commission on August 2, 1993.

10-113 Certification and labeling of roofing product reflectance and emittance. This section establishes rules for implementing labeling and certification requirements relating to reflectance and emittance for roofing products for showing compliance with Sections 141, 142 and 151(b) of Title 24, California Code of Regulations, Part 6. This section also provides for designation of the Cool Roof Rating Council (CRRC) as the supervisory entity responsible for administering the state's certification program for roofing products, provided CRRC meets specified criteria.

(a) Labeling requirements. Every roofing product installed in construction to take compliance credit for reflectance and emittance under Sections 141, 142 and 151(b) shall have a clearly visible packaging label that lists the reflectance and emittance tested in accordance with CRRC-1.

Packaging for liquid-applied roof coatings shall state the product meets the requirements specified in Section 118(1)3.

(b) Certification requirements. Every roofing product installed in construction to take compliance credit for reflectance and emittance under Sections 141, 142 and 151(b) shall be certified by CRRC or another supervisory entity approved by the Commission pursuant to Section 10-113(c).

(c) Designation of supervisory entity. The Cool Roof Rating Council shall be the supervisory entity to administer the
certification program relating to reflectance and emittance ratings for roofing products, provided the Commission determines that the CRRC meets the criteria in paragraph (d).

1. The Commission may consider designating a supervisory entity other than CRRC only if the Commission determines that the CRRC cannot meet the criteria in paragraph (d). Such other supervisory entity shall meet the criteria in paragraph (d) prior to being designated.

2. The Commission shall periodically review, at least annually, the structure and operations of the supervisory entity to ensure continuing compliance with the criteria in paragraph (d).

(d) Criteria for supervisory entity.

1. Membership in the entity shall be open on a nondiscriminatory basis to any person or organization that has an interest in uniform performance ratings for roofing products, including, but not limited to, members of the roofing industry, building industry, design professionals, specifiers, utilities, government agencies and public interest organizations. The membership shall be composed of a broad cross section of those interested in uniform thermal performance ratings for roofing products.

2. The governing body of the entity shall reflect a reasonable cross section of the interests represented by the membership.

3. The entity shall maintain a program of oversight of product manufacturers, laboratories and independent certifying organizations that ensures uniform application of the CRRC testing and rating procedures, labeling and certification, and such other rating procedures for other factors affecting energy performance as the CRRC and the Commission may adopt.

4. The entity shall require manufacturers and independent certifying organizations within its program to use only laboratories accredited by the supervisory entity to perform tests under the CRRC rating procedure.

5. The entity shall maintain appropriate guidelines for testing laboratories and manufacturers, including requirements for adequate:
   A. Possession and calibration of equipment;
   B. Education, competence, and training of personnel;
   C. Quality control;
   D. Record keeping and reporting;
   E. Periodic review (including, but not limited to, blind testing by laboratories; inspections of products; and inspections of laboratories, and manufacturing facilities);
   F. Challenges to certified ratings; and
   G. Guidelines to maintain the integrity of the program, including, but not limited to, provisions to avoid conflicts of interest within the rating and certification process.

6. The entity shall be a nonprofit organization and shall maintain reasonable, nondiscriminatory fee schedules for the services it provides, and shall make its fee schedules, the financial information on which fees are based, and financial statements available to its members for inspection.

7. The entity shall provide hearing processes that give laboratories, manufacturers and certifying agencies a fair review of decisions that adversely affect them.

8. The entity shall maintain a certification policy committee whose procedures are designed to avoid conflicts of interest in deciding appeals, resolving disputes and setting policy for the certifying organizations in its program.

9. The entity shall publish at least annually a directory of products certified and decertified within its program.

10. The entity itself shall be free from conflict-of-interest ties or undue influence from any particular roofing product manufacturing interest(s), testing or independent certifying organization(s).

11. The entity shall provide or authorize the use of labels that can be used to meet the requirements for showing compliance with the requirements of Sections 141, 142 and 151 (b), and this section.

12. The entity's certification program shall allow for multiple participants in each aspect of the program to provide for competition between manufacturers and between testing labs.

Authority: Section 25402 1, Public Resources Code
Reference: Section 25402 1, Public Resources Code

10-114. Determination of outdoor lighting zones and administrative rules for use. This section establishes rules for implementing outdoor lighting zones to show compliance with Section 147 of Title 24, California Code of Regulations, Part 6.

(a) Lighting zones. Exterior lighting allowances in California vary by Lighting Zones (LZ).

(b) Lighting zone characteristics. Table 10-114-A specifies the relative ambient illumination level and the statewide default location for each lighting zone.

(c) Amending the lighting zone designation. A local jurisdiction may officially adopt changes to the lighting zone designation of an area by following a public process that allows for formal public notification, review and comment about the proposed change. The local jurisdiction may determine areas where Lighting Zone 4 is applicable and may increase or decrease the lighting zones for areas that are in State Default Lighting Zones 1, 2 and 3, as specified in Table 10-114-A.

(d) Commission notification. Local jurisdictions who adopt changes to the State Default Lighting Zones shall notify the Commission by providing the following materials to the executive director:

1. A detailed specification of the boundaries of the adopted Lighting Zones, consisting of the county name, the city name if any, the zip code(s) of the redesignated areas, and a description of the physical boundaries within each zip code.

2. A description of the public process that was conducted in adopting the Lighting Zone changes.
3 An explanation of how the adopted Lighting Zone changes are consistent with the specifications of Section 10-114.

The commission shall have the authority to not allow Lighting Zone changes which the Commission finds to be inconsistent with the specifications of Section 10-114.

### TABLE 10-114-A

**LIGHTING ZONE CHARACTERISTICS AND RULES FOR AMENDMENTS BY LOCAL JURISDICTIONS**

<table>
<thead>
<tr>
<th>ZONE</th>
<th>AMBIENT ILLUMINATION</th>
<th>STATEWIDE DEFAULT LOCATION</th>
<th>MOVING UP TO HIGHER ZONES</th>
<th>MOVING DOWN TO LOWER ZONES</th>
</tr>
</thead>
<tbody>
<tr>
<td>LZ1</td>
<td>Dark</td>
<td>Government designated parks, recreation areas and wildlife preserves. Those that are wholly contained within a higher lighting zone may be considered by the local government as part of that lighting zone.</td>
<td>A government designated park, recreation area, wildlife preserve or portions thereof, can be designated as LZ2 or LZ3 if they are contained within such a zone.</td>
<td>Not applicable</td>
</tr>
<tr>
<td>LZ2</td>
<td>Low</td>
<td>Rural areas, as defined by the 2000 U.S. Census</td>
<td>Special districts within a default LZ2 zone may be designated as LZ3 or LZ4 by a local jurisdiction. Examples include special commercial districts or areas with special security considerations located within a rural area</td>
<td>Special districts and government designated parks within a default LZ2 zone may be designated as LZ1 by the local jurisdiction for lower illumination standards, without any size limits</td>
</tr>
<tr>
<td>LZ3</td>
<td>Medium</td>
<td>Urban areas, as defined by the 2000 U.S. Census</td>
<td>Special districts within a default LZ3 may be designated as a LZ4 by local jurisdiction for high intensity nighttime use, such as entertainment or commercial districts or areas with special security considerations requiring very high light levels.</td>
<td>Special districts and government designated parks within a default LZ3 zone may be designated as LZ1 or LZ2 by the local jurisdiction, without any size limits</td>
</tr>
<tr>
<td>LZ4</td>
<td>High</td>
<td>None.</td>
<td>Not applicable.</td>
<td>Not applicable.</td>
</tr>
</tbody>
</table>
HISTORY NOTE APPENDIX FOR CHAPTER 10

