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<u>Subcommittee on Regulations Meeting Minutes -September 3, 2025</u> Remote Teams Meeting

This meeting was open to the public and began approximately at 10:02 AM.

Subcommittee member attendance:

Jeff Dougan (JD)- Chairperson

Paul Logan (PL)

Ana Julian (AJ)

Mike Kennedy (MK)

Patricia Mendez (PM)

Deborah Ryan (DR)

Division of Professional Licensure Employees in attendance:

William Joyce –Executive Director (WJ)

Jamie Dalton- Board Counsel (JD)

Molly Griffin – Program Coordinator (MG)

JD opened the meeting for Roll Call:

AJ, MK, PL, PM, DR

DR: Requests discussion of the letter from subcommittee member Carol Steinberg to staff and the subcommittee.

- WJ: Okay, thoughts and feelings on the letter?
- DR: I think WJ is correct- the problem is, when the statute was amended in the late 80s, the Board was not involved. It took us 5 years to write design standards for adaptable housing. I don't think it is sensible to go backwards and make buildings built from 1991-1996 comply with AAB regulations when there were no design standards from the AAB.

The only new buildings that weren't subject to accessibility regulations between 1991-1996 were buildings with 3-4 units, because Fair Housing starts at 4 units, and 521 starts at 3 units. Carol is also assuming the Board can go after existing 3-unit buildings for Group 1, which the statute does not allow right now.

- JaD: There are two things going on here: what the statute allows and what is fair to enact.
- WJ: Carol references conversion of non-residential buildings; I do not think we have the authority to regulate those buildings.
- DR: I agree with you WJ. When the statute was passed in 1991, it directed the Board to write regulations- if builders did not have the regulations to follow until 1996, how does that work?
- JaD: The statute authorized the Board to regulate everything from 1991 on. I assume in 1996 people wanted to make the regulations prospective, or forward-looking.
- WJ- Reads applicable language from the statute. The Board could establish requirements for adaptable dwellings for any building built after March 13, 2001, that was built for residency from the start. I don't think this would be helpful, as the regulations came into effect in 1996, so these people would have had to have had to have psychically known what the regulations were going to be.
- JaD: This is why ex-post facto law is generally seen as unfair. If history had been different, this could look different, but the regulations were not ready.
- DR: Fair Housing also had regulations that were a bit more stringent than ours, which applied to 4 or more units in 1991. So those 4-unit buildings should be accessible anyway, even when not covered by AAB regulations.
- JD: Where does this lead us?
- WJ: It would probably be best to reaffirm the subcommittee's previous stance with a motion.

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Motion to Reaffirm the subcommittee's previous decision by PL 2^{nd} by DR Roll Call Vote
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AJ- yes

MK- yes

PL- yes

PM- yes

DR- yes

JD -yes

6 yes, 0 no, 0 abstentions- Motion Passes

1107.5.1.3 Boarding Care

WJ: I think we need to strike this whole section. There is no equivalent to this in Massachusetts.

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Motion to Strike 1107.5.1.3 by DR

2<sup>nd</sup> by PL

Roll Call Vote

DR- yes

PM- yes

PL- yes

MK- yes

AJ-yes

JD- yes

6 yes, 0 no, 0 abstentions- Motion Passes
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1107.5.2 Group I-2 Nursing Homes

- WJ: The requirement for nursing homes in the 521 draft is 5% fully accessible units and 45% Type B units (adaptable).
- JD: Do people want this added?
- WJ: In the current regs, you can find it in section 13.3.
- PM: In the MN Code, they have 50% of what?
- WJ: Of resident rooms and common-use bathrooms and other common rooms for patients.
- PM: I am still confused.
- WJ: We would get exactly what we require now, but it would just be written in a new structure.
- PM: What are the other 50% of rooms?
- WJ: Whatever the developer designs the rooms as.
- JD: In any other residential setting we require units on an accessible route to be Group 1 units. Why are we less in nursing homes, where those features may be more needed? What's the difference between an apartment complex and nursing home? Is it because we require more nursing homes that we are giving them a break on the unit types?
- WJ: We are under different restrictions in nursing homes. These buildings require an elevator. I can't speak to why the Board said 45% in 1996.
- PM: JD, were you thinking all the units should have access to the elevator?
- JD: Why would we require less than 95% to be adaptable?
- WJ: Nursing homes are for people receiving medical care.

