

**Introduced by Senator Alquist**February 18, 2011

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An act to amend Sections 130060 and 130064 of, and to add Sections 130065.1 and 130066 to, the Health and Safety Code, relating to health facilities.

## LEGISLATIVE COUNSEL'S DIGEST

SB 630, as introduced, Alquist. Hospitals: seismic safety.

(1) Existing law provides for the licensure of health facilities, including general acute care hospitals, by the State Department of Public Health.

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 authorizes the office to assess an application fee for the review of facilities design and construction, and requires that full and complete plans be submitted to the office for review and approval.

Existing law requires that, 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 be used only for nonacute care hospital purposes, except that the office may grant a 5-year extension of that deadline, under prescribed circumstances, for both structural and nonstructural requirements. Existing law also authorizes the office to grant an additional extension if the hospital building meets designated criteria, including appropriately retrofitting the facility, as specified.

This bill would, among other things, revise the conditions that a hospital owner would be required to meet in order for the office to grant an additional extension. This bill would authorize the department to

revoke the extension if the construction is abandoned or suspended for at least 6 months, except as specified.

(2) Existing law authorizes the office to grant a 3-year extension of the 5-year extension in lieu of the previously described additional extension under specified conditions. Existing law also authorizes a grant of an additional extension of up to 2 years if specified criteria are met. Existing law requires a hospital owner that applies for this extension to pay to the office a fee for reporting requirements for this extension.

This bill would repeal the office’s authority to grant the additional extension of up to 2 years.

This bill would require a hospital that has an SPC-1 building to post a specified sign at all public entrances to the building and certify to the office that it has complied with specified requirements. It would also subject a hospital, that fails to post pursuant to the requirement, to civil penalties.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

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

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

3 130060. (a) (1) After January 1, 2008, any general acute care  
4 hospital building that is determined to be a potential risk of collapse  
5 or pose significant loss of life shall only be used for nonacute care  
6 hospital purposes. A delay in this deadline may be granted by the  
7 office upon a demonstration by the owner that compliance will  
8 result in a loss of health care capacity that may not be provided  
9 by other general acute care hospitals within a reasonable proximity.  
10 In its request for an extension of the deadline, a hospital shall state  
11 why the hospital is unable to comply with the January 1, 2008,  
12 deadline requirement.

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

16 (A) Provide public notice of a hospital’s request for an extension  
17 of the deadline. The notice, at a minimum, shall be posted on the  
18 office’s Internet Web site, and shall include the facility’s name  
19 and identification number, the status of the request, and the  
20 beginning and ending dates of the comment period, and shall advise

1 the public of the opportunity to submit public comments pursuant  
2 to subparagraph (C). The office shall also provide notice of all  
3 requests for the deadline extension directly to interested parties  
4 upon request of the interested parties.

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

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

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

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

31 (3) To receive the five-year extension, a single building  
32 containing all of the basic services or at least one building within  
33 the contiguous grouping of hospital buildings shall have obtained  
34 a building permit prior to 1973 and this building shall be evaluated  
35 and classified as a nonconforming, Structural Performance  
36 Category-1 (SPC-1) building. The classification shall be submitted  
37 to and accepted by the Office of Statewide Health Planning and  
38 Development. The identified hospital building shall be exempt  
39 from the requirement in subdivision (a) until January 1, 2013, if  
40 the hospital agrees that the basic service or services that were

1 provided in that building shall be provided, on or before January  
2 1, 2013, as follows:

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

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

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

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

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

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

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

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

1 (f) (1) A hospital that has received an extension of the January  
2 1, 2008, deadline pursuant to subdivision (a) or (b) may request  
3 an additional extension of up to two years for a hospital building  
4 that it owns or operates and that meets the criteria specified in  
5 paragraph (2), (3), or ~~(5)~~ (6).

