

Facilities Development Division

California's Building Department for Hospitals

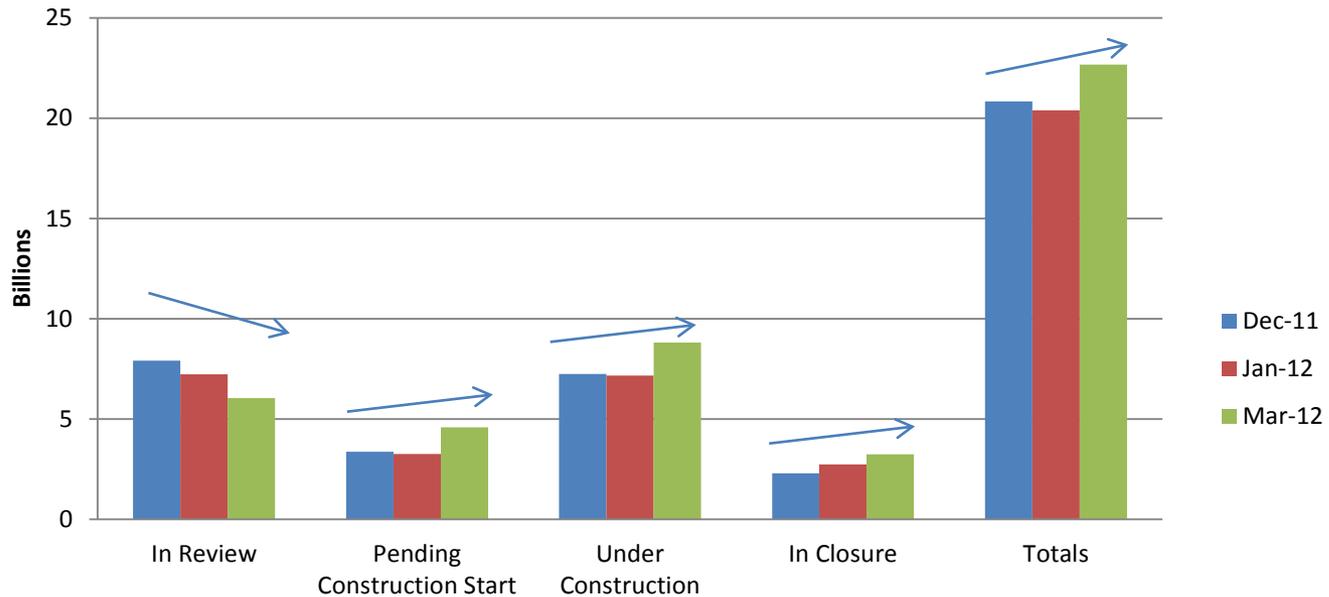
Paul A. Coleman, Architect, Deputy Director