Administrative Regulations for the California Energy Commission
(Title 24, Part 1, California Code of Regulations)

The format of the history notes has been changed to be consistent with the other parts of the California Building Standards Code. The history notes for prior changes remain within the text of this code


2. (CEC-EF 1/01) Emergency adoption of AB 970 energy efficiency standards for residential and nonresidential buildings; CCR, Title 24, Parts 1 and 6. Approved by the California Building Standards Commission on January 31, 2001, and filed with the secretary of state on February 2, 2001, effective June 1, 2001.

Exception: Building energy efficiency standards compliance documentation submitted prior to June 1, 2001, using the Multiple Orientation Alternative to Section 151 (c) shall be used to determine compliance through December 31, 2001.


4. (CEC 01/03) 2005 building energy efficiency standards approved by the California Building Standards Commission on July 21, 2004, for publication in California Code of Regulations, Title 24, Parts 1 and 6; filed with the Secretary of State September 24, 2004; published April 1, 2005; effective October 1, 2005.
(4) **Single- and/or double-occupancy cells.** In any local detention system, the number of single- and/or double-occupancy cells shall be that number determined by the facility/system administrator in conjunction with the Board of Corrections, necessary to safely manage the population of the facility/system based on a comprehensive needs assessment which accounts for those inmates projected to be:

a. administrative segregation cases,
b. persons with disabilities,
c. custodial problems, and/or
d. likely to need individual housing for other specific reasons as determined by the facility/system administration

The total number of single- and/or double-occupancy cells shall not be less than 10 percent of the system's Board of Corrections rated capacity. The local detention facility/system shall comply with all other design requirements contained in these regulations.

(5) **Staff and inmate safety.** Facilities shall be designed and/or equipped in such a manner that staff and inmates have the ability to summon immediate assistance in the event of an incident or an emergency.

(6) **Heating and cooling.** Provision shall be made to maintain a comfortable living environment in accordance with the heating, ventilating, and air conditioning requirements of Parts 2 and 4, and the energy conservation requirements of Part 6, Title 24, California Code of Regulations

(7) **Acoustics.** Housing areas shall be designed and constructed so that the average noise level does not exceed 70 decibels during periods of activity and 45 decibels during sleeping hours.

(8) **Living areas.** Living areas shall be separated from the area for reception and booking.

(9) **Spaces for persons with disabilities.**

a. Housing cell or room. A cell or room for an inmate with a disability using a wheelchair must have an appropriate entry and toilet, washbasin and drinking fountain which the inmate can use without personal assistance.

b. Other spaces within the security perimeter such as day rooms and activity areas shall be located such that persons with disabilities will not be excluded from participating in any program for which he or she otherwise be eligible. Accessible showers for inmates with disabilities shall be available.

c. Spaces outside the security perimeter. Public areas of a local detention facility shall comply with the applicable chapters of Title 24, Part 2 of the California Code of Regulations

(10) **Security.** The design should facilitate security and supervision appropriate to the level of inmate custody.

(11) **Glazing.** Internal and external facility glazing shall be appropriate to the security level of the detention area or room.

(12) **Hair care space.** Space and suitable equipment must be provided in all Type II or Type III facilities for men's haircutting and/or female hair-dressing.

(13) **Floor drains.** Floor drains shall be provided where operationally and mechanically appropriate.

(14) **Medical/mental health care housing.** Medical/mental health care units shall be designed in consultation with the health authority. Medical/mental health areas may contain other than single occupancy rooms.

C The design of a Court Holding or Temporary Holding facility must include and comply with the following subsections of Section 13-102 (c) 6 B: (1), (2), (3), (5), (6), (7), (9), (10) and (13) Court holding facilities shall have separate paths of travel for inmates from those used by the public.

7. **Pilot projects.** The pilot project is the short-term method used by a local detention facility/system, approved by the Board of Corrections, to evaluate innovative programs, operations or concepts which meet or exceed the intent of these regulations.

The Board of Corrections may, upon application of a city, county, or city and county, grant pilot project status to a program, operational innovation or new concept related to the operation and management of a local detention facility. An application for a pilot project shall include, at a minimum, the following information:

A The regulations which the pilot project will affect

B Review of case law, including any lawsuits brought against the applicant's local detention facility, pertinent to the proposal.

C The applicant's history of compliance of noncompliance with standards.

D A summary of the “totality of conditions” in the facility or facilities, including but limited to:

1. Program activities, exercise and recreation;
2. Adequacy of supervision;
3. Types of inmates affected; and,
4. Inmate classification procedures

E A statement of the goals the pilot project is intended to achieve, the reasons a pilot project is necessary and why the particular approach was selected

F The projected costs of the pilot project and projected cost savings to the city, county, city and county, if any.

G A plan for developing and implementing the pilot project, including a time line where appropriate
H A statement of how the overall goal of providing safety to staff and inmates will be achieved

The Board of Corrections shall consider applications for pilot projects based on the relevance and appropriateness of the proposed project, the completeness of the information provided in the application and staff recommendations.

Within 10 working days of receipt of the application, Board staff will notify the applicant, in writing, that the application is complete and accepted for filing, or that the application is being returned as deficient and identifying what specific additional information is needed. This does not preclude the Board of Corrections members from requesting additional information necessary to make a determination that the pilot project proposed actually meets or exceeds the intent of the regulations at the time of the hearing. When complete, the application will be placed on the agenda for the Board’s consideration at a regularly scheduled meeting. The written notification from the Board to the applicant shall also include the date, time and location of the meeting at which the application will be considered. (The Board meeting schedule for the current calendar year is available through its office in Sacramento.)

When an application for a pilot project is approved by the Board of Corrections, the Board shall notify the applicant, in writing within 10 working days of the meeting, of any conditions included in the approval and the time period for the pilot project. Regular progress reports and evaluative data on the success of the pilot project in meeting its goals shall be provided to the Board. If disapproved, the applicant shall be notified in writing, within 10 working days of the meeting, the reasons for said disapproval. This application approval process may take up to 90 days from the date of receipt of a complete application.