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

8 (A) The hospital building is under construction at the time of  
9 the request for extension under this subdivision and the purpose  
10 of the construction is to meet the requirements of subdivision (a)  
11 to allow the use of the building as a general acute care hospital  
12 building after the extension deadline granted by the office pursuant  
13 to subdivision (a) or (b).

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

20 (C) The hospital received a building permit for the construction  
21 described in subparagraph (A) at least two years prior to the  
22 applicable deadline for the ~~building~~. *building or, if the building*  
23 *failed to be reclassified as an SPC-2 building pursuant to*  
24 *paragraph (6), at least one year prior to the applicable deadline.*

25 (D) The hospital submitted a construction timeline at least two  
26 years prior to the applicable deadline for the building demonstrating  
27 the hospital's intent to meet the applicable *deadline or, if the*  
28 *building failed to be reclassified as an SPC-2 building pursuant*  
29 *to paragraph (6), at least one year prior to the deadline.* The  
30 timeline shall include all of the following:

31 (i) The projected construction start date.

32 (ii) The projected construction completion date.

33 (iii) Identification of the contractor.

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

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

1 (A) The hospital building is owned by a health care district that  
2 has, as owner, received the extension of the January 1, 2008,  
3 deadline, but where the hospital is operated by an unaffiliated  
4 third-party lessee pursuant to a facility lease that extends at least  
5 through December 31, 2009. The district shall file a declaration  
6 with the office with a request for an extension stating that, as of  
7 the date of the filing, the district has lacked, and continues to lack,  
8 unrestricted access to the subject hospital building for seismic  
9 planning purposes during the term of the lease, and that the district  
10 is under contract with the county to maintain hospital services  
11 when the hospital comes under district control. The office shall  
12 not grant the extension if an unaffiliated third-party lessee will  
13 operate the hospital beyond December 31, 2010.

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

20 (C) The hospital received a building permit for the construction  
21 described in subparagraph (B) by December 31, 2011.

22 (D) The hospital submitted, by December 31, 2011, a  
23 construction timeline for the building demonstrating the hospital's  
24 intent and ability to meet the deadline of December 31, 2014. The  
25 timeline shall include all of the following:

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

29 (E) The hospital building is under construction at the time of  
30 the request for the extension, the purpose of the construction is to  
31 meet the requirements of subdivision (a) to allow the use of the  
32 building as a general acute care hospital building after the extension  
33 deadline granted by the office pursuant to subdivision (a) or (b),  
34 and the hospital is making reasonable progress toward meeting  
35 the timeline set forth in subparagraph (D).

36 (F) The hospital granted an extension pursuant to this paragraph  
37 shall submit an additional status report to the office, equivalent to  
38 that required by subdivision (c) of Section 130061, no later than  
39 June 30, 2013.

1 (4) An extension granted pursuant to paragraph (3) shall be  
2 applicable only to the health care district applicant and its affiliated  
3 hospital while the hospital is operated by the district or an entity  
4 under the control of the district.

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

7 (A) The hospital owner submitted to the office, prior to June  
8 30, 2009, a request for review using ~~current~~ computer modeling  
9 utilized by the office *pursuant to regulations in effect on or prior*  
10 *to June 30, 2009*, and based upon software developed by the  
11 Federal Emergency Management Agency, referred to as Hazards  
12 US, and the building was deemed SPC-1 after that review.

13 (B) The hospital building plans for the building are submitted  
14 to the office and deemed ready for review by the office prior to  
15 July 1, 2010. The hospital shall indicate, upon submission of its  
16 plans, the SPC-1 building or buildings that shall be retrofitted or  
17 replaced to meet the requirements of this section as a result of the  
18 project.

19 (C) The hospital receives a building permit from the office for  
20 the construction described in subparagraph (B) prior to January 1,  
21 2012.