Update for the Hospital Building Safety Board

May 30, 2012

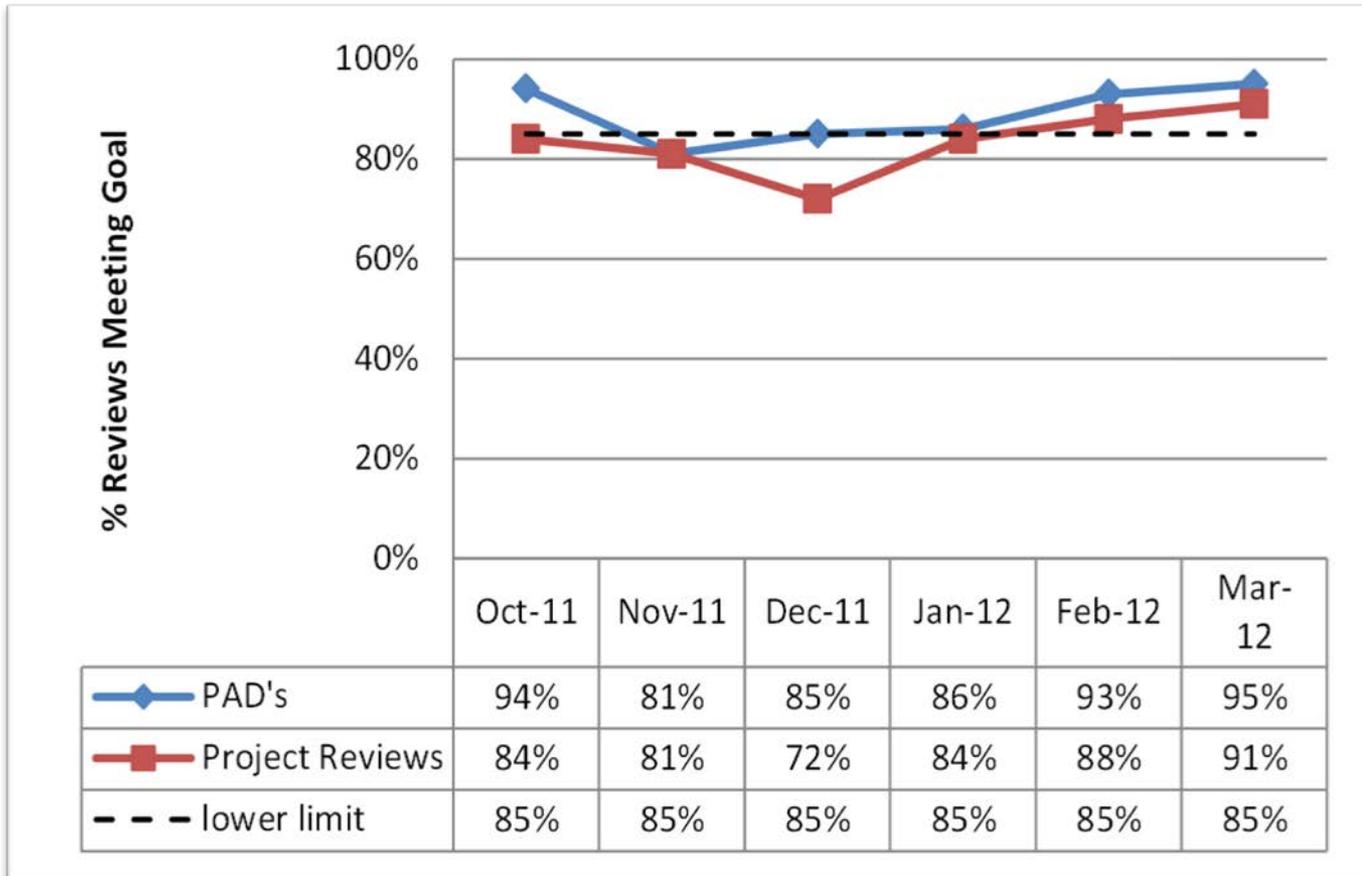
Workload Values

FDD Workload Values
As of 4/2/12

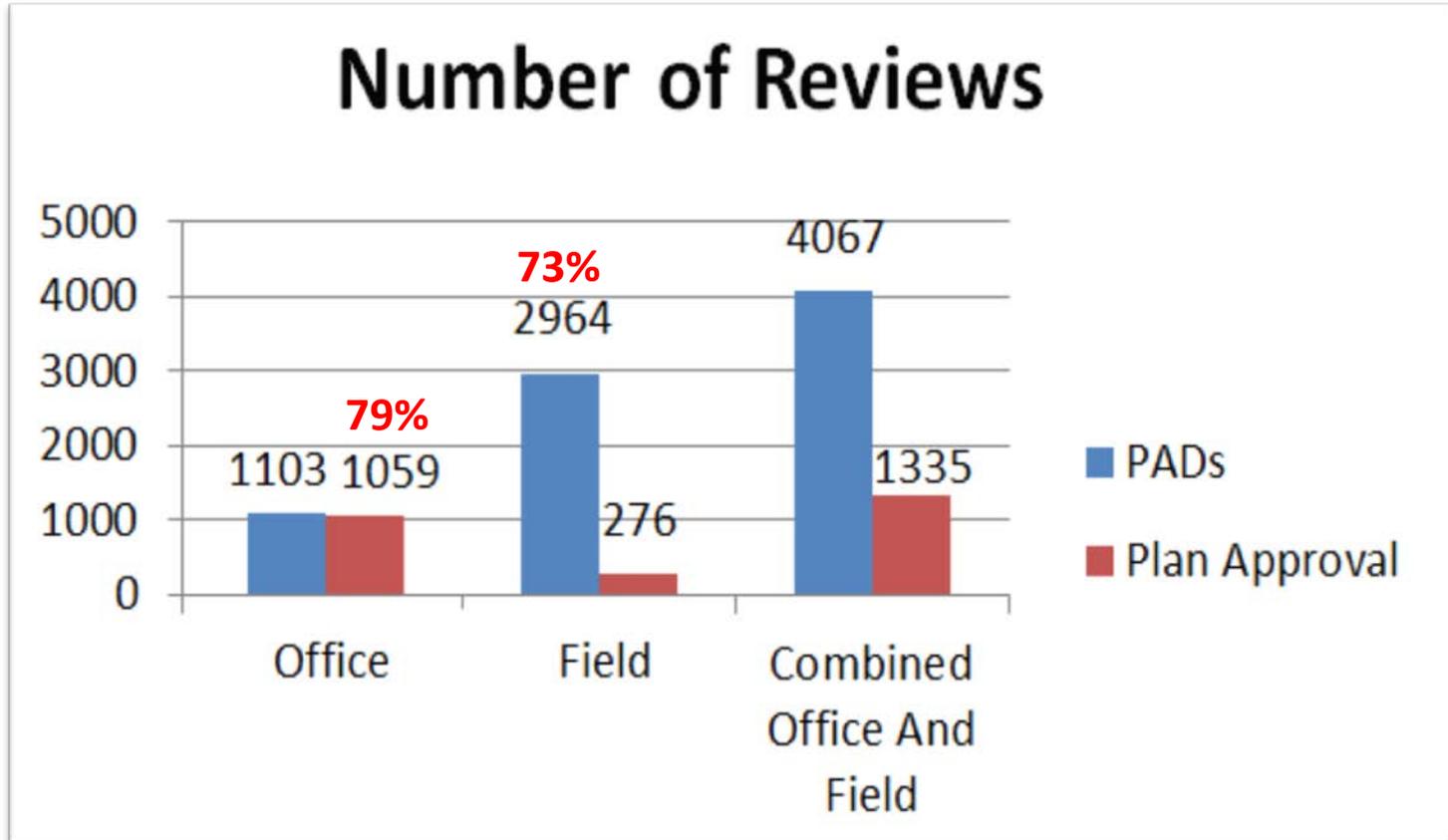


% Projects Meeting Goals

Furlough Goals



Number of Reviews Office/Field 1st Qtr. 2012



FDD's Goals for 2012

Business Procedures

- Return to Pre-Furlough goals by April 1.
- Increase the construction cost of projects eligible for Rapid Review from \$100,000, excluding fixed equipment costs, to \$175,000.
- Begin over-the-counter operation, similar to programs offered by local building departments, for small projects in Northern California in the same manner as the program currently provides in San Diego by the Rapid Review Unit.
- Develop and implement a Collaborative Review process for complex new building projects
- Continue to develop and approve Standard Details to leverage the plan review process, such as Suspended Ceiling Details.
- Improve eSP, including implementation of Citizen Access, Mobile Office for field staff, credit card pay, e-signature capabilities, more efficient electronic document processing methods, and incorporation of other business-related data and processes into the program.
- Staff and implement the duties and functions of the Inspection Services Unit, including an IOR Academy, Testing Lab program, training of all staff for emergency response.

Training and Education to Industry

- Provide training to the industry, such as for “Materially Alter”, to reduce the number of post-approval documents reviewed by FDD when possible.
- Ramp up technical training for FDD staff.

Updating/Implementing Statutes, Guidelines, etc.

- Issue Code Application Notices for Temporary Permits, Removal of Buildings from OSHPD Jurisdiction, and others.
- Develop and adopt updated Clinic Regulations as health care delivery moves from hospital to clinic-based with the implementation of Healthcare Reform.
- Implement SB 90 seismic compliance extensions when the law becomes effective.
- Issue an updated Best Practices Manual
- Issue an updated FREER Manual

