



Hospital Inspector Recertification Program

Changes to the
Testing, Inspection and Observation
TIO Form







Tab A Project Info.

Updated Header to reflect the new Los Angeles location:



Office of Statewide Health Planning and Development

Facilities Development Division www.oshpd.ca.gov/fdd

2020 West El Camino Avenue, Suite 800 Sacramento, CA 95833 (916) 440-8300 355 South Grand Avenue, 19th Floor Los Angeles, California 9007 I (213) 897-0166

Testing, Inspection and Observation Program

2019 California Building Standards Code – OSHPD 1

This program is prepared and submitted for an OSHPD 1 project. OSHPD 1 projects include all construction and remodel projects for : general acute care hospitals, acute psychiatric hospitals, and general acute care hospitals providing only acute medical rehabilitation center services.







Tab A Project Info.

Included commonly used abbreviations.

Abbreviations:		
CAC: California Administrative Code	AAMA: American Architectural Manufacturers Association	
CBC: California Building Code	NFPA: National Fire Protection Association	
CEC: California Electrical Code	FM: FM Approval Standards	
CMC: California Mechanical Code	DPOR: Design Professional of Record	Version: R03.1







Tab B

Test.

- Included "initial/date" in Compliance Verification by IOR signature box
- Included "initial/date" in Compliance Verification by OSHPD/FDD signature box
- Removed "Performed Off-Site" Column

SECTION B NOTE: Approved agencies, individuals, and all changes to the TIO program identified, evaluated by the DPOR and approved by OSHPD prior to proceed the related work.						
Facility #: Facility Name:		Project #:		Sub #:		
	DUR	ING CONSTRUCTION DOCUMENT		DURING CONSTR	UCTION	
lndex#	REQUIRED (Select)	TESTS		RESPONSIBLE APPROVED AGENCY AND/OR INDIVIDUAL	COMPLIANCE VERIFICATION BY IOR (Initial/Date)	OSHPD/FDD USE (Initial/Date)





Tab B Test – Electrical (new).

<u>Name</u>	<u>Code Reference</u>
Isolate Power Systems – Impedance of Isolated Wiring Test	2018 NFPA 99 6.3.2.9.2.1
Emergency Stored Electrical Energy System Test	NFPA 110-2016 Section 7.6
Torque Electrical Connections	CEC 110.3(B) & 110.14(D)
Selective Coordination Study and Testing	CEC 240.12 & 700.27
Nurse call system	CEC 517.123
Arc Energy Reduction	CEC 240.67 & 240.87
Short-Circuit Current Calculations	CEC 110.24(A), 409.22, 430.99, 440.10(B)
Essential Electrical System Coordination Study	CEC 517.31(G) & 700.32
Elevator Selective Coordination Study	CEC 620.62





Tab B <u>Test – Mechanical (new).</u>

<u>Name</u>	<u>Code Reference</u>
Pre-demolition Air Flow Test and Report	CMC 407.3
Post-demolition Air Flow Test and Report	CMC 407.3

When precautionary testing and air balance is required prior to demolition work commencing and after the completion of demolition work to demonstrate that air flows to areas outside the scope of work are maintained select these tests in the TIO.







Tab C On-site Special Inspections (new)

The DPOR shall identify all specific special inspections required to be performed for the project (see Title 24, Part 1, Section 7-141(d) & (g)). On this portion of the form, the DPOR shall identify specifically which required special inspections shall be performed on-site.

S	EC	TION C	NOTE: Approved agencies, individuals, and all changes to the TIO program sha identified, evaluated by the DPOR and approved by OSHPD prior to proceeding with the related work.		
Facility #: Facility Name:		Facility Name:	Project #:		Sub #:
DURING CONSTRUCTION DOCUMENT		DURING CONSTRUCTION DOCUMENT	DURING CONSTRUCTION		
# xəpul	REQUIRED (Select)	ON-SITE SPECIAL INSPECTIONS	RESPONSIBLE APPROVED AGENCY AND/OR INDIVIDUAL (IDENTIFY SPECIAL INSPECTOR)	COMPLIANCE VERIFICATION BY IOR (Initial/Date)	OSHPD/FDD USE (Initial/Date)





Tab C On-site Special Inspections (new)

General areas of special inspection:

Foundation	Alternative Systems
Concrete	Nonstructural Components, Supports and Attachments
Masonry	Mechanical Special Inspections
Steel	Plumbing Special Inspections
Wood	Fire Protection Special Inspections
Other Structural Materials	Other Special Inspections

Note: the project may contain additional special inspections other than those listed above







Tab D Off-site Special Inspections (new)

The DPOR, prior to commencement of related fabrication/construction, shall identify all special inspections to be performed <u>off-site</u>. It is intended that the DPOR consult with the contractor and identify all fabrication/construction requiring tests which will be performed at <u>off-site</u> locations.