Pilot project status granted by the Board of Corrections shall not exceed twelve months after its approval date. When deemed to be in the best interest of the applicant, the Board of Corrections may extend the expiration date for up to an additional twelve months. Once a city, county, or city and county successfully completes the pilot project evaluation period and desires to continue with the program, it may apply for an alternate means of compliance as described in Section 13-102(c)8 of these regulations.

8 Alternate means of compliance. The alternate means of compliance is the long-term method used by a local detention facility/system, approved by the Board, to encourage responsible innovation and creativity in the operation of California’s local detention facilities. The Board may, upon application of a city, county, or city and county, consider alternate means of compliance with these regulations after the pilot project process has been successfully evaluated (as defined in Section 13-102(c)7). The city, county, or city and county must present the completed application to the Board no later than 30 days prior to the expiration of its pilot project.

Applications for alternate means of compliance must meet the spirit and intent of improving jail management, shall be equal to or exceed the existing standard(s) and shall include reporting and evaluation components. An application for alternate means of compliance shall include, at a minimum, the following information:

A Review of case law, including any lawsuits brought against the applicant local detention facility, pertinent to the proposal.

B The applicant’s history of compliance or noncompliance with standards.

C. A summary of the “totality of conditions” in the facility or facilities, including but not limited to:

1. Program activities, exercise and recreation;
2. Adequacy of supervision;
3. Types of inmates affected; and
4. Inmate classification procedures.

D. A statement of the problem the alternate means of compliance is intended to solve, how the alternative will contribute to a solution of the problem and why it is considered an effective solution.

E. The projected costs of the alternative and projected cost savings to the city, county, city and county if any.

F. A plan for developing and implementing the alternate, including a time line where appropriate.

G. A statement of how the overall goal of providing safety to staff and inmates was achieved during the pilot project evaluation phase [Section 13-102(c)7].

ARTICLE 2
MINIMUM STANDARDS FOR JUVENILE FACILITIES
13-201. Minimum standards for juvenile facilities.

(a) Definitions. The following definitions shall apply:

ADMINISTERING MEDICATION, as it relates to pharmaceutical management, means the act by which a single dose of medication is given to a patient by licensed health care staff. The single dose of medication may be taken either from stock (undispensed) or dispensed supplies.

ALTERNATE MEANS OF COMPLIANCE means a process for meeting or exceeding the intent of the standards in an innovative way as approved by the Board pursuant to an application.

APPEAL HEARING means an administrative procedure providing an appellant with an opportunity to present the facts of the appeal for the formal decision concerning matters raised pursuant to the purposes set forth in these regulations. Such hearing may be conducted using oral and/or written testimony as specified by the Executive Director of the Board.

APPELLANT means a county or city which files a request for an appeal hearing.

AUTHORIZED AND REPRESENTATIVE means an individual authorized by the appellant to act as its representative in any or all aspects of the hearing.
BOARD means the State Corrections Standards Authority, which acts by and through its executive director, deputy directors and field representatives.

CAMP means a juvenile camp, ranch, forestry camp or boot camp established in accordance with Section 851 of the Welfare and Institutions Code, to which minors are wards of the court on the grounds of fitting the description in Section 602 of the Welfare and Institutions Code may be committed.

CHILD SUPERVISION STAFF means juvenile facility employee, whose duty is primarily the supervision of minors. Administrative, supervisory, food services, janitorial or other auxiliary staff is not considered child supervision staff.

COMMITTED means placed in a jail or juvenile facility pursuant to a court order for a specific period of time, independent of, or in connection with, other sentencing alternatives.

CONTACT means communications, whether verbal or visual, or immediate physical presence.

CONTRABAND is any object, writing or substance, the possession of which would constitute a crime under the laws of the State of California, pose a danger within a juvenile facility or would interfere with the orderly day-to-day operation of a juvenile facility.

CONTROL ROOM is a continuously staffed secure area within the facility that contains staff responsible for safety, security, emergency response, communication, electronics and movement.

COURT HOLDING FACILITY FOR MINORS means a local detention facility constructed within a court building used for the confinement of minors or minors and adults for the purpose of a court appearance, for a period not to exceed 12 hours.

DELIVERING MEDICATION, as it relates to pharmaceutical management, means the act of providing one or more doses of a prescribed and dispensed medication to a patient.

DEPARTMENT means the Department of the Youth Authority.

DEVELOPMENTALLY DISABLED means those persons who have a disability which originates before an individual attains age 18, continues, or can be expected to continue indefinitely, and constitutes a substantial disability for that individual. This term includes mental retardation, cerebral palsy, epilepsy and autism, as well as disabling conditions found to be closely related to mental retardation or to require treatment similar to that required for mentally retarded individuals.

DIRECT VISUAL OBSERVATION means staff must personally see minor’s movement and/or skin. Audio/video monitoring may supplement but not substitute for direct visual observation.

DIRECT VISUAL SUPERVISION means staff constantly in the presence of the minor. Audio/video monitoring may supplement but not substitute for direct visual supervision.

DISPENSING, as it relates to pharmaceutical management, means the interpretation of the prescription order, the preparation, repackage and labeling of the drug based upon a prescription from a physician, dentist or other prescriber authorized by law.

DISPOSAL, as it relates to pharmaceutical management, means the destruction of medication or its return to the manufacturer or supplier.

EMERGENCY means a significant disruption of normal facility procedure, policy or operation caused by civil disorder, single incident of mass arrest of juveniles and natural disasters such as flood, fire or earthquake; and which requires immediate action to avert death or injury and to maintain security.

EXECUTIVE DIRECTOR means the Executive Director of the Board.

EXERCISE means an activity that requires physical exertion of the large muscle group.

FACILITY ADMINISTRATOR means Chief Probation Officer, Sheriff, Marshal, Chief of Police or other official charged by law with administration of the facility.

FACILITY MANAGER means director, superintendent, police or sheriff commander or other person in charge of the day-to-day operation of a facility holding minors.

FILING DATE means the date a request for an appeal hearing is received by the Executive Director or the Board.

504 PLAN means a written educational plan developed by a group of educators, administrators, parents and other relevant participants pursuant to Section 504 of the Federal Rehabilitation Act of 1973; Title 29 of the United States Code, Section 794; and Title 34 of the Code of Federal Regulations, Part 104, that addresses the needs of a disabled student, as defined under section 504.

FURLough means the conditional or temporary release of a minor from the facility.

HEALTH ADMINISTRATOR means that individual or agency that is designated with responsibility for health care policy pursuant to a written agreement, contract or job description. The health administrator may be a physician, an individual or a health agency. In those instances where medical and mental health services are provided by separate entities, decisions regarding mental health services shall be made in cooperation with the mental health director. When the administrator is other than a physician, final clinical judgment rests with a designated responsible physician.

HEALTH CARE means medical, mental health and dental services.

HEALTH CARE CLEARANCE means a nonconfidential statement which indicates to child supervision staff that there are no health contraindications to a minor being admitted to a facility and specifies any limitations to full program participation.

