



**CALIFORNIA  
HOSPITAL  
ASSOCIATION**

*Providing Leadership in  
Health Policy and Advocacy*

File Code: 08-07-83

July 8, 2008

**TO:** CHA Member Hospitals

**FROM:** Roger Richter, Senior Vice President, Professional Services

**SUBJECT:** OSHPD SB 1661 Reporting Requirements

SB 1661 (Chapter 679, Statutes of 2006) authorizes the Office of Statewide Health Planning and Development (OSHPD) to grant an additional extension, of up to two years, of the January 1, 2013, hospital seismic mandate deadline if the hospital building subject to the extension meets prescribed requirements, including that it is under construction at the time of the request for the extension, and that the hospital has made reasonable progress in meeting the deadline, but for reasons beyond its control it is impossible to meet the deadline (see attached).

Duane Borba, P.E, OSHPD, recently sent a letter (attached) requesting that CHA inform hospitals of how OSHPD will implement SB 1661. Mr. Borba's letter addresses the following:

- SB 1661 mandated reports (due June 30, 2009, and June 30, 2011) are required for all hospital campuses that have an extension to 2013. There are no exceptions.
- Specific information is identified that hospitals must capture for their SB 1661 reports.
- OSHPD will provide technical assistance to hospitals in completing their reports.
- Later this month, each hospital will receive from OSHPD written reporting procedures along with a request to verify the facility contact for the contractors.

Please note that any hospital not complying with the requirements of SB 1661 will not be eligible for the additional two-year extension.

If you have any questions, please contact me at (916) 552-7570 or [rrichter@calhospital.org](mailto:rrichter@calhospital.org).

RR:cd

Attachments

**Facilities Development Division**

1600 9<sup>th</sup> Street, Room 420  
Sacramento, California 95814  
(916) 654-3362  
Fax (916) 654-2973  
www.oshpd.ca.gov/fdd

June 17, 2008

Roger Richter  
Senior Vice President Professional Services  
California Hospital Association  
1215 K Street, Suite 800  
Sacramento, CA 95814

Dear Mr. Richter,

The Office of Statewide Health Planning and Development (OSHPD) requests the assistance of the California Hospital Association (CHA) in informing general acute care hospital owners that OSHPD will be assisting them in preparing reports required by Senate Bill (SB) 1661 (Chapter 679, Statutes of 2006). As you know, SB 1661 allows hospital owners that have received a five-year extension to the January 1, 2008 deadline to request an additional extension of up to two years to January 1, 2015. In addition, SB 1661 requires general acute care hospital owners to submit reports to OSHPD regarding the status of their Structural Performance Category (SPC) – 1 buildings. These reports must be submitted to OSHPD no later than June 30, 2009 and again by June 30, 2011. At a minimum, each report must capture the following information:

1. Each SPC-1 building;
2. Provide the OSHPD project number(s) for retrofit or replacement of each building;
3. Provide the projected construction start date(s);
4. Provide the projected construction completion date(s);
5. List all building(s) to be removed from acute care service along with the projected date(s) of such action.

Hospital owners who have applied for a five-year extension are required to submit these reports regardless of whether they intend to request the additional two-year extension.

Prior to June 30, 2008, OSHPD will have in place contracts with two structural engineering firms who will assist each hospital in surveying their SPC-1 buildings and preparing the SB 1661 reports. These engineering firms are being hired solely for the purpose of assisting the hospitals in the timely reporting of the status of their SPC – 1 buildings; they will not be checking plans or construction for code compliance.



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OSHPD is currently finalizing the procedures for the contractors to follow in assisting the hospitals. In July 2008, OSHPD will provide each hospital written reporting procedures along with a request to verify the facility contact for the contractors.

Thank you for your assistance in informing the hospitals of this important legislative mandate and how OSHPD plans to assist them in this endeavor. We look forward to working with you.

Sincerely,



Duane F. Borba, P.E.  
Supervisor, Health Facilities Review  
Program Support Unit



## Senate Bill No. 1661

### CHAPTER 679

An act to amend Section 130060 of, and to add Section 130061 to, the Health and Safety Code, relating to health facilities.

[Approved by Governor September 29, 2006. Filed with  
Secretary of State September 29, 2006.]

#### LEGISLATIVE COUNSEL'S DIGEST

SB 1661, Cox. Health facilities: seismic safety: construction.

Existing law, the Alfred E. Alquist Hospital Facilities Seismic Safety Act of 1983, establishes, under the jurisdiction of the Office of Statewide Health Planning and Development, a program of seismic safety building standards for certain hospitals constructed on and after March 7, 1973.