- DR: 2012 ADAAG standards are 50% for long-term care facilities- my guess is that is where that number came from.
- WJ: You could do 5% and everything else. There are general exceptions that apply here. They basically cover the same things that we cover.
- DR: In the ADA standards, it is 50% accessible.
- WJ: Do you want to change this to 50% and then use the standard Type B language?
- JD: And how many adaptable units?
- DR: None, because we would have 50% fully accessible units.
- AJ: I think it is good that this mirrors the ADA.
- PM: Why can't we do the 50% accessible and the rest adaptable? That would make them all have an accessible route for people to be able to visit each other.
- WJ: This would be under medical facilities so the common routes and rooms would have to comply.
- PM: Would all the units have an accessible entrance?
- WJ: At the very least, we would require an elevator to service every story and for every hallway to comply. Do you want to just make the entrances accessible for visitors, or are you looking to make the rest of the unit adaptable?
- PM: I think just the entrance. This is a social space for some residents, so I think it is a big deal.
- WJ writes to add: In Group I-2 nursing homes, at least 50% but not less than one room of all nursing home resident rooms shall be accessible units. All other nursing home resident rooms shall comply with {accessible entrance section}. All other rooms and spaces shall comply with the applicable provisions of this code.

Motion to Adopt the language by DR

2nd by PM

Roll Call Vote

DR- yes

PM- yes

PL- yes

MK- yes

AJ- yes

JD- yes

6 yes, 0 no, 0 abstentions- Motion Passes

1107.5.3 Accessible units and its subsections

• WJ: 1107.5.3.1- the entry door piece of this I think is worth discussing, this is not in our regs.

- JD: Is this because you might not be unassisted in a hospital setting?
- WJ: I think so. This exception has no equivalent in 521 CMR.
- JD: I don't know whether or not this should apply to this situation- any thoughts?
- PL: Are you talking about not putting it in, JD?
- JD: I am just wondering why we would not require it.

Motion to take out the Exception for entry doors by DR

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2<sup>nd</sup> by PL
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Roll Call Vote

AJ- yes

MK- yes

PL- yes

PM- yes

DR- yes

JD- yes

6 yes, 0 no, 0 abstentions- Motion Passes

- WJ: We may want to look at another exception from ADAAG that is not in here. It reads: toilet rooms that are part of critical care or intensive care sleeping rooms shall not be required to comply with 603.
- WJ: I think the idea is that intensive care rooms are for people who will not be leaving their bed.
- JD: What do people feel about that?
- JD: In the ICU, could I use the restroom if I am visiting somebody?
- PL: Let's keep it out.
- JD: So, for the accessible units we have 10%?
- WJ: That is double our current requirement.
- JD: How do people feel? Are people good with 5.3.1?
- WJ: I would say go no lower than 10%, because that is the minimum set in ADAAG.
- PL: If Carol was here, she would say 20%.
- WJ: Keep in mind, this is not rehab that is discussed in this section.
- JD: What do people think about 10-20%?
- WJ: We are doubling and harmonizing with the federal requirement, which is 10%.
- PL: That sounds good if we remember this when we are talking about restaurants and bars.
- JD: So, are people good with the 10% in this section?
- JD: Okay let's move on.

1107.5.3.2 Type B Units

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Motion to Approve changing 4 units to 3 units in 1107.5.3.2 by PL
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2nd by MK

Roll Call Vote

AJ- yes

MK- yes

PL- yes

PM- yes

DR- yes

JD- yes

6 yes, 0 no, 0 abstentions- Motion Passes

1107.5.4 Group I-2 Rehabilitation Facilities

- WJ: We currently require 50% of the rooms in rehabs to be accessible, the Feds require 100%. We cannot require more than 100%.
- WJ: I think the red text here makes sense as an advisory.
- JD: I would assume people are happy with 100%.
- PL: Yes.

Motion to Accept 1107.5.4 as written and to move the red text into an advisory by PL 2nd by PM

Roll Call Vote

DR- yes

PM- yes

PL- yes

MK- yes

AJ- yes

JD- yes

6 yes, 0 no, 0 abstentions- Motion Passes

1107.5.5 Group I-3 Detention Facilities

- WJ: We can jump into subsections.
- WJ: 1107.5.5.1 mirrors our current requirements for detention facilities. The Feds want 2%.
- PM: In my opinion the 3% is okay.

