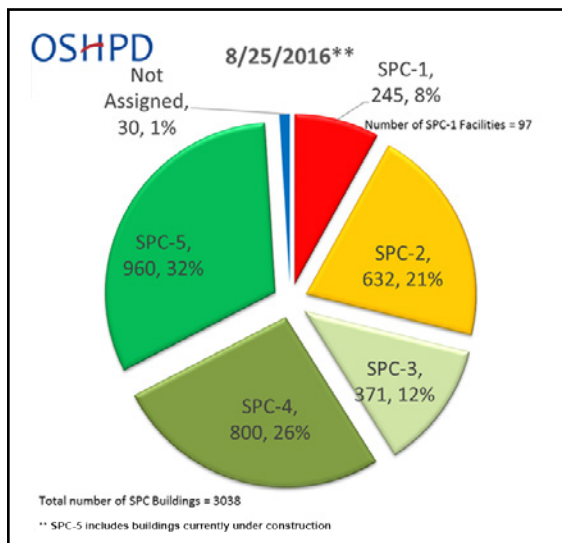


New Seismic Category for Hospitals

September 12, 2016

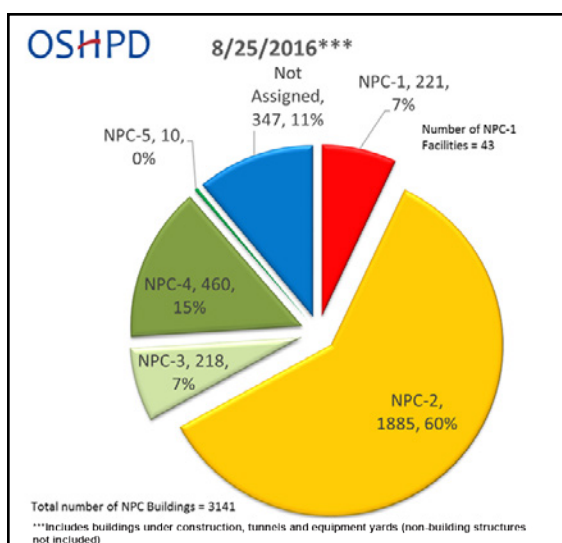
SPC-4D may be a cost-effective option for existing nonconforming buildings

SACRAMENTO – California’s acute care hospitals continue to make progress in achieving seismic safety compliance. More than 91 percent of the acute care hospital buildings are no longer at significant risk of collapse in a strong earthquake. The inventory of buildings at risk of collapse continues to decline from 1,313 in 2002 to 251 in August 2016.



In the aftermath of the 1994 Northridge Earthquake, the Hospital Seismic Safety Act required all acute care hospital buildings in California to retrofit or replace buildings deemed at risk of collapse during an earthquake. The Act authorized OSHPD to create seismic performance categories (SPC) for general acute care hospital facilities ranging from those at significant risk of collapse in an earthquake to those capable of providing services after an earthquake.

Each hospital building providing general acute care is assigned a structural performance rating. These SPC numbers range between 1 and 5, where SPC-1 signifies a significant risk of collapse, SPC-2 are buildings that may not be repairable following a strong earthquake. SPC-3 through SPC-5 signify a higher level of structural safety. Acute care buildings must achieve SPC-3 or higher to continue offering acute care services beyond 2030.



To enable nonconforming buildings (typically built before 1973) to withstand an earthquake and remain operable, OSHPD has added a sixth category. Structural Performance Category 4D or (SPC-4D) is not an extension of the statutory timeline but a brand new structural performance category.

Retrofitting SPC-1/SPC-2

buildings to the highest standard, SPC-5, would essentially require existing buildings to meet current code. This can be prohibitively expensive in most cases, and impossible in some others. Rather than requiring SPC-1 and SPC-2 buildings to retrofit to SPC-5, now such buildings can retrofit to SPC-4D. SPC-4D allows retrofit to a structural standard that is similar or comparable to SPC-4 buildings, which are already approved to provide acute care services beyond 2030.

SPC-4D is a voluntary program that will primarily be used to retrofit SPC-2 buildings. It will need to be completed by 2030 to allow acute care services to remain in the existing noncompliant buildings beyond the statutory deadline of 2030. It contains no milestones or other due dates. SPC-4D projects can be submitted to OSHPD now.

Both hospitals and their communities will benefit from SPC-4D. Hospitals that may benefit are those that have older SPC-1 and SPC-2 buildings that are in the center of their campus and surrounded by newer hospital buildings, and removal of such buildings from service could result in the communities’ loss of a General Acute Care hospital. Where older buildings cannot be easily replaced or retrofitted to current code, such buildings may be able to retrofit to the SPC-4D standard. Particularly those facilities with SPC-1/SPC-2 buildings in areas of low seismicity, including many rural parts of California, may find retrofitting to SPC-4D a cost-effective option.

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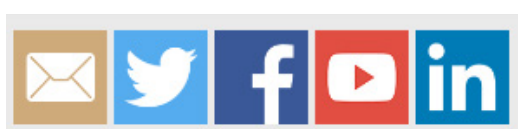


http://www.oshpd.ca.gov/FDD/seismic_compliance/SB1953/SPC-4D_Regulations.html

DIRECTOR’S QUOTE

“We are pleased that a majority of California’s hospital buildings are now meeting earthquake safety standards,” said OSHPD Director Robert P. David. “We believe the SPC-4D option will create new seismic compliance opportunities for hospital owners.”

California’s Office of Statewide Health Planning and Development (OSHPD) is the leader in collecting data and disseminating information about California’s healthcare infrastructure. OSHPD promotes an equitably distributed healthcare workforce, and publishes valuable information about healthcare outcomes. OSHPD also monitors the construction, renovation, and seismic safety of hospitals and skilled nursing facilities and provides loan insurance to assist the capital needs of California’s not-for-profit healthcare facilities.



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