SECTION D NOTE: Approved agencies, individuals, and all changes to the TIO p be identified, evaluated by the DPOR and approved by OSHPD prior proceeding with the related work.					
Facility #: Facility Name:		Facility Name:	Project #:		Sub #:
DURING CONSTRUCTION DOCUMENT		DURING CONSTRUCTION DOCUMENT	DURING CONSTRUCTION		
lndex#	REQUIRED (Select)	OFF-SITE SPECIAL INSPECTIONS	RESPONSIBLE APPROVED AGENCY AND/OR INDIVIDUAL (IDENTIFY SPECIAL INSPECTOR)	COMPLIANCE VERIFICATION BY IOR (Initial/Date)	OSHPD/FDD USE (Initial/Date)







Tab D Off-site Special Inspections (new)

General areas of special inspection:

Concrete	Nonstructural Components, Supports and Attachments
Masonry	Mechanical Special Inspections
Steel	Plumbing Special Inspections
Wood	Fire Protection Special Inspections
Other Structural Materials	Other Special Inspections
Alternative Systems	

Note: the project may contain additional special inspections other than those listed above







Tab E

Required Compliance Forms (new)

The DPOR shall identify the name of all the 2019 California Energy Code Non-Residential forms required for the project (see Title 24, Part 1 Section 7-118 and 7-141(d) & (g)). This includes documentation required by the 2019 California Building Standards Code (CBSC), Title 24, Parts 2, 3, 4, 5, 6 and 9. Some documents referenced by the designer (e.g. pre-approvals, manufacturer's instructions, etc.) may require testing not identified by the CBSC, these tests shall also be referenced and included.

Instructions on which forms are required may be found on the "Instructions" tab on the Excel version of the TIO

Note: some forms may not be required to be completed in its entirety. Local AJH forms may be identified here when required.



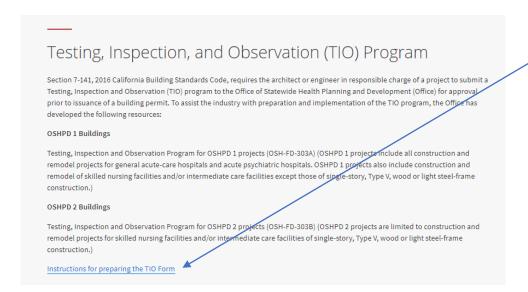




Tab E

Required Compliance Forms (continued)

- IOR will not be required to complete these forms
- IOR will be required to collect forms
- For detailed instructions on the CEC forms visit www.oshpd.ca.gov









Tab E

Required Compliance Forms (continued)

FOR MORE INFORMATION ON THE 2019 CALIFORNIA ENERGY CODE FORMS CONTACT THE ENERGY COMMISION BUILDING ENERGY EFFICIENCY STANDARDS AT:

TOLL-FREE HOT LINE AT 800-772-3300 OUTSIDE OF CALIFORNIA 916-654-5106 EMAIL AT title24@energy.ca.gov







Tab F Construction Verification

- Added "Staff and Stock"
- Added "Substantial Completion"
- Renamed "Project Completion" to "Construction Final"
- Added "Certificate of Occupancy"







Tab G Inspector of Record

 Added "to make sure responsibility for the inspection of every part of the work is assigned.

SECTION G	Inspector of Record (IOR) Responsibility		
Facility #:	Facility Name:	Project #:	Sub #:
This Section only required	when more than one IOR will share res	ponsibility on the	project.
INSPECTOR OF RECORD RESPONSIBILITIES.	Per CAC 7-145: "The Inspector shall have personal knowledge	e. obtained by continuous ins	spection of all work
	ensure that the work is in accordance with the approved const	· ·	•
	nufacturer's Installation Instructions applicable to the work sho	**	
	I, the distribution of responsibilities for the work shall be clear CAC 7-144(b). One IOR shall be assigned responsibility for "all inspection of every part of the work is assigned.		
INSPECTOR OF RECORD	SCOPE OF INSPECTION		PERFORMED
CAC 7-141 7-145 & 7-151	SCOPE OF INSPECTION		OFF-S





Tab H Plan Review Approval

- Reworded note at the top to say "NOTE: When a structural engineer has been delegated responsibility for a portion of this project his or her signature is also required. For testing, Inspection and Observation Program Instructions visit:..."
- Reworded note from "For OSHPD Use Only" to "For OSHPD Use"
- Enlarged the Signature and Date box to allow for reviewer stamp of approval
- Renamed "A", "AC" and "D" to "Approved", "Approved with Comments" and Denied"







