



May 15, 2023

Ms. Lee Finney  
Chair of the Board of Directors  
Mendocino Coast Healthcare District  
700 River Drive  
Fort Bragg, CA 95437

Project: **Mendocino Coast Healthcare District (#10301) | Operational Plan**  
Project No.: 18000.00

Dear Lee,

We understand you would like an explanation for the reasoning and requirements behind why the existing Mendocino Coast District Hospital needs to be brought up to code required seismic compliance as defined by State Law Senate Bill 1953 (SB1953). Driven by historical experience and public concern regarding the availability of health care following a natural disaster, the state of California enacted this law to ensure continued hospital operations following a large earthquake. Triggered by the 1971 San Fernando Valley earthquake, which destroyed a number of hospitals, the California legislature passed the original Alfred E. Alquist Hospital Facilities Seismic Safety Act in 1973. After determining that many hospitals were not complying with the Seismic Safety Act, the legislature enacted SB1953 creating various levels of seismic compliance and setting a deadline for compliance with the law. This law currently requires compliance to bring your hospital up to the minimum requirements by January 1, 2030. Specifically, the law specifies that “no later than January 1, 2030, owners of all acute-care inpatient hospitals shall either:

- A. Demolish, replace, or change to non-acute care use all hospital buildings not in substantial compliance with the regulations and standards developed by the office pursuant to the Alfred E. Alquist Hospital Facilities Seismic Safety Act and this act.
- B. Seismically retrofit all acute-care inpatient hospital buildings so that they are in substantial compliance with the regulations and standards developed by the office pursuant to the Alfred E. Alquist Hospital Facilities Seismic Safety Act and this act.”

To specifically identify the required seismic improvements, the following is an extract from the California Administrative Code showing the required timeline of the SPC and NPC upgrades.

Per Chapter 6 Section 2.5.3 the following are the SPC required dates for each required upgrade:

### 2.5.3 Final Evaluation

The final evaluation will place the building in the appropriate the [SPC](#) (Table 2.5.3), based on a review of the qualitative and quantitative results of the procedures and the list of deficiencies. In general, an unmitigated "false" answer to an evaluation statement will lower the [SPC](#) of the Building. A "false" evaluation statement may be considered mitigated if the building, element or component is justified using the procedure outlined in the evaluation statement, or the effects of the condition are incorporated in the overall evaluation, as described in [Section 2.5.2.2](#). Alternatively, the [SPC](#) rating of a building may be assigned by the [Office](#) on the basis of a collapse probability assessment performed in accordance with [Section 1.4.5.1.2](#).

TABLE 2.5.3—[STRUCTURAL PERFORMANCE CATEGORIES \(SPC\)](#)

<a href="#">SPC</a>	DESCRIPTION
<a href="#">SPC 1</a>	Buildings posing significant risk of collapse and a danger to the public. These buildings must be brought up to the <a href="#">SPC 2</a> level by January 1, 2008, or be removed from acute care service. Where the <a href="#">Office</a> has performed a collapse probability assessment, buildings with <a href="#">Probability of Collapse</a> greater than 1.20% shall be placed in this category.
<a href="#">SPC 2</a>	Buildings in compliance with the pre-1973 <i>California Building Standards Code</i> or other applicable standards, but not in compliance with the structural provisions of the Alquist Hospital <a href="#">Facilities</a> Seismic Safety Act. These buildings do not significantly jeopardize life but may not be repairable or functional following strong ground motion. These buildings must be brought into compliance with the structural provisions of the Alquist Hospital <a href="#">Facilities</a> Seismic Safety Act, its regulations or its <a href="#">retrofit</a> provisions by January 1, 2030, or be removed from acute care service. Where the <a href="#">Office</a> has performed a collapse probability assessment, buildings with <a href="#">Probability of Collapse</a> less than or equal to 1.20% shall be placed in this category.
<a href="#">SPC 3</a>	Buildings in compliance with the structural provisions of the Alquist Hospital <a href="#">Facilities</a> Seismic Safety Act, utilizing steel moment-resisting frames in <a href="#">regions</a> of high seismicity as defined in <a href="#">Section 4.2.10</a> and constructed under a permit issued prior to October 25, 1994. These buildings may experience structural damage which does not significantly jeopardize life but may not be repairable or functional following strong ground motion. Buildings in this category will have been constructed or reconstructed under a <a href="#">building permit</a> obtained through OSHPD. These buildings may be used to January 1, 2030, and beyond.
<a href="#">SPC 4</a>	Buildings in compliance with the structural provisions of the Alquist Hospital <a href="#">Facilities</a> Seismic Safety Act, but may experience structural damage which may inhibit ability to provide services to the public following strong ground motion. Buildings in this category will have been constructed or reconstructed under a <a href="#">building permit</a> obtained through OSHPD. These buildings may be used to January 1, 2030, and beyond.
<a href="#">SPC-4D</a>	<i>Nonconforming <a href="#">hospital buildings</a> satisfying the requirements of <a href="#">Section 1.4.5.1.3</a> and the <a href="#">California Existing Building Code</a> Sections 303A.3.4.5, 501A.3.1 and 501.A.3.2 or equivalent provisions in later editions of the CEBC. These buildings may experience structural damage which may inhibit ability to provide services to the public following strong ground motion. These buildings may be used to January 1, 2030, and beyond.</i>
<a href="#">SPC 5</a>	Buildings in compliance with the structural provisions of the Alquist Hospital <a href="#">Facilities</a> Seismic Safety Act, and reasonably capable of providing services to the public following strong ground motion. Buildings in this category will have been constructed or reconstructed under a <a href="#">building permit</a> obtained through OSHPD. These buildings may be used without restriction to January 1, 2030, and beyond.