22 (D) The hospital submits, prior to January 1, 2012, a  
23 construction timeline for the building demonstrating the hospital's  
24 intent and ability to meet the applicable deadline. The timeline  
25 shall include all of the following:

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

29 (E) The hospital building is under construction at the time of  
30 the request for the extension, the purpose of the construction is to  
31 meet the requirements of subdivision (a) to allow the use of the  
32 building as a general acute care hospital building after the extension  
33 deadline granted by the office pursuant to subdivision (a) or (b),  
34 and the hospital is making reasonable progress toward meeting  
35 the timeline set forth in subparagraph (D).

36 (F) The hospital owner completes construction ~~such that~~ *in order*  
37 *for the hospital meets to meet* all the criteria to enable the office  
38 to issue a certificate of occupancy by the applicable deadline for  
39 the building.

1 (6) The office may grant the additional extension if all of the  
2 following conditions are met:

3 (A) The hospital owner provides documentation to the office by  
4 January 20, 2012, stating the owner's intent to comply with the  
5 January 1, 2013, deadline requirements described in subdivisions  
6 (a) and (b) by using computer modeling utilized by the office  
7 pursuant to regulations adopted after June 30, 2009, but before  
8 December 30, 2010, and based upon Hazards US.

9 (B) The hospital owner submits to the office by July 1, 2012, a  
10 request for review using computer modeling utilized by the office  
11 pursuant to regulations adopted after June 30, 2009, but before  
12 December 30, 2010, and based upon Hazards US, and the hospital  
13 plans to mitigate targeted structural deficiencies to meet the SPC-2  
14 requirements.

15 (C) The hospital building plans for the building are submitted  
16 to the office and deemed ready for review by the office prior to  
17 January 1, 2012. The hospital shall indicate, upon submission of  
18 its plans, the SPC-1 building or buildings that shall be retrofitted  
19 or replaced to meet the requirements of this section as a result of  
20 the project. The hospital shall also provide a proposed construction  
21 timeframe to complete the project once the permit is issued. The  
22 construction timeframe shall be approved by the office and shall  
23 only include the amount of time that is reasonably necessary to  
24 complete the construction required to meet the SPC-2 requirement.

25 (D) The hospital receives a building permit from the office for  
26 the construction described in subparagraph (B) prior to January  
27 1, 2013.

28 (E) The hospital provides documentation upon application  
29 stating that the purpose of the construction is to meet the  
30 requirements of subdivision (a), to allow the use of the building  
31 as a general acute care hospital building after the extension  
32 deadline granted by the office pursuant to subdivision (a) or (b),  
33 and to make reasonable progress toward meeting the timeline set  
34 forth in subparagraph (C).

35 (F) The additional extension granted by the office pursuant to  
36 this paragraph may not exceed the lesser of two years or the  
37 amount of time that is reasonably necessary to complete the  
38 construction that is required for the building to meet the SPC2  
39 requirement. The extension may be adjusted for delays in

1 construction that are beyond the control of the hospital, but not  
2 exceed a total of 24 months beyond 2013.

3 (G) The hospital owner completes construction in order for the  
4 hospital to meet all the criteria to enable the office to issue a  
5 certificate of occupancy by the applicable deadline for the building.

6 ~~(6)~~

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

9 ~~(7)~~

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

16 (g) All submissions to the office to obtain an extension pursuant  
17 to subdivision (f) and Section 130061.5 and to comply with the  
18 requirements of Section 130061 shall be complete and accurate.  
19 In addition to the penalty described in subdivision (g) of Section  
20 130064, the office shall deny or revoke an extension pursuant to  
21 this chapter if the office determines that the information submitted  
22 had a material effect on the granting of the extension. A hospital  
23 that is denied an extension pursuant to this subdivision may appeal  
24 the denial to the Hospital Building Safety Board.

25 SEC. 2. Section 130064 of the Health and Safety Code is  
26 amended to read:

27 130064. (a) In lieu of the extension described in subdivision  
28 (f) of Section 130060, the office may grant an extension to a  
29 general acute care hospital pursuant to ~~either~~ subdivision (c) ~~or~~ (f)  
30 if the hospital building will not meet the seismic safety standards  
31 of that section by January 1, 2013, due to a local planning delay.