Existing law requires, after January 1, 2008, any general acute care hospital building that is determined to pose a potential risk of collapse or pose a significant risk of loss of life to be used only for nonacute care hospital purposes. Existing law authorizes the Office of Statewide Health Planning and Development to extend the January 1, 2008, deadline for certain hospital buildings of a general acute care hospital, if specified conditions are met.

This bill would authorize the office to grant an additional extension of up to 2 years, of the January 1, 2013, deadline if the hospital building subject to the extension meets prescribed requirements, including that it is under construction at the time of the request for this extension, and that the hospital has made reasonable progress in meeting the deadline, but for reasons beyond its control it is impossible for it to meet the deadline. The bill would authorize the office to revoke this extension for abandonment or suspension of construction as specified, unless the hospital can demonstrate that the abandonment or suspension was caused by a condition beyond the hospital's control.

The bill would also require an owner of a general acute care hospital who either has or has not submitted an extension request pursuant to the bill to submit, under specified circumstances, prescribed reports to the office, and would require the office to make these reports.

*The people of the State of California do enact as follows:*

SECTION 1. Section 130060 of the Health and Safety Code is amended to read:

130060. (a) (1) After January 1, 2008, any general acute care hospital building that is determined to be a potential risk of collapse or pose

significant loss of life shall only be used for nonacute care hospital purposes. A delay in this deadline may be granted by the office upon a demonstration by the owner that compliance will result in a loss of health care capacity that may not be provided by other general acute care hospitals within a reasonable proximity. In its request for an extension of the deadline, a hospital shall state why the hospital is unable to comply with the January 1, 2008, deadline requirement.

(2) Prior to granting an extension of the January 1, 2008, deadline pursuant to this section, the office shall do all of the following:

(A) Provide public notice of a hospital's request for an extension of the deadline. The notice, at a minimum, shall be posted on the office's Internet Web site, and shall include the facility's name and identification number, the status of the request, and the beginning and ending dates of the comment period, and shall advise the public of the opportunity to submit public comments pursuant to subparagraph (C). The office shall also provide notice of all requests for the deadline extension directly to interested parties upon request of the interested parties.

(B) Provide copies of extension requests to interested parties within 10 working days to allow interested parties to review and provide comment within the 45-day comment period. The copies shall include those records that are available to the public pursuant to the Public Records Act, Chapter 3.5 (commencing with Section 6250) of Division 7 of Title 1 of the Government Code.

(C) Allow the public to submit written comments on the extension proposal for a period of not less than 45 days from the date of the public notice.

(b) (1) It is the intent of the Legislature, in enacting this subdivision, to facilitate the process of having more hospital buildings in substantial compliance with this chapter and to take nonconforming general acute care hospital inpatient buildings out of service more quickly.

(2) The functional contiguous grouping of hospital buildings of a general acute care hospital, each of which provides, as the primary source, one or more of the hospital's eight basic services as specified in subdivision (a) of Section 1250, may receive a five-year extension of the January 1, 2008, deadline specified in subdivision (a) of this section pursuant to this subdivision for both structural and nonstructural requirements. A functional contiguous grouping refers to buildings containing one or more basic hospital services that are either attached or connected in a way that is acceptable to the State Department of Health Services. These buildings may be either on the existing site or a new site.

(3) To receive the five-year extension, a single building containing all of the basic services or at least one building within the contiguous grouping of hospital buildings shall have obtained a building permit prior to 1973 and this building shall be evaluated and classified as a nonconforming, Structural Performance Category-1 (SPC-1) building. The classification shall be submitted to and accepted by the Office of Statewide Health Planning and Development. The identified hospital building shall

be exempt from the requirement in subdivision (a) until January 1, 2013, if the hospital agrees that the basic service or services that were provided in that building shall be provided, on or before January 1, 2013, as follows:

(A) Moved into an existing conforming Structural Performance Category-3 (SPC-3), Structural Performance Category-4 (SPC-4), or Structural Performance Category-5 (SPC-5) and Non-Structural Performance Category-4 (NPC-4) or Non-Structural Performance Category-5 (NPC-5) building.

(B) Relocated to a newly built compliant SPC-5 and NPC-4 or NPC-5 building.

(C) Continued in the building if the building is retrofitted to a SPC-5 and NPC-4 or NPC-5 building.

(4) A five-year extension is also provided to a post 1973 building if the hospital owner informs the Office of Statewide Health Planning and Development that the building is classified as a SPC-1, SPC-3, or SPC-4 and will be closed to general acute care inpatient service use by January 1, 2013. The basic services in the building shall be relocated into a SPC-5 and NPC-4 or NPC-5 building by January 1, 2013.

(5) Any SPC-1 buildings, other than the building identified in paragraph (3) or (4), in the contiguous grouping of hospital buildings shall also be exempt from the requirement in subdivision (a) until January 1, 2013. However, on or before January 1, 2013, at a minimum, each of these buildings shall be retrofitted to a SPC-2 and NPC-3 building, or no longer be used for general acute care hospital inpatient services.

