1. Welcome and Introductions

Michael O’Connor, Chair, called the meeting to order. The Committee members and OSHPD staff introduced themselves from the Sacramento and Los Angeles locations. A quorum was present.

2. Presentation: Electronic Health Records (EHR)
• Clinical dependency on EHR
• Vulnerability and resiliency of EHR systems
• Strategy for continued operation after a catastrophic event

Presenter: Benjamin Broder, Kaiser Permanente

Discussion and public input

Mr. Broder gave a short introduction about himself before he started the presentation.

Mr. LaBrie questioned how much time it took to recover data over a landline when systems went down. Mr. Broder explained that he had never experienced having to recover data over a landline and that most people know how to do documentation on paper but some of the older methods may be foreign to younger individuals. They discussed vulnerabilities when a system goes offline and how smaller hospitals will have a harder time coming back online than larger ones.

Mr. Coleman wondered if there needed to be a requirement for built spaces in a hospital that pertain to just paper records. Mr. Broder answered that perhaps there should be a small space that is used for paper forms only. Mr. Broder noted that he was not sure what the requirements are when it pertains to network safety and the requirements need to be tailored to fit the size of the hospital.

Mr. Johnson was concerned about hospitals relying on fax machines since the equipment is out of date.

In terms of an electronic terminal where patients can view their medical records, an interested party pointed out that a system will need to be developed because in some cases patient records are tied to employees’ identities.

Mr. Dandekar wanted to know what will happen if a patient is moved from one hospital to another and how their records would follow them if there was an electronic system failure. Mr. Broder stated that hospitals already deal with that issue daily, but if the system went down, the information will not be transferable, and the hospital will follow its John Doe protocols.

Ms. Scaturro clarified that the focus for the building standards is to see if there needs to be any codes that reflect operations in terms of a system failure. Mr. Broder answered Ms. Scaturro’s questions stating that the data is all EHR data, that a hospital should have specified hard drives that hold the backup information at the hospital itself and use multiple network connections from different sources. Ms. Scaturro stated that OSHPD needs to think about the devices that connect to emergency power and have mechanisms in place so those devices can talk to each other during an emergency. Ms. Timmins announced that NFPA-99, Chapter 7 addresses network failures.

Mr. O’Connor requested more explanation on what downtime rehearsal entails. Mr. Broder answered that it depended on the specific hospital on how they practiced for system failures and he did not have a magic number on how many times a hospital should practice.
Informational and Action Item

• Explore a code requiring that a small space be designated for paper storage
• Explore requiring a designated space where patients can review their medical records electronically in the hospital but with restrictions on what the patient can see
• Explore a code requiring that emergency power be located at nurse’s stations for the computer, printer, and faxes
• Have a discussion on how devices that are connected to emergency power talk to each other during an emergency
• Review NFPA-99, Chapter 7 - all Committee Members

3. Discussion: Information Technology Network Resiliency and Redundancy

• Building Management Systems
• EHR
• Diagnostic Imaging Software

Presenter: Diana Scaturro, Bill Gow, Dave Mason, OSHPD

Discussion and public input

Mr. Gow announced that the Committee and staff need to discuss Power over Ethernet (PoE) cables and using those for emergency exit lighting. If a switch is used, that switch would have to be powered by the Life Safety Branch power source.

Ms. Scatturo articulated that staff is not only concerned about health records but the entire building system in terms of an emergency and how those systems can remain online. Mr. Gow noted there needs to be segregation between the non-essential functions and the essential ones.

Mr. Rainey added that all the modes of failure need to be reviewed and that each component of failure is unique in how it needs to be addressed to come back online.

Ms. Scatturo announced that a presentation is going to happen at the next Energy Committee meeting regarding Princeton Hospital and their microgrid system.

Clarification was requested regarding “information technology rooms not attached to a patient care area.” Mr. Mason explained that that references a technology room attached to an imaging room.

Mr. Coleman voiced that next cycle OSHPD is planning to review NCP-5.

Mr. LaBrie questioned how fire suppressants are applied in equipment rooms. Mr. Mason stated that typically they are dry fire suppressant systems.

Mr. O’Connor requested that labeling be consistent throughout the whole code.
Mr. Johnson announced that in terms of 1-hour fire rating for the technology equipment room, when emergency responder radio systems are brought in, those require a 2-hour fire rating and that the language needs to be clarified.

**Informational Item and Action Item**

- Explore a PIN (Policy Intent Notice) discussing PoE’s when they are used for emergency lighting
- Adopt the name used in the Building Code when referencing the information technology equipment room (slide 13)
- Clarify “information technology room not attached to a patient care area” (slide 14)
- Make sure that all labeling be consistent throughout the whole code
- Address, in a performance way, emergency responder systems, how they are treated in terms of fire ratings, and where they can be located

4. **Presentation: OSHPD Electronic Plan Review Update**

   **Presenter:** Richard Tannahill, OSHPD

**Discussion and public input**

Mr. Tannahill noted that there is a separate committee that is looking at the collaboration of Phase Reviews.

An interested party inquired if the plan reviewer can see all the previously approved sets when doing an ACD (Amended Construction Documents). Mr. Tannahill announced that it will not arrogate back to the original version.

Mr. Johnson advised that documentation be obtained for a period after a project is completed and make that documentation easily accessible.

**Informational Item and Action Item**

- None

5. **Discuss and Decide: Future agenda items**

   **Presenter:** Michael O’Connor, Committee Chair

**Discussion and public input**

Ms. Timmins voiced that staff will be receiving training on guided vehicles and that a memo is being converted into a PIN.

Ms. Scatturo informed the committee that CDPH (California Department of Public Health) is reviewing different classifications in terms of imagining and that topic is going to be brought back to the Committee for review.

Mr. Johnson announced that there is a BICSI conference at the end of September/October and it will discuss PoE. He requested that Committee members provide examples of technology, best practices, and what vendors are producing.
Ms. Timmins advised that the Committee receive a brief summary and review on Chapter 7 of NFPA.

An interested party wanted further discussion regarding the application of the requirements for telecommunication distribution in areas that are being renovated and not new construction.

**Informational Item and Action Item**

- Have a discussion on the change of function through equipment replacement
- Provide examples of PoE’s – all Committee Members
- Review NFPA Chapter 7
- Discuss telecommunications requirements in renovations or expansions
- Next meeting was October 23, 2019

6. **Comments from the Public/Board Members on Issues Not on This Agenda**

An interested party advised the Committee to think about infection control in terms of iPads and other technological devices.

Another interested party wanted to know how the testing, inspection, and observation forms are managed. Mr. Coleman articulated that OSHPD is working on an electronic version.

7. **Adjournment**

Michael O’Connor, Chair, adjourned the meeting at approximately 12:29 p.m.