HEARING PANEL means a panel comprised of three members of the Board of Corrections who shall be selected by the Chairman at the time an appeal is filed. A fourth member may be designated as alternate. Members designated to the hearing panel shall not be employed by or citizens of the county or city submitting an appeal.

INDIVIDUAL EDUCATION PROGRAM (IEP) means a written statement determined in a meeting of the individualized
education program team pursuant to Education Code Section 56345.

**INMATE WORKER** means an adult in a jail or lockup assigned to perform designated tasks outside of his/her cell or dormitory, pursuant to the written policy of the facility, for a minimum of four hours each day on a five-day scheduled workweek.

**JAIL** means a Type II or III facility as defined in the “Minimum Standards for Local Detention Facilities.”

**JUVENILE FACILITY** means a juvenile hall, juvenile home, ranch or camp, forestry camp, regional youth education facility, boot camp or special-purpose juvenile hall.

**JUVENILE HALL** means a county facility designed for the reception and temporary care of minors detained in accordance with the provisions of this subchapter and the juvenile court law.

**LABELING**, as it relates to pharmaceutical management, means the act of preparing and affixing an appropriate label to a medication container.

**LAW ENFORCEMENT FACILITY** means a building that contains a Type I jail or Temporary Holding Facility. It does not include a Type II or III jail which has the purpose of detaining adults charged with criminal law violations while awaiting trial or sentenced adult criminal offenders.

**LEGEND DRUGS** are any drugs defined as “dangerous drugs” under Chapter 9, Division 2, Section 4211 of the California Business and Professions Code. These drugs bear the legend, “Caution Federal Law Prohibits Dispensing Without a Prescription.” The Food and Drug Administration (FDA) has determined, because of toxicity or other potentially harmful effects, that these drugs are not safe for use except under the supervision of a health care practitioner licensed by law to prescribe legend drugs.

**LICENSED HEALTH CARE PERSONNEL** means those individuals who are licensed by the state to perform specified functions within a defined scope of practice. This includes, but is not limited to, the following classifications of personnel: physician/psychiatrist, dentist, pharmacist, physician’s assistant, registered nurse/nurse practitioner/public health nurse, licensed vocational nurse and psychiatric technician.

**LIVING AREA** in a juvenile hall shall be a self-contained unit containing locked sleeping rooms, single and double occupancy sleeping rooms or dormitories, dayroom space, water closets, wash basins, drinking fountains and showers commensurate to the number of minors housed, not to exceed 30 minors. A living unit shall not be divided by any permanent or temporary barrier that hinders direct access, supervision or immediate intervention or other action if needed.

**LOCAL HEALTH OFFICER** means that licensed physician who is appointed by the Board of Supervisors pursuant to Health and Safety Code Section 101000 to carry out duly authorized orders and statutes related to public health within his/her jurisdiction.

**LOCKUP** means a locked room or secure enclosure under the control of a peace officer or custodial officer that is primarily for the temporary confinement of adults who have recently been arrested, sentenced prisoners who are inmate workers may reside in the facility to carry out appropriate work. Lockups are Type I or Temporary Holding Facilities as defined in the “Minimum Standards for Local Detention Facilities.”

**MAXIMUM CAPACITY** means the number of minors that can be housed at any one time in a juvenile hall, camp, ranch, home, forestry camp, regional youth education facility or boot camp in accordance with provisions in this subchapter.

**MENTAL HEALTH DIRECTOR** means that individual who is designated by contract, written agreement or job description to have administrative responsibility for the mental health program. The health administrator shall work in cooperation with the mental health director to develop and implement mental health policies and procedures.

**MINIMUM STANDARDS FOR LOCAL DETENTION FACILITIES** means those regulations within Title 15, Division 1, Subdivision 4, Section 1000 et seq. of the California Code of Regulations and Title 24, Part 1, Section 13-102, and Part 2, Section 470A of the California Code of Regulations, as adopted by the Board.

**MINOR** means a person under 18 years of age and includes those persons whose cases are under the jurisdiction of the adult criminal court.

**NEW GENERATION DESIGN** means a design concept for detention facilities in which housing cells, dormitories or sleeping rooms are positioned around the perimeter of a common day-room, forming a housing/living unit. Generally, the majority of services for each housing/living unit (such as dining, medical exam/sick call, programming, school, etc.) occur in specified locations within the unit.

**NONSECURE CUSTODY** means that a minor’s freedom of movement in a law enforcement facility is controlled by the staff of the facility; and

- a The minor is under constant direct visual observation by the staff;
- b The minor is not locked in a room or enclosure; and,
- c The minor is not physically secured to a cuffing rail or other stationary object.

**NOTICE OF DECISION** means a written statement by the Executive Director or the Board which contains the formal decision of the Executive Director or the Board and the reason for that decision.

**ON-SITE HEALTH CARE STAFF** means licensed, certified or registered health care personnel who provide regularly scheduled health care services at the facility pursuant to a contract, written agreement or job description. It does not extend to emergency medical personnel or other health care personnel who may be on site to respond to an emergency or an unusual situation.

**OVER-THE-COUNTER (OTC) DRUGS**, as it relates to pharmaceutical management, are medications which do not require a prescription (nonlegend).

**PILOT PROJECT** means an initial short-term method to test or apply an innovation or concept related to the operation, management or design of a juvenile facility, jail or lockup pursuant to an application to, and approval by, the Board.
PRIMARY RESPONSIBILITY is the ability of a child supervision staff member to independently supervise one or more minors.

PROCUREMENT, as it relates to pharmaceutical management, means the system for ordering and obtaining medications for facility stock.

PROPOSED DECISION means a written recommendation from the hearing panel/hearing officer to the full Board containing a summary of facts and a recommended decision on an appeal.

PROSTHESSES means artificial devices to replace missing body parts or to compensate for defective bodily function. Prostheses are distinguished from slings, crutches or other similar assistive devices.

PSYCHOTROPIC MEDICATION means those drugs whose purpose is to have an effect on the central nervous system to impact behavior or psychiatric symptoms. Psychotropic medications include, but are not limited to, antipsychotic, antidepressant, lithium carbonate and anxiolytic drugs, as well as anticonvulsants or any other medication when used to treat psychiatric conditions. Drugs used to reduce the toxic side effects of psychotropic medications are not included.

RECREATION means activities that occupy the attention and offer the opportunity for relaxation. Such activities may include ping-pong, TV, reading, board games and letter writing.

REGIONAL FACILITY means a facility serving two or more counties bound together by a memorandum of understanding or a joint powers agreement identifying the terms, conditions, rights, responsibilities and financial obligation of all parties.

REMODELING means to alter the facility structure by adding, deleting or moving any of the buildings components, thereby affecting any of the spaces described in Title 24, Section 1230.

REPACKAGING, as it relates to pharmaceutical management, means transferring medications from the original manufacturer’s container to another properly labeled container.