Tab I <u>Building Permit Approval</u>

From **BUILDING PERMIT APPROVAL SECTION G Facility Name:** Project #: Sub #: NOTE: For testing, Inspection and Observation Program Instructions, visit our website: http://oshpd.ca.gov/FDD/Plan Review/TIO.html#TIO Samples of Test and Inspection Reports are: (NOT required for tests performed by laboratories approved through OPAA Program) To be provided following determination of the responsible firm(s) or individual(s). Samples shall be submitted to and approved by the Office, prior to proceeding with the work that requires tests or special inspections. Not applicable. Project has no required tests or special inspections. Required test and inspection reports shall be prepared and submitted to OSHPD/FDD within days of the completion of all tests and inspections. If not designated, all reports shall be submitted to the Office within 15 calendar days. In addition to the preprinted tests and special inspections identified on this form, this program includes additional tests and special inspections as Other Tests Other Special Inspections See Attachment Verification that approved test and inspection agencies are objective, competent and independent as required by the CBC 2016 Section Verification of independence and acceptance of test and inspection agencies by Registered Design Professional (RDP) in responsible charge In accordance with the CAC Section 7-141. Testing agency qualification for approval or approval of testing agencies through OPAA program. Inspection agency qualification for approval This program has been prepared and submitted for an OSHPD 1 project. OSHPD 1 projects include all construction and remodel projects for general acute care hospitals and acute psychiatric hospitals. OSHPD 1 projects also include construction and remodel of skilled nursing facilities and/or intermediate care facilities except those of single-story, Type V, wood or light steel-frame construction.

To

ECTION I BUILDING PERMIT APPROVAL			
Facility #:	Facility Name:	Project #:	Sub #:
NOTE: For te	esting, Inspection and Observation Progr	ram Instructions visit: www.oshpd.ca.go	ov
	tion Reports are: (NOT required for test pe		n OPAA Program
	or approval or approval of testing agencies th	rough OPAA program.	
Attached			
	letermination of the responsible firm(s) or indiv		pprovea by the
	with the work that requires test or special insp as no required test or special inspections	Decuons.	
	ared and submitted for an OSHPD 1 projections	ct OSHPD 1 projects include all construc	tion and remod
	projects for general acute care hospitals a		aon ana romoa
	structural engineer delegated responsibility for	ed for structural tests and special inspections or the design and administration of construction	
aspects (when such delegation All test and special inspection)	structural engineer delegated responsibility for thas been made). reports shall be submitted to the IOR, hospital	or the design and administration of construction	n of the structura
aspects (when such delegation All test and special inspection engineer by the testing agency	structural engineer delegated responsibility for has been made).	or the design and administration of construction of construction owner, architect in responsible charge, and the lays of the test or special inspection.	n of the structura
aspects (when such delegation All test and special inspection engineer by the testing agency Special inspection reports shall All reports shall clearly state wh	structural engineer delegated responsibility for has been made). reports shall be submitted to the IOR, hospital per CAC 7-149(a) within seven (7) calendar of	or the design and administration of construction of construction owner, architect in responsible charge, and the lays of the test or special inspection. The special inspection of the construction of the con	n of the structura

Submitted by:





Tab I <u>Building Permit Approval (continued)</u>

From	То
Architect/Engineer of Record (Print Name) Professional License # Architect/Engineer of Record (Signature) Date	Architect/Engineer of Record (Print Name) Professional License # Architect/Engineer of Record (Signature) Date FOR OSHPD USE
FOR OSHPD USE ONLY	OSHPD TI&O Program Approval:
OSHPD TI&O Program Approval: Name Date A AC D	Signature Date APPROVED APPROVED DENIED WITH COMMENTS
Comments:	Comments (if Approved with comments or Denied is checked the following comments shall be resolved by the designer prior to proceeding with the related construction):

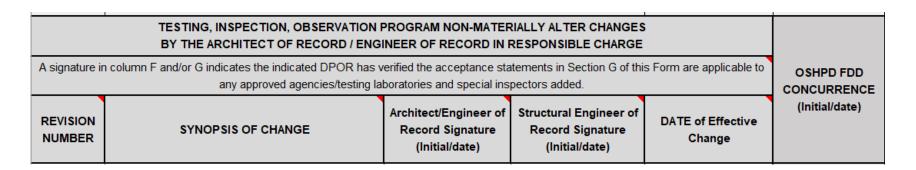




Tab J Summary of Changes

• "X" is no longer acceptable when identifying the DPOR has verified the acceptance statements. Reworded to read as follows:

"A signature in column F and/or G indicates the indicated DPOR has verified the acceptance statements in Section G of this Form are applicable to any approved agencies/testing laboratories and special inspectors added."







Tab J Summary of Changes

- Reworded "Revision #" to "Revision Number"
- Added "Initial/date" to the architect/engineer of record signature box
- Added "Initial/date" to the Structural Engineer of record signature box
- Reworded "DATE" to "DATE of Effective Change"
- Added "Initial/date" to the OSHPD FDD Concurrence signature box