Goals for Plan Review 4/01/12

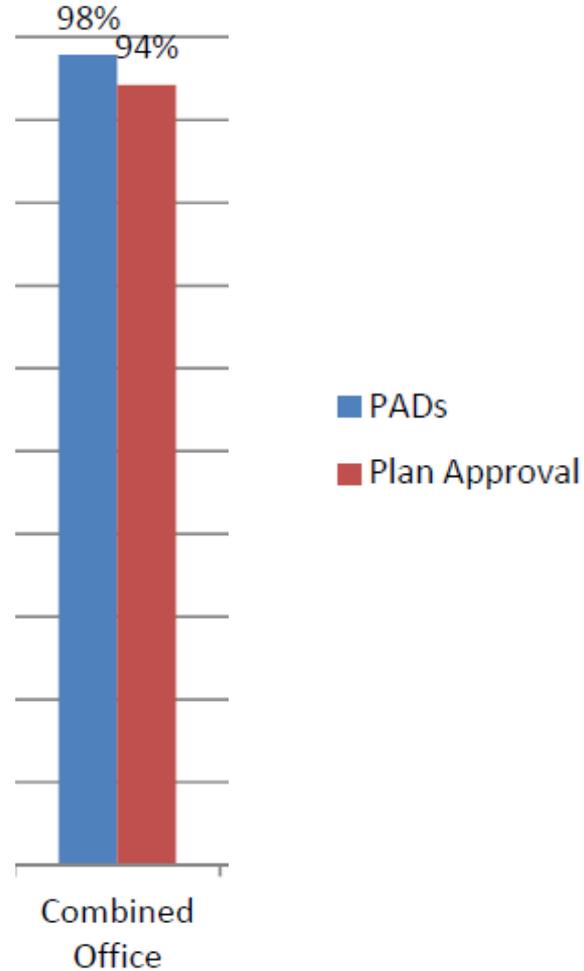
- Remodel and renovation projects \leq **\$175,000.00** excl. fixed equip. costs :
 - Initial review: 21 days
 - Back check: 21 days

- Remodel and renovation projects $>$ **\$175,000.00**:
 - Initial review: 60 days
 - Back check: 30 days
 - Post-approval documents: 30 days

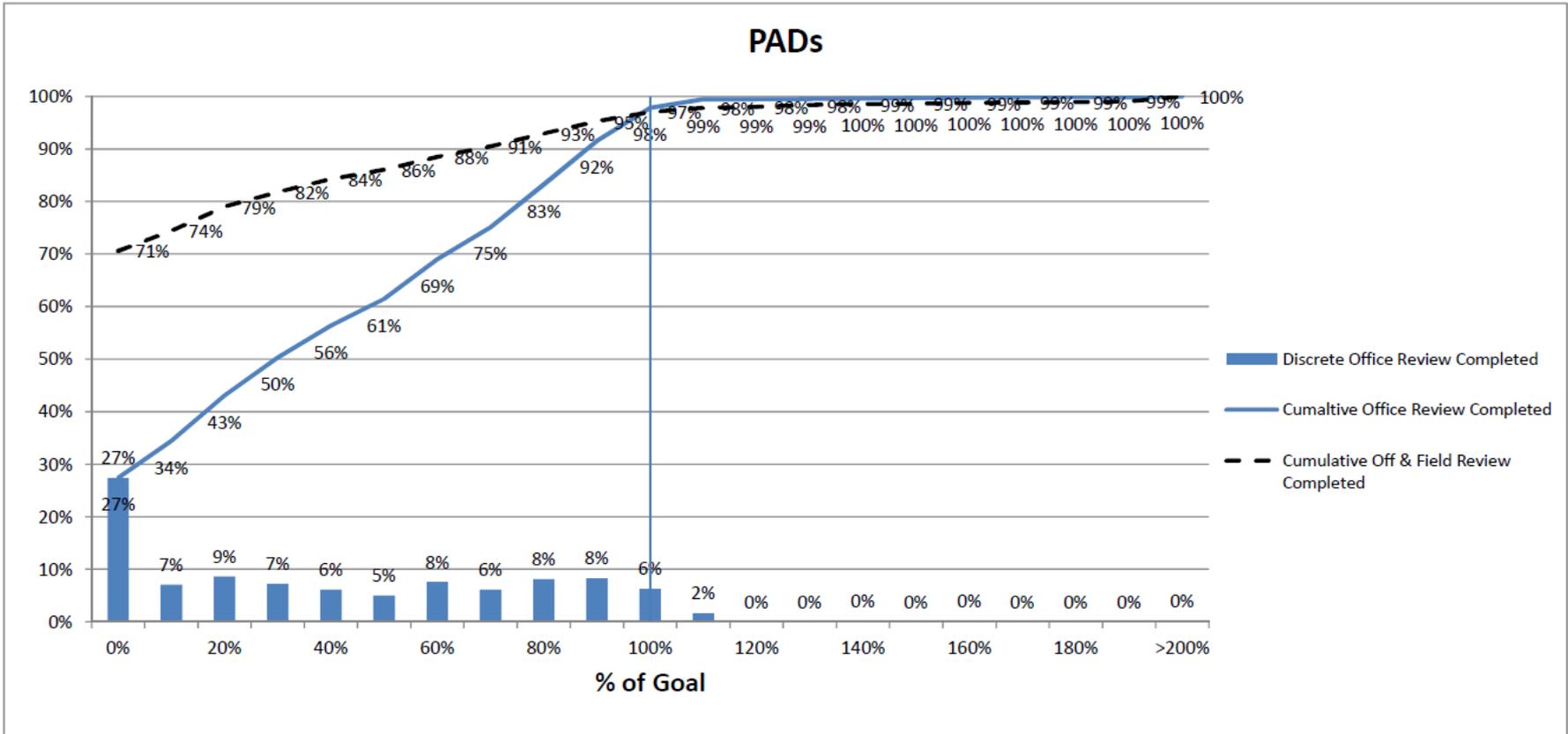
- Large, complex projects with major structural work:
 - Initial review: 80 days
 - Back check: 40 days
 - Post-approval documents: 30 days