(c) On or before March 1, 2001, the office shall establish a schedule of interim work progress deadlines that hospitals shall be required to meet to be eligible for the extension specified in subdivision (b). To receive this extension, the hospital building or buildings shall meet the year 2002 nonstructural requirements.

(d) A hospital building that is eligible for an extension pursuant to this section shall meet the January 1, 2030, nonstructural and structural deadline requirements if the building is to be used for general acute care inpatient services after January 1, 2030.

(e) Upon compliance with subdivision (b), the hospital shall be issued a written notice of compliance by the office. The office shall send a written notice of violation to hospital owners that fail to comply with this section. The office shall make copies of these notices available on its Web site.

(f) (1) A hospital that has received an extension of the January 1, 2008, deadline pursuant to subdivisions (a) or (b) may request an additional extension of up to two years for a hospital building that it owns or operates.

(2) The office may grant the additional extension if the hospital building subject to the extension meets all of the following criteria:

(A) The hospital building is under construction at the time of the request for extension under this subdivision and the purpose of the construction is to meet the requirements of subdivision (a) to allow the use

of the building as a general acute care hospital building after the extension deadline granted by the office pursuant to subdivision (a) or (b).

(B) The hospital building plans were submitted to the office and were deemed ready for review by the office at least four years prior to the applicable deadline for the building. The hospital shall indicate, upon submission of its plans, the SPC-1 building or buildings that will be retrofitted or replaced to meet the requirements of this section as a result of the project.

(C) The hospital received a building permit for the construction described in subparagraph (A) at least two years prior to the applicable deadline for the building.

(D) The hospital submitted a construction timeline at least two years prior to the applicable deadline for the building demonstrating the hospital's intent to meet the applicable deadline. The timeline shall include all of the following:

- (i) The projected construction start date.
- (ii) The projected construction completion date.
- (iii) Identification of the contractor.

(E) The hospital is making reasonable progress toward meeting the timeline set forth in subparagraph (D), but factors beyond the hospital's control make it impossible for the hospital to meet the deadline.

(3) A hospital denied an extension pursuant to this subdivision may appeal the denial to the Hospital Building Safety Board.

(4) The office may revoke an extension granted pursuant to this subdivision for any hospital building where the work of construction is abandoned or suspended for a period of at least one year, unless the hospital demonstrates in a public document that the abandonment or suspension was caused by factors beyond its control.

SEC. 2. Section 130061 is added to the Health and Safety Code, to read:

130061. (a) An owner of a general acute care hospital building that is classified as a nonconforming Structural Performance Category-1 (SPC-1) building, who has not requested an extension of the deadline described in subdivision (a) or (b) of Section 130060, shall submit a report to the office no later than April 15, 2007, describing the status of each building in complying with the requirements of Section 130060. The report shall identify at least all of the following:

- (1) Each building that is subject to subdivision (a) of Section 130060.
- (2) The project number or numbers for retrofit or replacement of each building.
- (3) The projected construction start date or dates and projected construction completion date or dates.
- (4) The building or buildings to be removed from acute care service and the projected date or dates of this action.

(b) An owner of a general acute care hospital building that is classified as a nonconforming, Structural Performance Category-1 (SPC-1) building, who has requested an extension of the deadline described in subdivision

(a) or (b) of Section 130060, shall submit a report to the office no later than June 30, 2009, describing the status of each building in complying with the requirements of Section 130060. The report shall identify, at a minimum, all of the following:

(1) Each building that is subject to subdivision (a) of Section 130060.

(2) The project number or numbers for retrofit or replacement of each building.

(3) The projected construction start date or dates and projected construction completion date or dates.

(4) The building or buildings to be removed from acute care service and the projected date or dates of that action.

(c) An owner of a general acute care hospital building that is classified as a nonconforming, Structural Performance Category-1 (SPC-1) building, who has requested an extension of the deadline described in subdivision (a) or (b) of Section 130060, shall submit a report to the office no later than June 30, 2011, describing the status of each building in complying with the requirements of Section 130060. The report shall identify at least all of the following:

(1) Each building that is subject to subdivision (a) of Section 130060.

(2) The project number or numbers for retrofit or replacement of each building.

(3) The projected construction start date or dates and projected construction completion date or dates.

(4) The building or buildings to be removed from acute care service and the projected date or dates of that action.

(d) The office shall make the information required by subdivisions (a), (b), and (c) available on its Web site within 90 days of receipt of this information.

(e) Hospitals that have not reported pursuant to this section are not eligible for the extension provided in subdivision (f) of Section 130060.