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Office of Statewide Health
Planning and Development
Facilities Development
Division

## Senate Bill 499 (SB 499) Hospital Report

As submitted to California's Office of Statewide Health Planning and Development in accordance with Senate Bill 499 (SB 499) requirement for all general acute care hospitals with Structural Performance Category 1 (SPC-1) buildings to report annually with seismic safety compliance status, beds and services.

Provide the Hospital Owner and Year of Report per Section 130061(e)

Facility Number:	10009	
Facility Name:	Enloe Medical Center - Cohasset	
Address:	560 Cohasset Rd	
City:	Chico	
Hospital Owner/Lice	nsee: Mike Wiltermood	
Year of Repo	orting: 2018	
Contact 1 e-mail Add	dress: [Confidential data left blank intentionally.]	
Contact 2 e-mail Add	dress: [Confidential data left blank intentionally.]	
Contact 3 e-mail Add	Iress:: [Confidential data left blank intentionally.]	
Name of Subr	nitter: Leonard V Fisher	
Submission	Date: 12/19/2018 11:42:19 AM	

Report Y	'ear: 2018 10009	Enloe Medical Center - Cohass	set	Chico		Page:2 of 35
For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4, SPC4D or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)						
Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 00101	Original Hospital and Additions	560 Cohasset Rd	Rebuild	SPC5	01/01/2013	12/31/2019

Building	No: BLD-0	0101	Original Hospital and Additions		Retrofit/Re Project:	eplacement	No		
	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
0013	HS041907-0	0		8/16/2004	8/31/2006 12:00:00 AM	09/19/2006	06/01/2012	CLOS	No
10013	HS042981-0	0		12/17/200 4	2/20/2007 12:00:00 AM	03/06/2007		CLOS	No

Report Year: 2018	10009	Enloe Medical Center - Cohasset	Chico	Page:4 of 35			
Provide the number of	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)						
Building Number: BL	D-00101	Building Name:	Driginal Hospital and Additions				
Type of Service Prov	<u>/ided</u>						
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery			
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby			
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency			
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine			
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical	Rehabilitation Therapy			
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis			
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery			
	Doub	Total Beds this <b>0</b> Building	Obstetrical Cesarean/Deliv	Central Plant			
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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number:       BLD-00101       Building Name:       Original Hospital and Additions							
Medical / Surgical (Ir	nclude GYN)	Acute Respiratory	Care	Acute Psychiatric			
	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse No	ewborn / GYN)	Burn		Skilled Nursing			
	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Pediatric		intensive Care Nev Nursery	vborn	Intermediate Card			
	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent		
	npatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service		
	npatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0		
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2018

For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

Building Number Building Name		Building to be Removed / Replaced / Rebuilt
BLD-00101	Original Hospital and Additions	Rebuild
BLD-00102	Radiology Addition	Remain
BLD-00103	Behavioral Health & Administration	Remain
BLD-00104	Radiology Addition	Remain
BLD-00105	Central Stores	Remain
BLD-00106	Cardiac Cath Lab	Remain
BLD-00107	Administration	Remain
BLD-00108	Surgery Addition	Remain

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List ALL proposed ne	ew buildings to be constructed at th	is or another site.				
Building Number	Building Name		New Site			
N_1	Magnolia Tower		Х			
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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(2)(C)							
Building Number: BLD-0010	1 Original Hos	pital and Additions	Removal <u>12/31/2019</u> Date:				
Planned Uses for the building to Planned use for building:		ervice: lurisdiction: Local Authority	<u>/</u>				
Nursing	Surgical Anesthesia	Obstetrical Cesarean/De	liv Rehabilita Therapy	lion			
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dial	ysis			
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Pla	ant			
Intermediate Care	Dietetic	Nuclear Medicine	Support Services				
Skilled Nursing	Administration						
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No data reported for Secti	on 130061(c	)(2)(D).		

o data reported for Section 130061(c)(2)(D).	Report Year: 2018	10009	Enloe Medical Center - Cohasset	Chico	Page:10 of 35
	No data reported for Sectio	n 130061(c)	(2)(D).		

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No data reported	for wheth	er the gene	ral acute care services and beds wi	II be relocated to a new, existing or retro ng Resolution of "Rebuild" or "Replace" p	ofitted building and any
	unung ono				

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No data reported	d for Sectio	n 130061(c)	)(3).		