REQUEST FOR APPEAL HEARING means a clear written expression of dissatisfaction about a procedure or action taken, requesting a hearing on the matter, and filed with the Executive Director of the Board.

RESPONSIBLE PHYSICIAN means that physician who is appropriately licensed by the state and is designated by contract, written agreement or job description to have responsibility for policy development in medical, dental and mental health matters involving clinical judgments. The responsible physician may also be the health administrator.

SECURE DETENTION means that a minor being held in temporary custody in a law enforcement facility is locked in a room or enclosure and/or is physically secured to a cuffing rail or other stationary object.

SECURITY GLAZING means a glass/polycarbonate composite glazing material designed for use in detention facility doors and windows and intended to withstand measurable, complex loads from deliberate and sustained attacks in a detention environment.

SHALL is mandatory; “may” is permissive.

SPECIAL-PURPOSE JUVENILE HALL means a county facility used for the temporary confinement of a minor, not to exceed 96 hours, prior to transfer to a full service juvenile facility or release.

STATUS OFFENDER means a minor alleged or adjudged to be a person described in Section 601 of the Welfare and Institutions Code.

STORAGE, as it relates to pharmaceutical management, means the controlled physical environment used for the safekeeping and accounting of medications.

SUPERVISION IN A LAW ENFORCEMENT FACILITY means that a minor is being directly observed by the responsible individual in the facility to the extent that immediate intervention or other required action is possible.

SUPERVISORY STAFF means a staff person whose primary duties may include, but are not limited to, scheduling and evaluating subordinate staff, providing on-the-job training, making recommendations for promotion, hiring and discharge of subordinate staff, recommending disciplinary actions and overseeing subordinate staff work. Supervisory staff shall not be included in the minor to supervision staff ratio, although some of their duties could include the periodic supervision of minors.

TEMPORARY CUSTODY means that the minor is not at liberty to leave the law enforcement facility.

USE OF FORCE means an immediate means of overcoming resistance and to control the threat of imminent harm to self or others.

(b) Exclusions. Title 24 of the California Code of Regulations, Sections 13-201 and 1230, which pertain to planning and design of juvenile facilities, shall be applicable to facilities for which architectural drawings have been submitted to the State Board for review. These requirements shall not be applicable to facilities that were constructed in conformance with the standards of the Department of the Youth Authority or the Board in effect at the time of initial architectural planning. However, an existing juvenile facility built in accordance with construction standards in effect at the time of construction shall be considered as being in compliance with the provisions of this article unless the condition of the structure is determined by the facility administrator or other appropriate authority to be dangerous to life, health or welfare of minors. When any facility, designed and constructed under earlier standards, can comply with a more recently adopted requirement, the least restrictive regulation shall apply.

If, in the course of inspection of local juvenile facilities, the Board determines that a facility planned or built prior to these regulations does not meet the appropriate, applicable standards in effect at the time of initial architectural planning, the local governing body shall submit to the Board for their approval within one year of such inspection a plan for causing that facility to meet current standards. Such a plan shall include the specific building areas that need to be remodeled and/or constructed, a definite time period over which the proposed modifications are planned, and a cost estimate including a description of the method of financing.
(c) Initial planning for a local juvenile facility.

1 Letter of intent. A county, city, city and county or regional juvenile facility that intends to build or remodel any local juvenile facility shall file a letter of intent with the Board.

2 Needs assessment. Any county, city, city and county, or regional juvenile facility intending to construct a new juvenile facility, or expand the rated capacity of the current facility, shall complete a needs assessment. One copy of the needs assessment shall be submitted to the Board prior to submitting plans and specifications. There are two types of needs assessments:

A Comprehensive Needs Assessment. The Comprehensive Needs Assessment shall include:

(1) A description of the elements of the system;
(2) A description of the department's management philosophy/process;
(3) A description of the current minor population;
(4) A description of the classification system;
(5) A description of the program needs, including planned academic programs and special education programs, and an analysis of performance in using programs which can reduce secure facility requirements;
(6) An analysis of the corrections' system trends and characteristics which influence planning assumptions about future change, including: population projections, projections of minor population and program costs based on continuation of current policies, and projections of the impact of alternative policies or programs on minor population growth and program costs;
(7) A history of the system's compliance with standards, including the adequacy of staffing levels and the ability to provide visual supervision;
(8) A history of the adequacy of record keeping;
(9) The ability to provide confidential interviews and medical exams; and;
(10) A discussion of unresolved issues.

B Targeted Needs Assessment.

(1) For expansion of an existing facility, a targeted needs assessment may be submitted if a comprehensive needs assessment has been submitted and accepted by the Board within 5 years.

(2) The Targeted Needs Assessment shall include any update and/or changes to the previous Comprehensive Needs Assessment and provide information affirming its validity and accuracy.

3 Operational program statement. Unless the construction or remodeling is of a minor nature, not affecting the capacity or flow of the facility, an operational program statement shall be developed by the facility administrator and submitted to the Board for the purpose of providing the basis upon which architectural plans are drawn. The operational program statement must be submitted with the schematic architectural plans required by Section 13-201 (c) 5 of these regulations and must include a description of the following:

A Intended capacity of facility;
B Security and classification of minors to be housed;
C Movement within the facility and entry and exit from secure areas;
D Food preparation and serving;
E Staffing;
F Booking;
G Visiting and attorney interviews;
H Exercise;
I Programs;
J Medical services, including the management of communicable diseases;
K Cleaning and/or laundering;
L Segregation of minors;
M Court holding and movement;
N Mental health services;
O Facilities for administration and operations staff;
P Staff to staff communications system;
Q Management of disruptive minors;
R Management of minors with disabilities, with provisions for wheelchairs, gurney access and for evacuation during emergencies;
S Architectural treatment of space relative to preventing suicides by minors;
T Method of implementing California Penal Code Section 4030 relating to the holding of offenders requiring incarceration without the necessity of unjustified strip searches; and
U School programs.

4 Facilities in existing buildings. Wherever county, city, city and county, or regional juvenile facility intends to establish a juvenile facility in an existing building or buildings, notice shall be given to the Board whose staff shall complete a survey to determine capacity of such buildings and shall make recommendations for necessary modifications. The proposing local government shall secure the appropriate clearance from the health authority, building official, and State Fire Marshal.

5 Submittal of plans and specifications. All plans and specifications submitted to the Board in compliance with Penal Code Section 6029 shall be in duplicate at the schematic design stage, at the design development stage and when final working plans and specifications are developed. A copy of the plans will be forwarded by the Board to the State Fire Marshal for review. Board staff shall respond in writing indicating compliance or noncompliance with these regulations.
6 Design requirements.

A. The design of a local juvenile facility shall comply with provisions of California Code of Regulations, Title 24, Part 2, Section 1230.

B. The design of a juvenile facility shall address the following:

(1) Fire safety. The provisions of Title 19 as they relate to juvenile facilities shall be incorporated into the facility design.