(End of Section)

Per Chapter 6 Section 11.1 the following are the NPC required dates for each required upgrade:

**11.1 Nonstructural Performance Categories**

Each building shall be assigned a [Nonstructural Performance Category \(NPC\)](#), based upon the degree of anchorage and bracing of selected nonstructural elements and systems. This includes architectural, mechanical, electrical and [hospital equipment](#) in addition to associated conduit, ductwork, piping and machinery. NPCs are defined in Table 11.1.

TABLE 11.1—[NONSTRUCTURAL PERFORMANCE CATEGORIES](#)

TIMEFRAMES	<a href="#">NONSTRUCTURAL PERFORMANCE CATEGORY</a> <sup>1</sup>	DESCRIPTION
	<a href="#">NPC 1</a>	Buildings with <a href="#">equipment</a> and systems not meeting the bracing and anchorage requirements of any other <a href="#">NPC</a> .
January 1, 2002	<a href="#">NPC 2</a>	The following systems are braced or anchored in accordance with Part 2, <a href="#">Title 24</a> : <sup>1</sup> <ul style="list-style-type: none"> <li>• <a href="#">communications systems</a>,</li> <li>• <a href="#">emergency power supply</a>,</li> <li>• <a href="#">bulk medical gas systems</a>,</li> <li>• <a href="#">fire alarm systems</a> and</li> <li>• emergency lighting <a href="#">equipment</a> and signs in the means of egress.</li> </ul>
January 1, 2024 (SDC F), January 1, 2030 (SDC D),	<a href="#">NPC 3</a>	The building meets the criteria for <a href="#">NPC "2"</a> and in <a href="#">critical care areas</a> , clinical laboratory service spaces, pharmaceutical service spaces, radiological service spaces, and central and sterile supply areas, the following components meet the bracing and anchorage requirements of Part 2, <a href="#">Title 24</a> : <sup>2</sup> <ul style="list-style-type: none"> <li>• "Nonstructural components," listed in the 1995 CBC, Part 2, <a href="#">Title 24</a>, Table 16A-0.</li> </ul> <p><b>Exceptions:</b></p> <ol style="list-style-type: none"> <li>1. Lateral bracing of suspended ceiling systems may be omitted in rooms with a floor area less than 300 square feet, provided the room is not an intensive care or coronary care unit patient room, angiography laboratory, cardiac catheterization laboratory, delivery room, operating room or post-operative recovery room. For rooms with a floor area greater than 300 square feet, OSHPD pre-approved standard details may be used.</li> <li>2. Wall or floor-mounted cabinets, shelves, shelving units, file cabinets, and/or storage racks and rolling carts, unless these components are in a location where they could fall, collapse, or fail in the patient care</li> </ol>

		<p>vicinity as defined in Article 517.2 of the CEC, or could block a required means of egress.</p> <ul style="list-style-type: none"> <li>• "<a href="#">Equipment</a>," as listed in the 1995 CBC, Part 2, <a href="#">Title 24</a>, Table 16A-0, "<a href="#">Equipment</a>," including <a href="#">equipment</a> in the physical plant that service these areas.</li> </ul> <p><b>Exceptions:</b></p> <ol style="list-style-type: none"> <li>1. Seismic restraints need not be provided for cable trays, conduit and HVAC ducting. Seismic restraints may be omitted from piping systems, provided that an approved method of preventing release of the contents of the piping system in the event of a break is provided.</li> <li>2. Elevator(s) need not comply with these requirements.</li> <li>3. Tanks and vessels are connected to the building systems with flexible connectors capable of accommodating a minimum of 12 inches of movement in any direction and not be dislodged from supports.</li> </ol> <ul style="list-style-type: none"> <li>• Fire sprinkler systems comply with the bracing and anchorage requirements of NFPA 13, 1994 edition, or subsequent applicable standards.</li> </ul>
<p>January 1, 2030</p>	<p><a href="#">NPC</a> 4D Levels 1, 2, or 3</p>	<p>The building meets the criteria for <a href="#">NPC</a> "3," and for systems listed in Levels 1 to 3 below, meets the bracing and anchorage requirements of Part 2, <a href="#">Title 24</a>.<sup>2</sup></p> <ol style="list-style-type: none"> <li>1. Level 1 includes all systems and <a href="#">equipment</a> required to comply with <a href="#">NPC</a>-3. An Operational Plan to repair and bring all systems and services back online, or to provide them in an alternative manner, is filed with the <a href="#">Office</a> in accordance with <a href="#">Section 11.2.3</a>.</li> <li>2. Level 2 includes Level 1 and all services and utilities from the source to Level 1 areas necessary to accommodate continuation of operations after an event. These services are anchored and braced, and shall include elevator(s) selected to provide service to patient, surgical, obstetrical, and ground floors during interruption of normal power needed, to meet the structural requirements of Part 2, <a href="#">Title 24</a>. An Operational Plan to repair and bring all other systems and services back online, or to provide them in an alternative manner, is filed with the <a href="#">Office</a> in accordance with <a href="#">Section 11.2.3</a>.</li> <li>3. Level 3 includes Level 2, and all systems and <a href="#">equipment</a> are anchored and braced so that additional services, as determined by the hospital in its Operational Plan, are functional and available to</li> </ol>