32 (b) When applying for an extension under this section, the owner  
33 of the general acute care hospital shall submit to the office  
34 documentation that includes at least all of the following:

35 (1) The original schedule of the project or projects as had been  
36 originally anticipated.

37 (2) The schedule of the project or projects as currently projected.

38 (3) A timeline for the submission of documents to the local  
39 planning authority or jurisdiction.

1 (4) Documentation that the local planning authority for the  
2 project and for the enabling phases of the project does not grant  
3 approvals prior to November 1, 2010, where the hospital had  
4 originally filed the local application prior to January 1, 2008.

5 (5) A proposed construction timeframe demonstrating the  
6 completion of the project once the permit is issued. The  
7 construction timeframe shall be approved by the office and shall  
8 only include the amount of time that is reasonably necessary to  
9 complete the construction required to meet the seismic safety  
10 requirements.

11 (c) The office may grant an extension, in full one-year  
12 increments, but no longer than three consecutive years, that  
13 compensates for delays determined pursuant to subdivision (d).

14 (d) The office shall conduct a comprehensive review of the  
15 schedule for the project or projects according to criteria specified  
16 in this section. This review shall encompass the project or projects  
17 under the jurisdiction of the office, as well as other project phases  
18 not under the jurisdiction of the office. The office shall consider  
19 the cumulative effect of local approval timelines for all elements  
20 of the project or projects, inclusive of changes in scope or sequence  
21 of the project or projects required by the local planning process.  
22 The office may grant extensions based on an evaluation of each  
23 of the following circumstances:

24 (1) Where the local planning authority approvals have delayed  
25 or will delay the construction start date of the project or projects.

26 (2) Where the local conditions of approval on a project or  
27 projects extend the duration beyond the originally anticipated  
28 construction completion date.

29 (3) Where the cumulative effect of delays on the project or  
30 projects creates additional construction delays due to local seasonal  
31 weather impact requirements of the local planning authority.

32 (4) Construction related to the seismic retrofit or replacement  
33 project has begun by January 1, 2013.

34 (5) The project or projects were submitted for review by the  
35 department no later than January 1, 2009.

36 (6) The project or projects have received a building permit from  
37 the department no later than January 1, 2012.

38 (e) Every six months after the approval of the extension, the  
39 hospital owner shall report to the office on the status of the project

1 or projects, demonstrating that it is making reasonable progress  
2 toward meeting the construction timeline.

3 ~~(f) The office may grant an additional extension of up to two~~  
4 ~~years in addition to the extension granted pursuant to subdivisions~~  
5 ~~(e) and (d) only if the project or projects meet all of the following~~  
6 ~~criteria:~~

7 ~~(1) A matrix of buildings at the hospital that identifies~~  
8 ~~compliance of each building to the standards required by Section~~  
9 ~~130065 at the completion of the project or projects.~~

10 ~~(2) The construction timelines submitted pursuant to subdivision~~  
11 ~~(a) were determined to go beyond three years from the date the~~  
12 ~~building permit was issued.~~

13 ~~(3) Acute care services will not be provided in any SPC-1~~  
14 ~~building at any time during the extension.~~

15 ~~(4) The hospital demonstrates that it has, and maintains~~  
16 ~~throughout the extension, life safety systems in all acute care~~  
17 ~~patient care areas that do not depend on, and are not routed through,~~  
18 ~~an SPC-1 building.~~

19 ~~(5) The hospital either demonstrates that the SPC-1 building~~  
20 ~~does not pose a structural risk to an adjoining hospital building~~  
21 ~~that is used for acute care services or mitigates the risk in~~  
22 ~~accordance with a deadline described in subdivision (f) of Section~~  
23 ~~130060 that the office determines will best protect patient safety.~~