(2) Suicide hazards. Architectural plans shall be reviewed by the Board for the purpose of reducing hazards posed by fixtures and equipment which could be used for an act of suicide by a minor. The facility design shall avoid any surfaces, edges, fixtures, or fittings that can provide an attachment for hanging or other opportunity for self-inflicted injury. The following features shall be incorporated in the design of sleeping rooms, bathrooms, and any other area where a juvenile may be left alone:

a. Plumbing shall not be exposed. Operation of control valves shall use flush buttons or similar. Drinking water spout, if any, shall be without curved projections;

b. Towel holders shall be ball-in-socket or indented clasp, not pull-down hooks or bars;

c. Supply and return grilles shall have openings no greater than \( \frac{3}{16} \) inch or have 16-mesh per square inch;

d. Beds, desk surfaces and shelves shall have no sharp edges and shall be configured to prevent attachment;

e. Light fixtures shall be tamper resistant;

f. Fixtures such as mirrors shall be mounted using tamper-resistant fasteners;

g. Fire sprinkler heads inside rooms shall be designed to prevent attachment; and

h. Telephone cords shall be of minimum length to facilitate use.

(3) Health and sanitation. Provisions of Subchapter 5, Title 15, California Code of Regulations, and of the California Uniform Retail Food Facilities Law as they relate to juvenile facilities shall be incorporated into the facility design.

(4) When adding new sleeping rooms to a juvenile hall, not less than 10% of them shall be single occupancy, unless the juvenile hall can demonstrate that its current number of single occupancy rooms will equal at least 10% of the new Board rated capacity. In addition, single or double occupancy rooms shall be that number, determined by the facility administrator, necessary to safely manage the population of the facility based on a comprehensive needs assessment which accounts for minors projected to be:

   a. Mentally disordered,

   b. Custodial problems, and/or

   c. Likely to need individual housing for other specific reasons as determined by the facility administration.

   The total number of single or double occupancy rooms shall be identified.

(5) Staff and safety. Facilities shall be designed and/or equipped in such a manner that staff and minors have the ability to summon immediate assistance in the event of an incident or an emergency.

(6) Heating and cooling. Provision shall be made to maintain comfortable living environment and meet the energy requirements of Part 2 (California Building Code), Part 4 (California Mechanical Code), and Part 6 (California Energy Code) of Title 24, California Code of Regulations.

(7) Acoustics. Dayroom areas shall be designed and constructed so that the noise level does not exceed 65 decibels and a reverberation time less than 1.5 seconds. Sleeping areas shall have a noise level no higher than 35 decibels and a reverberation time less than 1.5 seconds. The heating, ventilating and air conditioning noise level shall be no higher than 35 decibels in sleeping areas and classrooms.

(8) Spaces for the disabled.

a. Housing room. A room for a minor with a disability requiring a wheelchair must have an appropriate entry and a toilet, washbasin, and drinking fountain which the minor can utilize without personal assistance.

b. Other space within the security perimeter such as dayroom and activity areas shall be located such that a disabled minor will not be excluded from participating in any program for which they would otherwise be eligible. An accessible shower for disabled minors shall be available.

c. Spaces outside the security perimeter. Public areas of a local juvenile facility shall comply with the applicable chapters of Title 24, Part 2 of the California Code of Regulations.

(9) Security. Facility design shall provide security and supervision appropriate to the classification level of minors in custody.

a. The facility perimeter shall be controlled by appropriate means to ensure that minors remain within the perimeter and shall be designed to prevent access by the general public without proper authorization.

b. Security glazing shall be used where it defines the secure perimeter of buildings.
shall also be used at appropriate interior locations to ensure a secure and safe environment for minors and staff.

(10) Medical/mental health care housing and treatment space. There shall be some means to provide health care and housing and treatment of ill and/or infirm minors. When the operational program statement for a facility indicates that medical care housing is needed, such housing must provide lockable storage space for medical instruments and must be located within the security area of the facility accessible to both female and male minors, but not in the living area of the facility. Treatment spaces and the medical care housing unit shall be designed in consultation with the health authority. If negative pressure isolation rooms are being planned, they shall be designed to the community standard. Medical/mental health areas may contain other than single occupancy rooms.

7 Pilot project. A pilot project is the short-term method used by a local juvenile facility/system approved by the Board to evaluate innovative programs, operations or concepts which may not comply with the regulations but meet or exceed the intent of these regulations.

The Board may, upon application of a city, county, or city and county, grant pilot project status to a program, operational innovation or new concept related to the operation and management of a local juvenile facility. An application for a pilot project shall include, at a minimum, the following information:

(a) The regulations that the pilot project shall affect;
(b) Any lawsuits brought against the applicant local juvenile facility, pertinent to the proposal;
(c) A summary of the “totality of conditions” in the facility or facilities, including but not limited to
1. Program activities, exercise and recreation,
2. Adequacy of supervision,
3. Types of minors affected, and
4. Classification procedures
(d) A statement of the goals the pilot project is intended to achieve, the reasons a pilot project is necessary and why the particular approach was selected;
(e) The projected costs of the pilot project and projected cost savings to the city, county, or city and county, if any;
(f) A plan for developing and implementing the pilot project including a time line where appropriate; and
(g) A statement of how the overall goal of providing safety to staff and minors shall be achieved.

The Board may consider applications for pilot projects based on the relevance and appropriateness of the proposed project, the applicant’s history of compliance/noncompliance with regulations, the completeness of the information provided in the application and staff recommendations.

Within 10 working days of receipt of the application, Board staff shall notify the applicant, in writing, that the application is complete and accepted for filing, or that the application is being returned as deficient and identifying what specific additional information is needed. This does not preclude the Board of Corrections members from requesting additional information necessary to make a determination that the pilot project proposed actually meets or exceeds the intent of these regulations at the time of the hearing. When complete, the application shall be placed on the agenda for the Board’s consideration at a regularly scheduled meeting. The written notification from the Board to the applicant shall also include the date, time and location of the meeting at which the application shall be considered.

When an application for a pilot project is approved by the Board, the Board shall notify the applicant, in writing within 10 working days of the meeting, of any conditions included in the approval and the time period for the pilot project. Regular progress reports and evaluative data on the success of the pilot project in meeting its goals shall be provided to the Board. The Board may extend time limits for pilot projects for good and proper purpose.

If disapproved, the applicant shall be notified in writing within 10 working days of the meeting, the reasons for said disapproval. This application approval process may take up to 90 days from the date of receipt of a complete application.

Pilot project status granted by the Board shall not exceed 12 months after its approval date. When deemed to be in the best interest of the applicant, the Board may extend the expiration date. Once a city, county, or city and county successfully completes the pilot project evaluation period and desires to continue with the program, it may apply for an alternate means of compliance. The pilot project shall be granted an automatic extension of time to operate the project pending the Board consideration of an alternate means of compliance.