		the public after a seismic event. The Operational Plan to repair and bring all other systems and services back online, or to provide them in an alternative manner, is filed with the <a href="#">Office</a> in accordance with <a href="#">Section 11.2.3</a> .
January 1, 2030	<a href="#">NPC 4</a>	The building meets the criteria for <a href="#">NPC "3"</a> and all architectural, mechanical, electrical systems, components and <a href="#">equipment</a> , and <a href="#">hospital equipment</a> including all elevator(s) meet the bracing and anchorage requirements of Part 2, <a href="#">Title 24</a> . <sup>2</sup> This category is for classification purposes of the <a href="#">Office</a> of Emergency Services.
January 1, 2030	<a href="#">NPC 5</a>	The building meets the criteria for <a href="#">NPC "4"</a> or <a href="#">NPC "4D"</a> and onsite supplies of water and holding tanks for sewage and liquid waste, sufficient to support 72 hours emergency operations, are integrated into the building plumbing systems in accordance with the <a href="#">California Plumbing Code</a> . An onsite emergency system as defined in the <a href="#">California Electrical Code</a> is incorporated into the building electrical system for <a href="#">critical care areas</a> . Additionally, the system shall provide for radiological service and an onsite fuel supply for 72 hours of acute care operation.

1. For the purpose of [NPC 2](#) and [NPC 5](#), all enumerated items within Table 11.1 shall meet the requirements of Section 1632A of 2001 *California Building Code* (CBC) or equivalent provision in later version of the CBC by the specified timeframe as indicated by their respective [NPC](#).
2. For the purposes of [NPC 3](#) and [NPC 4](#) or [NPC 4D](#) in [SPC 2](#), [SPC 3](#), [SPC 4](#) or [SPC 4D](#), buildings, all enumerated items within Table 11.1 shall meet the requirements of the 1998 CBC, Section 1630B or equivalent provision in later version of the CBC, by the specified timeframe. The adequacy of anchorage and bracing may be limited to the connection of the component or [equipment](#) to the support when the total reaction at the point of support (including the [application](#) of  $F_p$ ) less than or equal to the following limits:
  1. 250 pounds for components or [equipment](#) attached to light frame walls. For the purposes of this requirement, the sum of the absolute value of all reactions due to component loads on a single stud shall not exceed 250 pounds.
  2. 1,000 pounds for components or [equipment](#) attached to roofs, or walls of reinforced concrete or masonry [construction](#).
  3. 2,000 pounds for components or [equipment](#) attached to floors or slabs-on-grade.

**Exception:** If the anchorage or bracing is configured in a manner that results in significant torsion on a supporting structural element, the effects of the nonstructural reaction force on the structural element shall be considered in the anchorage design.

(End of Section)

This is just a small section of the above-mentioned code. The requirements are extensive and are covered in multiple sections. Suffice it to indicate that SB1953 requires all acute-care inpatient hospital buildings to be compliant with the seismic requirements by January 1, 2030. According to SB1953, the law states:

It would require, in accordance with the compliance schedule approved by the office, and in any case no later than January 1, 2030, owners of all acute care inpatient hospitals to demolish, replace, or change to nonhospital use, all hospital buildings that are not in substantial compliance, or seismically retrofit them so that they are in compliance with the standards. The bill would require the office to provide written notice to hospital owners of compliance with or violation of these requirements and would require the office to notify the State Department of Health Services of violations or failures to comply.

The bill would require the State Department of Health Services to suspend or refuse to renew the license of a hospital that has received a notice of violation.

(1) Existing law makes violations of these provisions a crime. By expanding the scope of this crime, this bill would impose a state-mandated local program.

(2) Under existing law, building standards contained in various uniform industry codes as referenced in the California Building Standards Code apply to all occupancies throughout the state.

We hope this clarifies for you the requirements and intent of the necessary seismic improvements that are required for the Mendocino Coast District Hospital. If you require further clarification, we would be happy to provide it.

Regards,  
**DEVENNEY GROUP LTD.**