

GG257-14

807.6

Proponent: John Williams, CBO, Chair, representing ICC Adhoc Health Care Committee (AHC@iccsafe.org)

Revise as follows:

807.6 Special inspections for sound transmission. An approved agency, employed by the building owner, shall furnish report(s) of test findings indicating that the results are in compliance with this section and the construction documents. Discrepancies shall be brought to the attention of the design professional and *code official* prior to the completion of that work. A final testing report documenting required testing and corrections of any discrepancies noted in prior tests shall be submitted at a point in time agreed upon by the building owner, or building owner's agent, design professional, and the *code official* for purposes of demonstrating compliance.

Exceptions:

1. Test reports are not required for *approved* assemblies with an established sound transmission class (STC) rating.
2. Group I-2, Condition 2 occupancies that comply with 2010 FGI-ASHE are not required furnishing a report of test findings of the sound transmission results.

Reason: Hospitals that follow the 2010 FGI Guidelines are required to be designed and constructed to specific sound transmission and sound level requirements for each particular section of the building. These requirements are specific to the clinical needs of the patients based on the level of care they are receiving. Since the Table 807.3.2 specifically requires the use of the 2010 FGI Guidelines, inspections should follow the requirements in that document.

This proposal is submitted by the ICC Ad Hoc Committee for Healthcare (AHC). The AHC was established by the ICC Board of Directors to evaluate and assess contemporary code issues relating to hospitals and ambulatory healthcare facilities. The AHC is composed of building code officials, fire code officials, hospital facility engineers, and state healthcare enforcement representatives. The goals of the committee are to ensure that the ICC family of codes appropriately addresses the fire and life safety concerns of a highly specialized and rapidly evolving healthcare delivery system. This process is part of a joint effort between ICC and the American Society for Healthcare Engineering (ASHE), a subsidiary of the American Hospital Association, to eliminate duplication and conflicts in healthcare regulation. Since its inception in April, 2011, the AHC has held 11 open meetings and over 162 workgroup calls which included members of the AHC as well as any interested party to discuss and debate the proposed changes. All meeting materials and reports are posted on the AHC website at: <http://www.iccsafe.org/cs/AHC/Pages/default.aspx>

Cost Impact: Will not increase the cost of construction

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