8. Alternate means of compliance. An alternate means of compliance is the long-term method used by a local juvenile facility/system approved by the Board of Corrections, to encourage responsible innovation and creativity in the operation of California’s local juvenile facilities. The Board may, upon application of a city, county, or city and county, consider alternate means of compliance with these regulations either after the pilot project process has been successfully evaluated or upon direct application to the Board. The city, county, or city and county shall present the completed application to the Board no later than 30 days prior to the expiration of its pilot project, if needed.

Applications for alternate means of compliance shall meet the spirit and intent of improving facility management, shall enhance, be equal to, or exceed the intent of existing standard(s), and shall include reporting and evaluative components. An application for alternate means of compliance shall include, at a minimum, the following information:

(a) Any lawsuits brought against the applicant local facility, pertinent to the proposal;
(b) A summary of the “totality of conditions” in the facility or facilities, including but not limited to:
1. Program activities, exercise and recreation;
2. Adequacy of supervision;
3. Types of minors affected; and
4. Classification procedures.

(c) A statement of the problem the alternate means of compliance is intended to solve, how the alternative shall contribute to a solution of the problem and why it is considered an effective solution;

(d) The projected costs of the alternative and projected cost savings to the city, county, or city and county, if any;

(e) A plan for developing and implementing the alternative, including a time line where appropriate; and

(f) A statement of how the overall goal of providing safety to staff and minors was or would be achieved during the pilot project evaluation phase.

(g) When remodeling, a statement which indicates that the alternate means of compliance will provide an enhanced compliance with current regulations, if full compliance cannot be achieved.

The Board may consider applications for alternate means of compliance based on the relevance and appropriateness of the proposed alternative, the applicant’s history of compliance/noncompliance with regulations, the completeness of the information provided in the application, the experiences of the jurisdiction during the pilot project, if applicable, and staff recommendations.

Within 10 working days of receipt of the application, Board staff shall notify the applicant, in writing, that the application is complete and accepted for filing, or that the application is being returned as deficient and identifying what specific additional information is needed. This does not preclude the Board members from requesting additional information necessary to make a determination that the alternate means of compliance proposed meets or exceeds the intent of these regulations at the time of the hearing. When complete, the application shall be placed on the agenda for the Board’s consideration at a regularly scheduled meeting. The written notification from the Board to the applicant shall also include the date, time and location of the meeting at which the application shall be considered.

When an application for an alternate means of compliance is approved by the Board, the Board shall notify the applicant, in writing, within 10 working days of the meeting, of any conditions included in the approval and the time period for which the alternate means of compliance shall be permitted. Regular progress reports and evaluative data as to the success of the alternate means of compliance shall be submitted by the applicant. If disapproved, the applicant shall be notified in writing, within 10 working days of the meeting, the reasons for said disapproval. This application approval process may take up to 90 days from the date of receipt of a complete application.

The Board may revise the minimum standards during the next biennial review based on data and information obtained during the alternate means of compliance process. If, however, the alternate means of compliance does not have universal application, a city, county, or city and county may continue to operate under this status as long as they meet the terms of this regulation.

HISTORY:
1. (BOC 1/96) Regular order by the Board of Corrections to add Article 2, to Part 1, Title 24, C.C.R. Filed with the secretary of state on February 19, 1997; effective March 21, 1997. Approved as a regular order by the California Building Standards Commission on February 6, 1997.
The format of the history notes has been changed to be consistent with the other parts of the California Building Standards Code. The history notes for prior changes remain within the text of this code.

1. (BOC 1/97) Regular order by the Board of Corrections to amend their administrative regulations pertaining to Local Detention Facilities. Filed with the secretary of state on March 25, 1998; effective April 24, 1998. Approved by the California Building Standards Commission on March 18, 1998.

2. January 2, 2003 Supplement approved by the California Building Standards Commission on January 31, 2001, filed with the Secretary of State on February 2, 2001, published January 1, 2003 and effective 180 days after publication—July 1, 2003:

   Section 13-102(a)5 — Revise “Executive Officer” to read “Executive Director.”

   Section 13-102(a)9 — Revise “Detoxification cell” to read “Sobering cell.”

   Section 13-102(a)24 — Revise “... as detoxification, safety, ...” to read “... as sobering, safety, ...”

   Following Section 13-102(a)18, insert a new Section 13-102(a)19. Renumber Sections 13-102(a)29 and 13-102(a)30 as Section 13-102(a)30 and 13-102(a)31 respectively.

   Following renumbered Section 13-102(a)31, insert a new Section 13-102(a)32. Renumber Sections 13-102(a)31 through 13-102(a)35 two numbers higher.

   Following renumbered Section 13-102(a)37, insert a new Section 13-102(a)38. Renumber Section 13-102(a)36 as 13-102(a)39.

   Following renumbered Section 13-102(a)39, insert a new Section 13-102(a)40. Renumber Sections 13-102(a)37 through 13-102(a)46 four numbers higher.

   (All of the following references for Section 13-102 et seq use the revised Section numbers.)

   Section 13-102(c)2 — At the end of the first paragraph delete the words “The needs assessment study shall include:” and items A through F. Insert new lead provision and items (a) through (k).

   Section 13-102(c)3.R — Revise “disabled inmates” to “persons with disabilities.”

   Section 13-102(c)3.T — Revise “Section 4465 5” to “Section 4030.”

   Section 13-102(c)3.V — Revise “Detoxification Cell(s)” to “Sobering cell(s).”

   Section 13-102(c)6.B.(2) — In the tenth line, revise “detoxification cells” to “sobering cells.”

   Section 13-102(c)6.B.(4)a — Revise “mentally disordered” to “persons with disabilities.”

   Section 13-102(c)6.B.(4)d — Delete the words “The needs assessment study shall include, but not be limited to, a description of:” and delete the items a through j immediately below.

   Section 13-102(c)6.B.(9) — Revise the title to “Spaces for persons with disabilities.”

   Section 13-102(c)6.B.(9)a — Revise the definition to read “A cell or room for an inmate with a disability using a wheelchair must have an appropriate entry and a toilet, washbasin and drinking fountain which the inmate can use without personal assistance.”

   Section 13-102(c)6.B.(9)b — Revise “... person(s) with disabilities ...”; and revise the last sentence to read “Accessible showers for inmates with disabilities shall be available.”

   Following Section 13-102(c)6.B.(10) insert a new Section 13-102(c)6.B.(11) and renumber the existing Section 13-102(c)6.B.(11) to Section 13-102(c)6.B.(12).

   Following the newly renumbered Section 13-102(c)6.B.(12), insert new Sections 13-102(c)6.B.(13) and 13-102(c)6.B.(14).

   Section 13-102(c)6.C — Revise the fourth line to read “... (6), (7), (9), (10), and (12). Court holding...”

   Section 13-201(a)2 — Revise the second line to read “... in an innovative way as approved by ...”

   Section 13-201(a)3 — Revise “... Executive Officer ...” to “... Executive Director ...”