Motion to Accept 1107.5.5.1 as written by DR

2nd by PL

Roll Call Vote

AJ- yes

MK- yes

PL- yes

PM- yes

DR- yes

JD- yes

6 yes, 0 no, 0 abstentions- Motion Passes

- WJ: Okay, 1107.5.5.2 mirrors exactly both the Feds and us. The only language that we do not have is the exception in blue, which we probably should have.
- MK: There are grab bars that can work but they are made in such a way that nothing could be tied around them.
- JD: Right, those are flush with the wall.
- MK: Yes, knowing that those are available, I am not sure if that exception is totally necessary.
- WJ: We should rewrite this then, because they still need to comply with grab bars and those types of grab bars would not comply.
- WJ rewrites the exception to read: Shall be permitted to substitute appropriate alternative devices for grab bars.
- JD: Who is determining the appropriate alternative devices?
- PM: I agree with you JD.
- JD: We could specifically call out suicide prevention.
- WJ: Okay let me find a different word than "appropriate."
- WJ writes: Shall be permitted to substitute alternative grab bars designed to prevent suicide.
- PM: Works for me.
- JD: So, the thought is we require grab bars, but specifically ones that prevent suicide.

Motion to Approve 1107.5.5.2 with the changes made to the exception by PM 2nd by MK

Roll Call Vote

AJ- yes

MK- yes

PL- yes

PM- yes

DR- yes

JD- yes 6 yes, 0 no, 0 abstentions- Motion Passes

1107.5.5.3 Medical Care Facilities

- WJ: 521 does not have an equivalent section to this- the Feds have an exact section to this, so I think that we must have this section.
- JD: What does this mean?
- WJ: It means that they cannot use the medical isolation cell as the only accessible cell in the medical facility portion of the detention center.

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Motion to Accept 1107.5.5.3 by PM

2<sup>nd</sup> by DR

Roll Call Vote

DR- yes

PM- yes

PL- yes

MK- yes

AJ- yes

JD- yes

6 yes, 0 no, 0 abstentions- Motion Passes
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1107.6 Group R – Residential Types

- WJ: Most of this outlines what these are and mirrors our transient lodging, the third type they mention, we would have to eliminate as it is an employee only space.
- WJ: Group R-1 is what you would consider a transient lodging facility. Our requirements are slightly different for the accessible units here. It structures things differently but we were proposing to adopt that structure in the next edition.
- JD: We currently add all dwelling units on the site.
- WJ: This new structure says you would do that if you have less than 50 units in the building and then if you have 50 units or more, we look at this building by building. So, this is differentiating between large and small buildings.
- WJ: The actual numbers we require are slightly different.
- DR: It's dramatically different, but I am not sure if we can do anything about it because 5% is in the statute, I think.
- WJ: I am checking if that applies to transient lodging.
- WJ: I think any building with 20 or more units cannot do less than 5%. We require 5% now for transient lodging.

- JD: So, we are requiring more units to be accessible, and I am not sure that I want to lose that.
- WJ: These are transient uses.
- JD: Would this cover dorm rooms?
- WJ: At present, dorms are an R-3 use.
- JD: Are these two tables showing the same columns, just worded differently?
- WJ: Mainly, but some are a result of the differences that exist between them.

Motion to Preserve the 521 CMR Requirements for Transient Lodging by PM

2nd by PL

Roll Call Vote

AJ- yes

MK-yes

PL- yes

PM- yes

DR- yes

JD- yes

6 yes, 0 no, 0 abstentions- Motion Passes

- JD: We will make sure the tables line up appropriately.
- WJ: Yes, we will flip columns 1 and 3.

1107.6.1.2 Type B Units

- WJ: Reads 1107.6.1.2
- JD: Do people want to make a motion or discuss that?
- PL: Is there anything else that we need to change?
- WJ: 521 does not currently require Type B in transient lodging.
- PL: So, this would be an addition.
- JD: Type B is adaptable right?
- WJ: Yes, they are the group 1s.
- DR: To apply the old group 1 to transient lodging does not seem right; there is a blocking issue.
- JD: We have significant number of accessible units in transient lodging.
- WJ: We went from 5% to 5%.
- JD: We offer more accessible units, so are we going to require old group 1s with that?
- DR: I don't think putting blocking in makes sense, but I don't know if the intent is to just get into the units, because that I agree with.
- JD: Can I ask where we got this?
- WJ: The Minnesota Code. They stick this {requirement for Type Bs} with every use- we talked about this with the I2 hospital use. In the Minnesota Code this applies to every use but

the I3 use.