24 ~~(g)~~

25 ~~(f) The office may revoke an extension granted pursuant to this~~  
26 ~~section for any hospital building where the work of construction~~  
27 ~~is abandoned or suspended for a period of at least six months,~~  
28 ~~unless the hospital demonstrates that the abandonment or~~  
29 ~~suspension was caused by factors beyond its control.~~

30 ~~(h)~~

31 ~~(g) The office may revoke an extension granted pursuant to this~~  
32 ~~section if it is determined that any information submitted pursuant~~  
33 ~~to this section was falsified in any manner by the hospital or if the~~  
34 ~~hospital fails to meet any of the criteria or conditions specified in~~  
35 ~~this section.~~

36 ~~(i)~~

37 ~~(h) Regulatory submissions made by the office to the California~~  
38 ~~Building Standards Commission pursuant to this section shall be~~  
39 ~~deemed, and shall be adopted as, emergency regulations.~~

40 ~~(j)~~

1 (i) The hospital owner that applies for an extension pursuant to  
 2 this section shall pay to the office an additional fee, to be  
 3 determined by the office, sufficient to cover the additional cost  
 4 incurred by the office for maintaining all reporting requirements  
 5 established under this section, including, but not limited to, the  
 6 costs of reviewing and verifying the extension documentation  
 7 submitted pursuant to this section. This additional fee shall not  
 8 include any cost for review of the plans or other duties related to  
 9 receiving a building or occupancy permit.

10 ~~(k)~~

11 (j) A hospital denied an extension pursuant to this section may  
 12 appeal the denial to the Hospital Building Safety Board.

13 SEC. 3. Section 130065.1 is added to the Health and Safety  
 14 Code, to read:

15 130065.1. (a) On or before January 1, 2016, a general acute  
 16 care hospital shall report all of the following to the office:

17 (1) Current configuration of all buildings on its campus,  
 18 including each structural performance category.

19 (2) The number of acute care beds and the basic and  
 20 supplemental services provided in each building.

21 (3) Identification of each building that needs to meet the  
 22 structural and nonstructural requirements of Section 130065.

23 (4) If a hospital building is under construction, or beginning  
 24 construction, to meet the requirements of Section 130060,  
 25 130061.5, 130064, or 130065 the hospital shall provide project  
 26 numbers for each building.

27 (b) (1) On or before January 1, 2020, a hospital shall submit a  
 28 master plan for all the buildings that are subject to subdivision (a)  
 29 of Section 130065 that the hospital intends to rebuild or replace  
 30 by January 1, 2030. The hospital master plan shall identify at least  
 31 all of the following:

32 (A) Each building that is subject to subdivision (a) of Section  
 33 130065.

34 (B) The current plan to rebuild or replace each building with  
 35 buildings that would be in compliance with subdivision (a) of  
 36 Section 130065, including all structural and nonstructural  
 37 requirements.

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

- 1 (D) The location for any new building or buildings, including,  
2 but not limited to, whether the owner has received a permit for  
3 that location.
- 4 (E) A copy of the preliminary design for the new building or  
5 buildings.
- 6 (F) The number of beds available for acute care use in each new  
7 building.
- 8 (G) The timeline for completed plan submission.
- 9 (H) The proposed construction timeline.
- 10 (I) The proposed cost at the time of submission.
- 11 (J) A copy of any records indicating the hospital governing  
12 board's approval of the hospital master plan.
- 13 (2) On or before January 1, 2023, the hospital owner submits  
14 to the office a building plan for each building that is deemed ready  
15 for review by the office.
- 16 (3) On or before January 1, 2025, the hospital owner receives  
17 a building permit to begin construction for each building that the  
18 owner intends to replace or retrofit pursuant to the master plan.
- 19 (4) Within six months of receipt of the building permit, the  
20 hospital owner submits a construction timeline that identifies at  
21 least all of the following:
- 22 (A) Each building that is subject to subdivision (a) of Section  
23 130065.
- 24 (B) The project number or numbers for replacement of each  
25 building.
- 26 (C) The projected construction start date or dates and projected  
27 construction completion date or dates.
- 28 (D) The building or buildings to be removed from acute care.
- 29 (E) The estimated cost of construction.
- 30 (F) The name of the contractor.
- 31 (5) Every six months thereafter, the hospital owner shall report  
32 to the office on the status of the project, including any delays or  
33 circumstances that could materially affect the estimated completion  
34 date.
- 35 (c) A hospital that has not submitted a report pursuant to this  
36 section shall be assessed a civil penalty of ten dollars (\$10) per  
37 licensed acute care bed per day, but in no case to exceed one  
38 thousand dollars (\$1,000) per day for each SPC-1 building not in  
39 compliance with this section until it has complied with this section.  
40 These civil penalties shall be deposited into the Facilities Penalties