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Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)											
Building Number: BLD-00101 Building Name: Original Hospital and Additions											
Type of Service	e Provided										
		Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap							
	Nursing	Anesthesia	_								
	IntensiveCare		Obstetrical Recovery	Renal I	JIAIYSIS						
	Pediatric/Adol escent		Newborn/ WellBaby	Outpati Surgery	ent ⁄						
	Psychiatric Nursing	Radiological/ Imaging		_							
	Ū.	Pharmaceutical	Emergency	Central	Plant						
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Suppor Service	t :s						
	Intermediate Care	Administration									
	Skilled Nursing										
OSHPD FDD SB499 Re	eport Data Las	t Update: 12/19/2018 Subn	nission Date: 12/19/2018	Printed: 12/21/	/2018 6:30 AM						

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number:       BLD-00101       Building Name:       Original Hospital and Additions         Configuration:       Replace with existing SPC3, SPC4, SPC4D or SPC5 and NPC4 or NPC5 building.										
Type of Service Provided										
Nursing	Surgical		Rehabilitation Therapy							
IntensiveCare	Anesthesia		Renal Dialysis							
Pediatric/Adol escent	Clinical Lab	Recovery								
Psychiatric Nursing	Radiological/ Imaging		Outpatient Surgery							
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant							
Intermediate Care		Nuclear Medicine	Support							
Skilled Nursing	Administration		Support Services							
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number:	BLD-00102	Building Na	me: Radiology Additior	ſ						
Configuration:	N/A									
Type of Service	Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	termediate are		Dietetic							
	killed Nursing		Administration		Nuclear Medicine		Support Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)											
Building Number: BLD-00103 Building Name: Behavioral Health & Administration											
Configuration: N/A											
Type of Service	e Provided										
	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
	ediatric/Adol scent		Clinical Lab		Receivery						
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	bstetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant				
	termediate are		Dietetic								
	killed Nursing		Administration		Nuclear Medicine		Support Services				
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number:	BLD-00104	Building Na	me: Radiology Additior	1						
Configuration:	N/A									
Type of Service	e Provided									
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	termediate are		Dietetic							
	killed Nursing		Administration		Nuclear Medicine		Support Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number:	BLD-00105	Building Na	me: Central Stores							
Configuration:	N/A									
Type of Service	Provided									
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab		Recovery					
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant			
Int Ca	ermediate are		Dietetic		Nuclear Medicine		Support			
Sk	illed Nursing		Administration				Services			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number:	BLD-00106	Building Na	me: Cardiac Cath Lab							
Configuration:	N/A									
Type of Service	Provided									
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab		Recovery					
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical ite/Postprtum		Pharmaceutical		Emergency		Central Plant			
Inte Ca	ermediate		Dietetic		Nuclear Medicin		Susset			
	illed Nursing		Administration			e L	Support Services			
OSHPD FDD SB499 F	Report D	Data Last Updat	e: 12/19/2018	Submiss	ion Date: 12/19/20	018 Printed:	12/21/2018 6:30 AM			

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number:	BLD-00107	Building Na	me: Administration							
Configuration:	N/A									
Type of Service	e Provided									
	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	bstetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	termediate are		Dietetic				•			
	killed Nursing		Administration		Nuclear Medicine		Support Services			
OSHPD FDD SB499 F	Report [	Data Last Updat	e: 12/19/2018	Submiss	ion Date: 12/19/2018	Printed	12/21/2018 6:30 AM			
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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general acute care hospital building per Section 130061(c)(5)										
Building Number:	BLD-00108	Building Na	me: Surgery Addition							
Configuration:	N/A									
Type of Service P	Provided									
Nurs	sing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Inter	nsiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
Pedi esce	iatric/Adol ent		Clinical Lab		Recovery					
Psyc Nurs	chiatric sing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	tetrical e/Postprtum		Pharmaceutical		Emergency		Central Plant			
Inter Care	rmediate		Dietetic		Nuclear Medicine		Support			
	ed Nursing		Administration				Services			
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Include information on 4D and SPC-5 per Sec		npatient beds	by type of S	Service provided by b	uildings that are classified a	as SPC-2, SI	PC-3, SPC-4, SPC-
Building Number: BLI	D-00102	Building N	lame: Ra	diology Addition			]
Type of Service Prov	<u>vided</u>						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		tpatient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cer	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Sup Sup Ser	oport vices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Data	Last Update:	12/19/2018	3 Submission	Date: 12/19/2018 Pr	inted: 12/21/2	2018 6:30 AM

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Include information on 4D and SPC-5 per Sec			by type of Se	rvice provided by bu	ildings that are classi	fied as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-00103	Building N	lame: Beha	avioral Health & Adm	inistration		]
Type of Service Prov	<u>vided</u>						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Del		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia	_		
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric X Nursing	Inpatient Beds	30		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Su Se	pport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		30					
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Include information on 4D and SPC-5 per Sec	the number of tion 130061(e	inpatient beds b	by type of S	Service provided by b	uildings that are classified	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-00104	Building Na	ame: Ra	diology Addition			]
Type of Service Prov	<u>vided</u>						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Ce	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		pport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Da	ta Last Update:	12/19/2018	3 Submission	Date: 12/19/2018 P	rinted: 12/21/	2018 6:30 AM

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Include information on 4D and SPC-5 per Sec	the number of tion 130061(e)	inpatient beds	by type of S	Service provided by bu	ildings that are classified a	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-00105	Building N	ame: Ce	ntral Stores			]
Type of Service Prov	rided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rei	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		patient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cer	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		oport vices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Data	a Last Update:	12/19/2018	3 Submission D	ate: 12/19/2018 Pr	rinted: 12/21/	2018 6:30 AM