Motion to Approve adding 1107.6.1.2 (with edit from 4 to 3 units) by PL 2nd by AJ

- JD: I am trying to figure out the benefit of this- it would give people more moveability.
- WJ: And wider doors and passages.

Roll Call Vote

AJ- yes

MK- yes

PL- yes

PM- yes

DR- no

JD- ves

5 yes, 1 no, 0 abstentions- Motion Passes

1107.6.1.3 Communication Features

- WJ: This is what we currently require and what we were proposing to require in the 2018 draft. WJ reads section.
- JD: Does door knocker or bell include the buttons at the entrance to the building if you ordered food?
- WJ: This is in the transient lodging context, not a dwelling unit.

Motion to Accept 1107.6.1.3 by PM

2nd by PL

Roll Call Vote

DR- yes

PM- yes

PL- yes

MK- yes

AJ- yes

JD- yes

6 yes, 0 no, 0 abstentions- Motion Passes

- WJ: Next is dispersion- this covers several areas, so I think we should break it down into separate sections. WJ reads section. 521 specifically requires proportional distribution- this code does not, and just has distribution with a priority list.
- JD: I like the priority list.
- WJ: The problem with that is that they could cluster the accessible units.
- DR: I like the Minnesota Code, it is clearer.
- WJ: Would it be okay if we added the word proportionally before dispersed?
- DR: Yes.
- JD: And that would capture what 521 says?
- WJ: Yes, and more.

• JD: Are people okay with striking 521 language and adding the word proportionally to the MN Code?

Motion to Strike the 521 Language and to add the word proportionally to the MN Code by DR

2nd by PM

Roll Call Vote

AJ- yes

MK- yes

PL- yes

PM- yes

DR- yes

JD- yes

6 yes, 1 no, 0 abstentions- Motion Passes

1107.6.1.5 Passage Doors

- WJ: Reads section.
- DR: The existing regulations say the entry doors comply on the corridor sides.
- WJ: This is identical to what is required in the 521-draft language.
- JD: The exception also is to shower and sauna doors.

Motion to Approve 1107.6.1.5 by PL

2nd by DR

Roll Call Vote

AJ- yes

MK- yes

PL- yes

PM- yes

DR- yes

JD- yes

6 yes, 0 no, 0 abstentions- Motion Passes

1107.6.2 Group R-2

- WJ: Moving on to Group R2. WJ reads section. I think this mostly moves dormitories into R3- this means SROs (Single Room Occupancies) rather than school dormitories. We had to delete the Live/work units as it is employee space.
- JD: Can we mark it as reserved rather than deleted?
- WJ: Yes.
- JD: Are people okay with that?

Motion to Mark live/work units as reserved by PM 2nd by PL

Roll Call Vote

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AJ- yes
MK- yes
PL- yes
PM- yes
DR- yes
JD_ yes
6 yes, 0 no, 0 abstentions- Motion Passes
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1107.6.2.2 Apartment Houses, Monasteries, and Convents

• WJ: This is the general section noting these will comply with subsections. For monasteries and convents, bedrooms are counted as units.

1107.6.2.2.1 Type A Units

- WJ: Reads section. We need to rewrite this to comply with our statute. Statutorily we cannot require Group 2 units in buildings lower than 20 units.
- PM: Here I think we should bump it from 5% to 10%.
- PL: If we had left it at 7 units and 25 that would be 1.4. But now it's only 1, because we are increasing units from 7-20, so does 10% make more sense?
- WJ: I think we should deal with the other, less controversial, pieces first.
- JD: I do think adding the word proportional makes sense here.
- JD: These are not accessible units, right?
- WJ: Permanent multi-dwellings are only going to require the Type As, not the fully accessible units.
- WJ: Where three or more Type A units are required, at least one Type A unit shall have a roll-in shower.
- DR: I would strongly advocate for the roll-in shower.
- JD: So, would you strike where it reads 3 or more and change it to where Type A units are required?
- DR: Yes.
- WJ: Do people have any other changes before we get to the 5% discussion?
- DR: Are these residential buildings?
- WJ: Yes.
- DR: The multiple site issues are still a problem.
- WJ: If you are a building developer and you currently own 5 buildings then add 1 more, we then must add all 6 buildings together, which can lead to weird outcomes.
- DR: Ownership is not the only issue.
- WJ: It is rare these days for state housing to be built on non-contiguous sites.