1 Account established pursuant to Section 130066. A hospital  
2 assessed a civil penalty pursuant to this section may appeal the  
3 assessment to the Hospital Building Safety Board.

4 (d) The office shall make the information required by  
5 subdivisions (a) and (b), available on its Internet Web site within  
6 90 days of receipt of this information.

7 SEC. 4. Section 130066 is added to the Health and Safety Code,  
8 to read:

9 130066. (a) A hospital that complies with Section 130060 may  
10 post a sign at all public entrances to the hospital building that  
11 states:

12  
13 “THE STATE OF CALIFORNIA HAS DETERMINED THAT  
14 THIS HOSPITAL FACILITY HAS COMPLIED WITH  
15 APPLICABLE STATE SEISMIC SAFETY LAWS FOR  
16 HOSPITALS.”

17  
18 (b) A hospital that has an SPC-1 building shall post a sign at all  
19 public entrances to the building that states:

20  
21 “THE STATE OF CALIFORNIA HAS DETERMINED THAT  
22 THIS HOSPITAL HAS BUILDING(S) THAT ARE AT RISK  
23 OF COLLAPSE IN A MAJOR EARTHQUAKE. The plan of  
24 compliance for this hospital is available for your review at the  
25 hospital’s Internet Web site, (insert Internet Web site address). To  
26 receive additional information regarding hospital seismic safety,  
27 go to [www.oshpd.ca.gov](http://www.oshpd.ca.gov).”

28  
29 (c) All signs posted pursuant to subdivision (a) or (b) shall be  
30 posted in a conspicuous place at all public entrances of the building,  
31 and shall be not less than five inches by seven inches in size and  
32 be printed in no less than 30-point bold type.

33 (d) The plan of compliance required to be publicly available in  
34 subdivision (b) is the reporting specified in subdivision (c) of  
35 Section 130061.

36 (e) By February 1, 2012, each hospital that has an SPC-1 building  
37 shall certify in writing to the office that it has complied with  
38 subdivisions (b), (c), and (d). Failure to post the sign required in  
39 subdivision (b) shall result in the hospital being assessed a civil  
40 penalty of ten dollars (\$10) per licensed acute care bed per each

1 day that the hospital fails to post the sign required in subdivision  
2 (b), but in no case to exceed one thousand dollars (\$1,000) per day  
3 for each SPC-1 building.

4 (f) The moneys from these civil penalties shall be deposited  
5 into the Facilities Penalties Account which is hereby established  
6 within the Hospital Building Fund established pursuant to Section  
7 129795. A hospital assessed a civil penalty pursuant to this section  
8 may appeal the assessment to the Hospital Building Safety Board.  
9 Notwithstanding Section 129795, moneys in the account are not  
10 continuously appropriated pursuant to that section, and shall be  
11 available for expenditure only upon appropriation by the  
12 Legislature in the annual Budget Act or other measure.

13 (g) A violation of this section shall not be subject to Section  
14 129998.

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