   Section 13-201(a)5 — Replace “... his or her ...” with “... its ...”

   Section 13-201(a)6 — Replace “... officer ...” with “... director ...”

   Section 13-201(a)7 — Revise “... Section 880 of the California Welfare and Institutions Code...” to read “... Section 881 of the Welfare and Institutions Code...”; and revise “... Section 602 of the California Welfare and Institutions Code...” to read “... Section 602 of the Welfare and Institutions Code...”

   Section 13-201(a)8 — In the last line, replace “... are ...” with “... is ...”

   Section 13-201(a)9 — Revise “... means sentenced to a jail ...” to read “... means placed in a jail ...”

   Section 13-201(a)15 — Revise “... an I.Q. of 70 or lower ...” to read “... an I.Q. of 69 or lower ...”

   Insert a new Section 13-201(a)16 and renumber the existing Sections 13-201(a)16 thru 13-201(a)51 one number higher.

   (The following references use the revised Section numbers.)

   Section 13-201(a)17-In the last line, replace “... observation ...” with “... supervision ...”
Section 13-201(a)21 — Revise “Executive Officer” to “Executive Director.”

Section 13-201(a)24 — Revise “Executive Officer or” to “Executive Director of.”

Section 13-201(a)27 — Revise “contraindications to minors being” to read “contraindications to a minor being.”

Section 13-201(a)28 — In the third and last lines, revise “the appeal” to read “an appeal.”

Section 13-201(a)31 — Revise the second line to read “forestry camp, regional youth educational facility, boot camp or.”

Section 13-201(a)32 — In the last line, revise “article” to read “subchapter.”

Section 13-201(a)34 — Revise the first and second lines to read “means a building that contains a Type I or Temporary Holding Facility. It does not include.”

Section 13-201(a)35 — In the fifth line, add a “,” after the word “determined” and in the sixth line add a “,” after the words “effects.”

Section 13-201(a)37 — In the third line revise “sleeping rooms and/or dormitories” to read “sleeping rooms or dormitories.”

Section 13-201(a)38 — In the last line, revise “their jurisdiction” to read “his/her jurisdiction.”

Section 13-201(a)39 — In the second line change “which” to “that.” and at the end of the Section add “Lockups are Type I or Temporary Holding Facilities as defined in the Minimum Standards for Local Detention Facilities.”

Section 13-201(a)40 — Revise “minors authorized to be housed” to “minors that can be housed”; and revise “forestry camp or boot camp” to read “forestry camp, regional youth education facility, or boot camp.”; and in the last line, replace “article” with “subchapter.”

Section 13-201(a)41 — Revise last line to read “administrative responsibility for the mental health program.”

Section 13-201(a)42 — Capitalize Minimum Standards for Local Detention Facilities and after “Subchapter 4,” add “Section 1000 et seq.”

Section 13-201(a)43 — In the last line omit the word “California.”

Section 13-201(a)44B — Add a “,” after “and”

Section 13-201(a)45 — Revise “Executive Officer” to “Executive Director.”

Section 13-201(a)46 — Revise the third line to read “pursuant to a contract,”

Section 13-201(a)48 — Revise the third line to read “pursuant to an application.”

Section 13-201(a)50 — Revise the last line to read “on an appeal.”

Insert a new Section 13-201(a)53 and renumber existing Sections 13-201(a)52 thru 13-201(a)64 two numbers higher.

(The following references use the revised Section numbers.)

Section 13-201(a)54 — Revise the last line to read “specified in Title 24 Section 460A.”

Section 13-201(a)56 — Revise “Executive Officer or” to “Executive Director of.”

Section 13-201(a)57 — In the last line change “authority” to “administrator.”

Section 13-201(a)60 — Revise the second line to read “of a minor, not to exceed 96 hours,”

Section 13-201(a)61 — Omit the word “California” from the second line

Section 13-201(a)63 — Revise the first line to read “Supervision in a law enforcement facility means . . .”; and revise the second line to read “is being directly observed by the . . .”

Section 13-201(b) — Revise the seventh line to read “Youth Authority of the Board of Corrections in effect . . .”

Section 13-201(c)1 — Revise the first line to read “or regional juvenile facility.”

Section 13-201(c)2 — Revise the second line to read “or regional juvenile facility.”; and revise the third line to read “facility, or expand the rated capacity of the current facility shall complete . . .”; and replace existing items A through E with new items A through I.

Section 13-201(c)3 — In item R revise the first line to read “Management of minors with disabilities with provisions . . .”; and in item S omit “and,” from the last line; and in item T revise “Section 4465 S” to “Section 4030” and add “and,” to the last line; and insert a new item U

Section 13-201(c)4 — Revise the second line to read “county, or regional juvenile facility . . .”

Section 13-201(c)6B — Revise the first line to read “facility shall address the . . .”

Section 13-201(c)6B(3) — Revise “Subchapter 4,” to read “Subchapter 5.”

Section 13-201(c)6B(4) — Insert new language before “single or double occupancy . . .”; and omit the heading “The needs assessment shall include but not be limited to a description of:” along with the items a. through k. below it.

Section 13-201(c)6B(8)a. — Revise the definitions to read “A room for a minor with a disability requiring a wheelchair must have an appropriate entry and a toilet, washbasin and drinking fountain which the minor can utilize without personal assistance.”

Section 13-201(c)6B(10) — Revise the title to read “health care housing and treatment space.”; and revise the second line to read “housing and treatment of ill . . .”; and revise the tenth line to read “Treatment spaces and the medical care housing.”

Section 13-201(c)8 — Revise the second line of the second paragraph to read “compliance shall enhance, be equal to, or ”; and insert a new item (g).

3. (BOC 01/02) Approval of minimum standards for local facilities, CCR, Title 24, Part 1 Approved by the California Building Standards Commission on July 16, 2003, and filed.

4. (BOC 01/04) Part 1, Chapter 13, Sections 13-102(a); 13-102(c); 13-102(c)3; 13-102(c)6; 13-102(c)7; 13-102(c)8.


Revise “health authority” for clarity. Revise “local detention facility” to add the term “and minors” for clarity.

The term “herein” and “CCR” were deleted from the definition of “rated capacity.”

Revise “managerial custodial personnel” for clarity.

Add new definition for “security glazing” to help define the adult regulation requirements.

The term “his or her” is being replaced with the term “his/her” in the definition of “Type I Facility.”

13-102(c)1 — Letter of Intent + Revise regulation to provide consistent terminology when referring to a “city,” “county” or “city and county.”

13-102(c)3 — Program Statement — Retitled regulation to include “Operational” in the title heading to read as follows: “Operational Program Statement.”

13-102(c)6 — Design Requirements — This modification will require floor drains to be added to hair care spaces.

13-102(c)7 — Pilot Projects — Replaces existing text in Title 24 with language from Title 15.

13-102(c)8 — Alternate Means of Compliance — Describes the process for applying, monitoring and approving alternate means of compliance.