- Goals do not apply to Managed Projects or Phased Plan Reviews
 - Schedules negotiated on a case by case basis

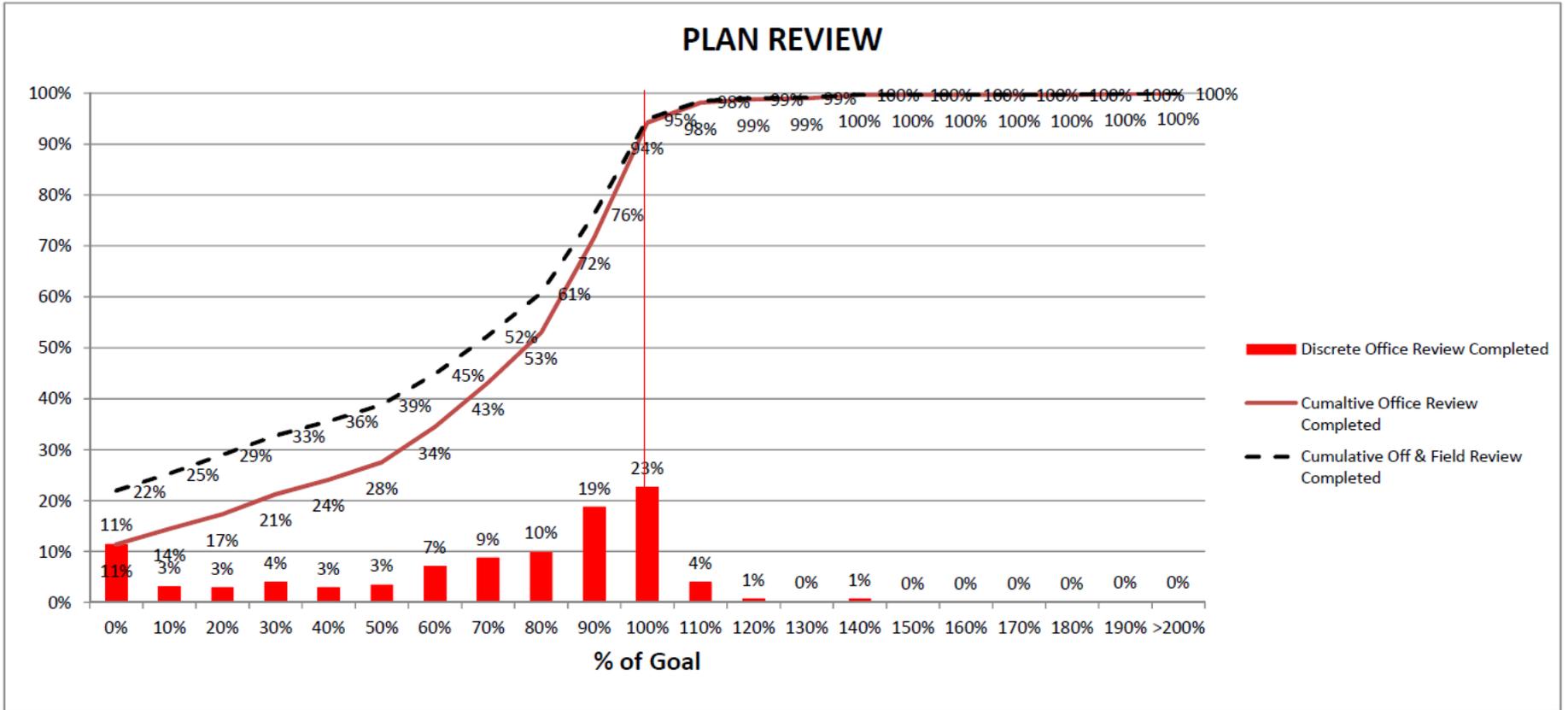
% of Reviews Meeting Goals 1st Qtr. 2012