Motion to Change 7 units to 20 units, 5% to 10%, and to add the affordable statement where at least 75% of the required Type A units that meet the affordable definition by local statutes by PM

- JD: The State issued a report on the need for more accessible affordable units. I think the move to 10% would align with the Governor's initiative.
- DR: I'm all for it; however I don't believe the need is for market-rate units- it is for affordable units.
- WJ: The complication there is that we do not have a good definition of the term affordable for the building code.
- DR: I don't think we need to define affordable, but I think we can require some of the accessible units that are in the affordable set.
- WJ: I think we can probably stick that in an advisory.
- DR: I think most developers have obligations for affordable units in these cities and towns, so they know what it means. I think we can say where they are required to build affordable units, half of those units need to be accessible.
- PL: Just to confirm- what did we decide about market units?
- WJ: So, they need to be dispersed, but in addition where local zoning requires affordable...
- WJ: We also use regular rounding rules.
- JD: We have some significant changes, but they are good changes.

2nd by PL

- MK: I agree with DR about the need for these units to be affordable.
- JD: Can we do 1 market rate of each type?
- DR: I don't think that's our issue.
- WJ: We cannot require more than 10%
- JD: Right.
- DR: I think all we need to say is 75% is affordable.
- PM: I agree with DR.
- WJ: So, you are okay with a developer making all affordable units accessible in a building?
- DR: Yes.
- WJ: I don't think the affordable units are required to be dispersed.
- DR: They are.
- DR: I would not want to require 100% of the affordable units to be accessible, but I would not disagree with that.
- PM: I agree with that.
- WJ: Okay the general idea is we are deferring to local statutes for defining affordable, and at least 75% of Type A units need to be in that zone.
- PL: Are we not requiring an accessible market rate unit?
- WJ: No.
- JD: There are certain conditions.
- PL: Shouldn't there be at least one? I think there should be at least one in my opinion.
- PM: Why?

- PL: Let's just say as you get older you want to downsize- if it is market rate in a nice community you should be able to find one, that is my reason.
- JD: Does my income need to be something for me to rent an accessible unit?
- WJ: We can add but not less than one Type A shall be "market rate."
- DR: Yes.
- WJ: Okay we can add but in R-2 occupancies requiring two or more type A units, not less than one type A shall be "market rate."

Roll Call Vote AJ- yes MK- yes PL- yes PM- yes

DR- yes

JD- yes

6 yes, 0 no, 0 abstentions – Motion Passes

- WJ: Okay exceptions to 1107.6.2.2.1. WJ reads exceptions. I think we need to strike exception 2 for statutory reasons.
- WJ: Do we want to have the 10% apply to existing buildings?
- DR: I think this is a much larger opinion- I think you start at the effective date of the regulations.
- JD: Rather than voting on this, I think we write this down as an idea.
- WJ: Writes "In existing Group R-2 buildings constructed prior to [effective date] not undergoing a gut renovation, 5% of but not less than one of the units shall be a Type A unit."

Motion to Accept minutes from July 30, 2025, meeting by PL

2nd by DR

Roll Call Vote

AJ- abstain

MK- yes

PL- yes

PM- yes

DR- yes

JD- yes

5 yes, 1 abstention, 0 no- Motion Passes

Public Comment

Michael Muehe (BCIL): On behalf of the BCIL, we want to thank and congratulate this subcommittee. We disagree with the decision exclude pre-1996 housing buildings to comply with accessibility standards. Please remember the Commonwealth's population is getting older. One of the AAB staffers noted ICU patients do not get out of bed, which is

simply not true [in Muehe's personal experience]. Isolation and chronic illness are key components that prevent patients from improving their health. Hotels and other places of lodging spend large amounts on new construction, so adding blocking would not be a huge expense for them. It is important that at least one unit has a market rate unit that is fully accessible.

Motion to Adjourn by MK

2nd by PL

Roll Call Vote

AJ- yes

MK- yes

PL- yes

PM- yes

DR- yes

JD- yes

6 yes, 0 no, 0 abstentions- Motion Passes