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Include information on 4D and SPC-5 per Sec	the number of tion 130061(e)	inpatient beds b	by type of S	Service provided by bu	ildings that are classified a	as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-00106	Building Na	ame: Ca	rdiac Cath Lab			]
Type of Service Prov	rided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency		ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		oport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Data	a Last Update:	12/19/2018	3 Submission D	Date: 12/19/2018 Pr	inted: 12/21/	2018 6:30 AM

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Include information on 4D and SPC-5 per Sec	the number of tion 130061(e	inpatient beds   )	by type of S	Service provided by b	ouildings that are classified	l as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: BLI	D-00107	Building N	ame: Ad	ministration			]
Type of Service Prov	vided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rel	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient ·gery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency		ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		oport vices
Skilled Nursing	Inpatient Beds	0	X	Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Report	Dat	a Last Update:	12/19/2018	3 Submission	Date: 12/19/2018	Printed: 12/21/	2018 6:30 AM

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Include information on 4D and SPC-5 per Sec			by type of §	Service provided by b	uildings that are classified a	as SPC-2, S	SPC-3, SPC-4, SPC-
Building Number: BLI	D-00108	Building Na	ame: Su	rgery Addition			]
Type of Service Prov	rided						
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv		ehabilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia	_		
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	E Re	enal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		utpatient Irgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency		entral Plant
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine		ipport rvices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e) Building Number: BLD-00102 Building Name: Radiology Addition						
ـــ Medical / Surgical (Inc	,	Acute Respiratory Care	Acute Psychiatric			
npatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days 0			
Perinatal (Exclude Nev	wborn / GYN)	Burn	Skilled Nursing			
npatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Pediatric		Intensive Care Newborn Nursery	Intermediate Care			
npatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
ntensive Care		Rehabilitation Center	Int. Care / Developmentally Disabled			
npatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Coronary Care		Chemical Dependency	Total Beds this Total Beds this Building Per Building Per			
npatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0			

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)						
Building Number: BLD-00103	Building Name: Behavioral Health & Adm	ninistration				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 30 Inpatient 2593 Bed Days				
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing				
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days				
Pediatric	Intensive Care Newborn Nursery	Intermediate Care				
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days				
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled				
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days				
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per				
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days	Unit     Service       30     30				
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)					
Building Number: BLD-001	104 Buildir	ng Name: Radi	ology Addition		
Medical / Surgical (Include G	YN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Inpati Bed Days		Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days
Perinatal (Exclude Newborn	/ GYN)	Burn		Skilled Nursing	
Inpatient 0 Inpati Bed Days		Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days
Pediatric		Intensive Care New Nursery	vborn	Intermediate Care	
Inpatient 0 Inpati Bed Days		Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Developm Disabled	entally
Inpatient 0 Inpati Bed Days		Inpatient 0 Bed	Inpatient 0 Days		Inpatient 0 Days
Coronary Care		Chemical Depende	ency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Inpati Bed Days		Inpatient 0 Bed	Inpatient 0 Days	Unit 0	<b>Service</b> 0
OSHPD FDD SB499 Report	Data Last Upd	ate: 12/19/2018	Submission Date	: 12/19/2018 Printe	d: 12/21/2018 6:30 AM

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)						
Building Number: BLD-00105	Building Name: Central	l Stores				
Medical / Surgical (Include GYN)	Acute Respiratory C	are Acute I	Psychiatric			
Inpatient 0 Inpatient Bed Days		npatient 0 Inpatier Days Bed	nt 0 Inpatient 0 Days			
Perinatal (Exclude Newborn / GYN)	Burn	Skilled	Nursing			
Inpatient 0 Inpatient Bed Days		npatient 0 Inpatier Days Bed	nt 0 Inpatient 0 Days			
Pediatric	Intensive Care Newb Nursery	orn Intermo	ediate Care			
Inpatient 0 Inpatient Bed Days		npatient 0 Inpatier Days Bed	nt 0 Inpatient 0 Days			
Intensive Care	Rehabilitation Center	Int. Ca Disable	re / Developmentally ed			
Inpatient 0 Inpatient Bed Days		npatient 0 Inpatier Days Bed	nt 0 Inpatient 0 Days			
Coronary Care	Chemical Dependence	Buildir				
Inpatient 0 Inpatient Days		npatient 0 Unit Days	Service           0         0			
OSHPD FDD SB499 Report Da	ata Last Update: 12/19/2018	Submission Date: 12/19/2018	B Printed: 12/21/2018 6:30 AM			

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)					
Building Number: BLD-00106	Building Name: Cardiac Cath Lab				
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric			
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing			
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Pediatric	Intensive Care Newborn Nursery	Intermediate Care			
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled			
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days			
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per			
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Unit         Service           0         0			
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)			
Building Number: BLD-00107 B	uilding Name: Administration		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit         Service           0         0	
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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4D and SPC-5 per Section 130061(e)			
Building Number: BLD-00108	Building Name: Surgery Addition		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
ntensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
npatient 0 Inpatient 3ed Days	0 Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per	
Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days	Unit         Service           0         0	
OSHPD FDD SB499 Report Data	a Last Update: 12/19/2018 Submission Date	e: 12/19/2018 Printed: 12/21/2018 6:30 AM	