PADs Review



Projects Office Review

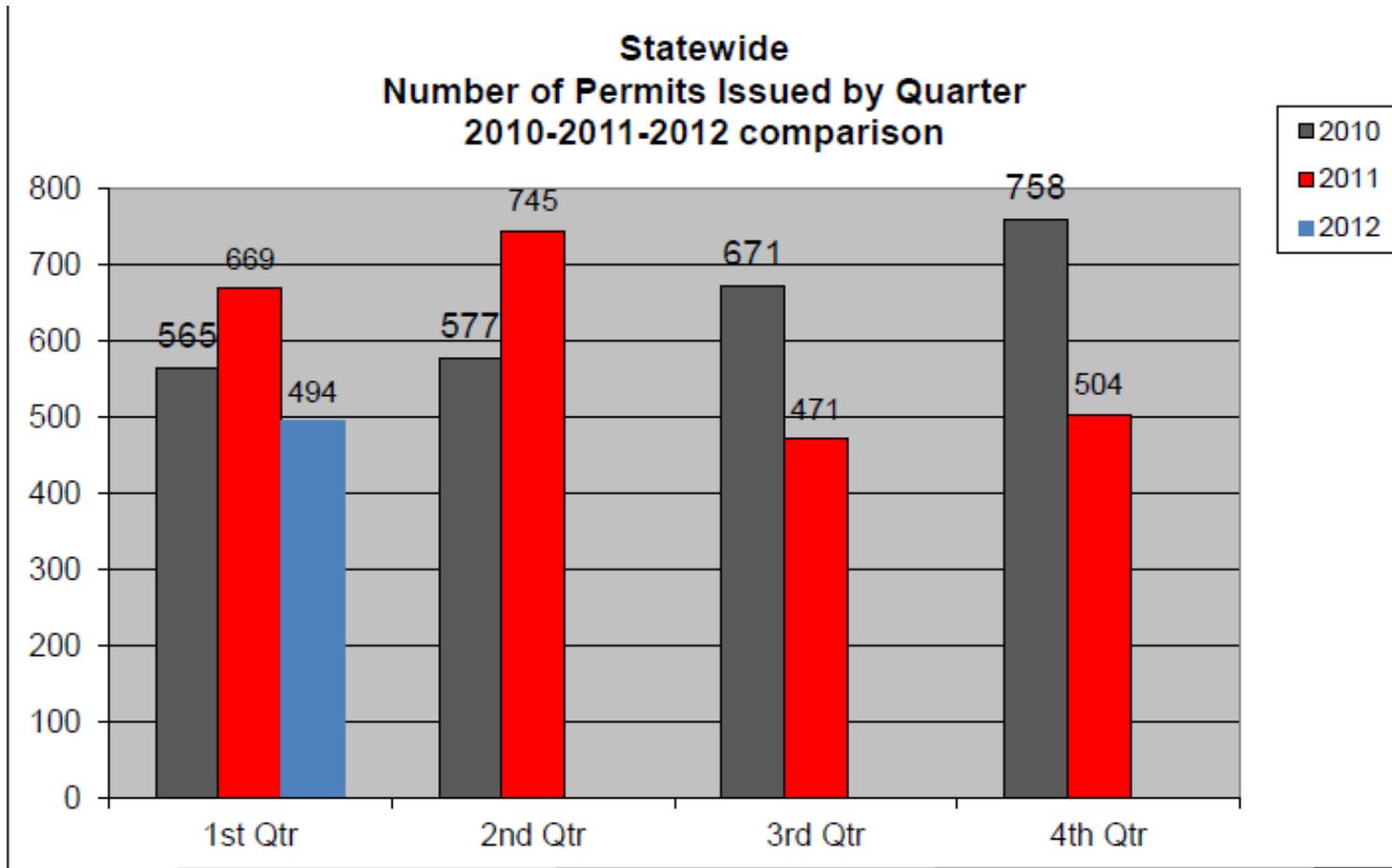


Rapid Review Unit Update

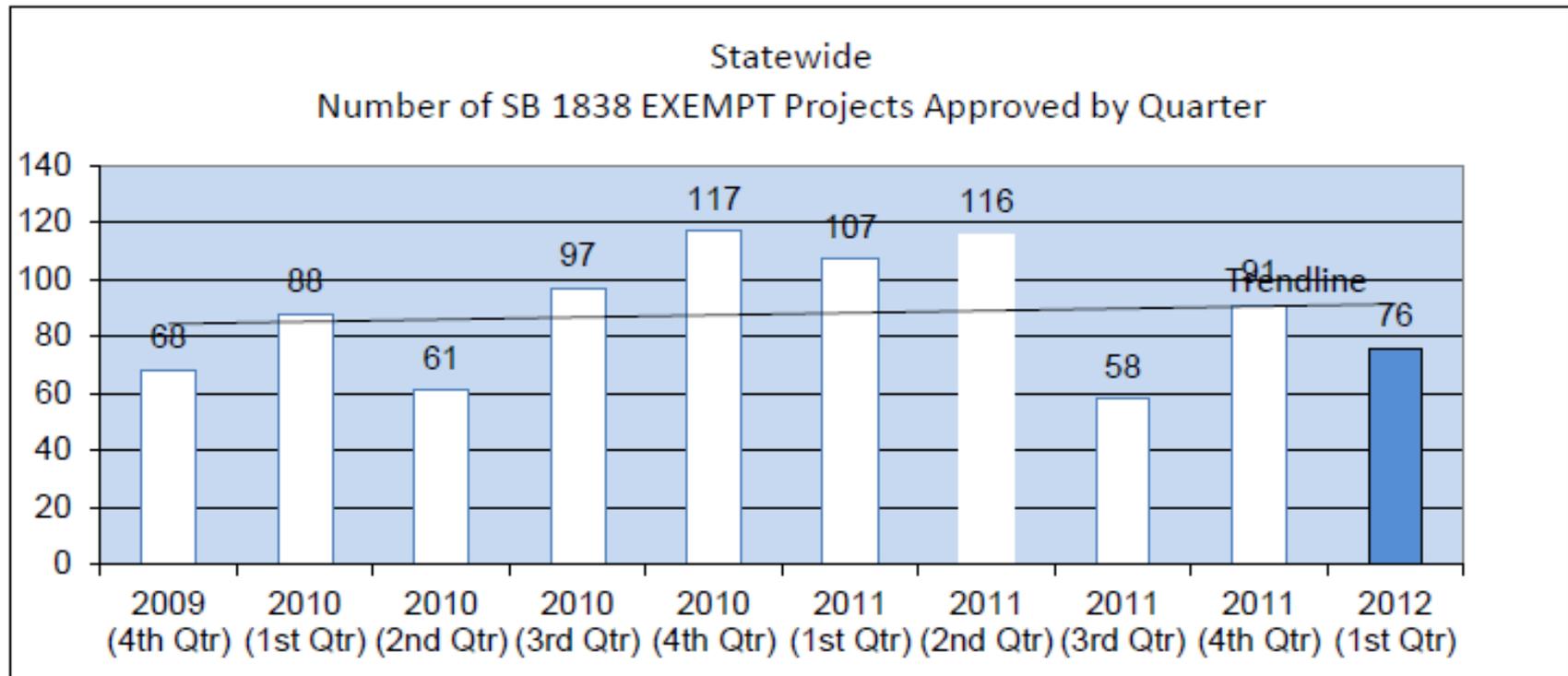
Effective immediately, electronic plan review is currently being offered as a pilot program for May and June 2012. Beginning July 1, 2012, it will become a required condition of Rapid Review Unit eligibility. Please visit the Electronic Plan Review page for further details:

- http://oshpd.ca.gov/FDD/Plan_Review/rapid_reviewElectPlnRev_v2.html
- The web page above describes the procedures and protocols for electronic submittal
- Only CD submittals are accepted
- A protocol for submitting electronically through a FTP site will be available by July 1, 2012
- For additional information or if you have questions please contact the RRU Supervisor, Diana Acosta, at 916-440-8440

Number of Permits by Quarter



SB 1838 Projects by Quarter



HAZUS 2007/2010

HAZUS		
SUBMITTED	HAZUS 2007 PROBABILITY OF COLLAPSE ≤ 0.75	HAZUS 2010 PROBABILITY OF COLLAPSE ≤ 1.2
Completed Reviews	441	53
Reviews in Progress	<u>105</u>	<u>150</u>
TOTAL:	546	203
COMPLETED REVEIWS		
SPC-2	315 75%	46 98%
SPC-1	104	1
Ineligible	8	0
Already SPC-2	2	0
Already SPC-3 to SPC-5	9	0
Geotech Not Approved	0	0
Geotech Missing	1	1
Conditional Approval	<u>2</u>	<u>5</u>
TOTAL:	441	53
REVIEWS IN PROGRESS		
On Hold by Request or Retracted	17	3
Remarks & Awaiting Applicant Response	75	89
In Various Stages of Review	<u>13</u>	<u>58</u>
TOTAL:	105	150



- The current version of e-SP Project Tracking (ACA) is running on our web site
- A known shortfall of our current system is the inability to determine when a project is due to be completed and approved or returned to the client; this is being worked on right now
- Many enhancements have been made to the current version and client complaints about the ACA have substantially decreased
- There are a few known deficiencies that are not supported by our current version of Accela Automation
 - Version 7.1 has significant improvements in its external-pointing data capabilities
 - We hope to upgrade to Version 7.1 by mid-June and should be able to begin taking advantage of those enhancements soon thereafter
- FDD is working on a more intuitive web-based user guide for clients who are unfamiliar with our current ACA and web-based training for using the newer version



Project Closure

- The business process for the various ways and statuses in which projects are closed was not clearly defined when the eSP rolled out in September 2011
- The eSP Control Board has given development of the closure process its highest priority and a committee has been established to develop and document the process
- Without a formal process, closure has been lagging for most projects
- PTs that are actively closing projects have developed their own individual process, which leads to inconsistency and is not desirable
- There are currently no letters for PTs to request Final VCRs and Final Costs (1st Letter, 2nd Letter).
- Additional automation/programming is needed (scripting) to simplify processes that must currently be done manually:
 - Notify PT when 100% CF has been issued.
 - Automatically assign project closure workflow to appropriate PT.



Project Closure

- Fees assessed vs. fees invoiced vs. fees paid requirements are confusing
- RCO must approve final costs; no mechanism to track this
- Project cannot be completely closed until final payment of all outstanding fees – no mechanism to know when this has occurred
 - Account Receivable currently running over \$21 million
- Some final cost affidavits are understated due to improper accounting practices by some clients, resulting in significant inappropriate refunds
 - Example: A facility excludes labors costs in the overall construction costs because workers are all employees of the facility
- No process for auditing final costs which are in dispute
 - Delays processing refund requests.

CAN for Temporary Structures and Uses

SECTION 108 TEMPORARY STRUCTURES AND USES

108.1 General. The *building official* is authorized to issue a *permit* for temporary structures and temporary uses. Such *permits* shall be limited as to time of service, but shall not be permitted for more than 180 days. The *building official* is authorized to grant extensions for demonstrated cause.

- Provide a temporary service to the hospital to allow a unit shutdown, replacement, etc. with 3 levels of criteria:
 - Temporary equipment for a period of less than 24 hours.
 - Temporary equipment for a period of less than 120 hours (one week)
 - Temporary equipment for a period of less than six months
- Any equipment that will be on site greater than six months shall be required to meet the requirements of permanent construction
- All Temporary Installations for electrical work shall comply with Article 590 of the California Electrical Code
- Temporary use of gas shall comply with the California Plumbing Code § 1208
- Temporary heating equipment shall comply with the California Fire Code § 1403

NPC 3 or Not

- **All Acute Care Hospitals Must be NPC 3 by January 1, 2013 Unless They Have an Exemption or Extension**
 - NPC 3 = NPC 2 anchorage and bracing of :
 - Communication systems
 - Emergency power supply
 - Bulk medical gas systems
 - Fire alarm systems
 - Emergency lighting and signs in means of egress
- } Provides for safe and orderly evacuation
- + Anchorage and bracing in the following service spaces:
- Critical Care Areas
 - Clinical Laboratory
 - Pharmaceutical
 - Radiological
 - Central Supply Areas
- Extension = SDC F = NPC 4 by January 1, 2020, NPC 5 by January 1, 2030
 - Exemption = SDC D = NPC 5 by January 1, 2030 (No interim NPC requirement)