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	Provide the Hospital Owner and Year of Report per Section 130061(e)							
Facility Number:	10919							
Facility Name:	O'Conno	r Hospital						
Address:	2105 Fo	rest Avenue						
City:	San Jose	e e e e e e e e e e e e e e e e e e e						
Hospital Owner/Lice	ensee:	Verity Health						
Year of Reporting:		2018						
Contact 1 e-mail Ac	ddress:	[Confidential data left blank intentionally.]						
Contact 2 e-mail Ac	ddress:	[Confidential data left blank intentionally.]						
Contact 3 e-mail Address::		[Confidential data left blank intentionally.]						
Name of Submitter:		Thomas Yang						
Submission	n Date:	12/18/2018 9:14:55 PM						

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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- 02278	1953 Building	2105 Forest Avenue	Retrofit	SPC2	01/01/2020	07/01/2019
BLD- 02279	1953 Boiler House / Laundry	2105 Forest Avenue	Replace	SPC2	01/01/2020	07/01/2019

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For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10919	IS110669-0	0		4/11/2011		12/20/2017	08/12/2019	ACTI	No
10919	SS110401-0	0		2/28/2011	6/23/2011 12:00:00 AM	11/27/2013	09/27/2012	CLOS	No

For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

1953 Boiler House / Laundry

Building No:

BLD-02279

Proiect: Facility Project CEQA Sub Plan Approved Projected Projected Completion Date Status Date Start Date Review Number Number Num Date In Scope ACTI No. IS110665-0 0 4/11/2011 11/19/2018 10919 12/20/2017 10919 SS110401-0 0 2/28/2011 6/23/2011 11/27/2013 09/27/2012 CLOS No 12:00:00 AM

Retrofit/Replacement

Yes-Planned

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Provide the number of	f inpatient bed	ds and patient days per type of service pe	er building per Section 13006	1(c)(1)(F)
Building Number: BL	.D-02278	Building Name: 19	53 Building	
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 Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services	Outpatient Surgery
	Deus	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Plant

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Provide the numb	er of inpatient be	ds and patient days per type of service p	per building per Section 13006	1(c)(1)(F)	
Building Number:		Building Name: 19	953 Boiler House / Laundry		
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery	
IntensiveCa	re Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby	
Pediatric/Ad escent	lol Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency	
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine	
Obstetrical Ante/Postpri	Inpatient tum Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitati Therapy	on
Intermediate Care	e Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialy	sis
Skilled Nurs	ing Inpatient Beds	0 Inpatient Days 0	X Support Services	Outpatient Surgery	
	Dodd	Total Beds this Building	Obstetrical Cesarean/Deliv	X Central Pla	nt

Report Year: 2018 10919 O'Connor Hospital San Jose Page:6 of 42 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-02278 **Building Number: Building Name:** 1953 Building Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn 0 Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Pediatric** intensive Care Newborn **Intermediate Card Nursery** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Days Bed Days Bed **Intensive Care** Rehabilitation Int. Care / development Center **Disabled** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Days Days Days Bed Bed Bed **Total Beds this** Total Beds this **Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Days Bed

Report Year: 2018 10919 O'Connor Hospital San Jose Page:7 of 42 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) 1953 Boiler House / Laundry **Building Number:** BLD-02279 **Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed Bed **Pediatric** intensive Care Newborn **Intermediate Card** Nursery Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient 0 Inpatient Inpatient ol Days Days Bed Bed

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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-02278	1953 Building	Retrofit
BLD-02279	1953 Boiler House / Laundry	Replace
BLD-02280	1969 Addition	Remain
BLD-02281	Replacement Facility	Remain
BLD-02282	Replacement Boiler House	Remain
BLD-03316	2005 Emergency Expansion	Remain
BLD-03318	Linear Accelerator	Remain
BLD-03319	Canopy 1	Remain
BLD-03320	Canopy 2	Remain
BLD-05675	2005 Emergency Expansion Canopy	Remain

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No proposed ne	ew buildings	to be const	ructed at this or another site.		

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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-02279 1953 Boiler House / Laundry Removal Date: 07/01/2019								
Planned Uses for the building t	o be removed from acute care s	ervice:						
Planned use for building:								
Inpatient services currently deli	ivered in the building:							
Nursing IntensiveCare	Surgical Anesthesia	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	on				
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dialy	rsis				
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery					
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	X Central Plan	nt				
Intermediate Care	Dietetic	Nuclear Medicine	X Support Services					
Skilled Nursing	Administration							

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No data reporte	d for Section	n 130061(c)	(2)(D).		

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No data reporte	ed for Section	n 130061(c)(2)(D).		

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Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)							
Building Number: BLD-02279 Building Name: 1953 Boiler House / Laundry							
Will general acute care services and beds will be relocated to a new, Existing or retrofitted but	uilding?						
Support Services N/A							
Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E)							
Building Number: BLD-02279 Building Name: 1953 Boiler House / Laundry							
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?							
CentralPlant N/A							

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No data reporte	d for Section	n 130061(c)	(3).		

ding Number:	BLD-02278 Buildi	ng Name: 19	953 Building				
Type of Service	e Provided		O mind		01		Dahahilitation
			Surgical	Ш	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia				
	IntensiveCare			Ш	Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol		Clinical Lab				Outpatient
Ш	escent		Radiological/		Newborn/ WellBaby	ш	Surgery
	Psychiatric Nursing		Imaging		F		
	-		Pharmaceutical	Ш	Emergency		Central Plant
	Obstetrical Ante/Postprtum		Dietetic		Nuclear Medicine	X	Support Services
			Dietetic				
	Intermediate Care		Administration				
	Chille d November						
	Skilled Nursing	I					

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Report any general per Section 130061		I inpatient service th	at is provided in any	general	acute care hospital	building t	hat is rated SPC-1	
Building Number:	BLD-02279 B	uilding Name: 19	53 Boiler House / La	undry				
Type of Service	e Provided							
			Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	Nursing		Anesthesia					
	IntensiveCare				Obstetrical Recovery		Renal Dialysis	
	Pediatric/Adol escent		Clinical Lab		Newborn/		Outpatient Surgery	
	Psychiatric		Radiological/ Imaging		WellBaby			
	Nursing		Pharmaceutical		Emergency	X	Central Plant	
	Obstetrical Ante/Postprtum		Dietetic		Nuclear Medicine	X	Support Services	
	Intermediate Care		Administration					
	Skilled Nursing							

onfiguration of all build						
				ach building will comply woe provided in each gener		
BLD-02278	Building Nar	me: 1953 Building				
Retrofit Non-Confo	orming buildir	ng to SPC 2 and NPC 3	and rem	ove from service by 2030)	
e Provided						
lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
ediatric/Adol scent		Clinical Lab		Recovery		
sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical .nte/Postprtum		Pharmaceutical		Emergency		Central Plant
ntermediate		Dietetic		Lineigency		Central Flam
are	X	Administration		Nuclear Medicine	X	Support Services
killed Nursing						
	Retrofit Non-Conforme Provided ursing ttensiveCare ediatric/Adol scent sychiatric ursing bstetrical nte/Postprtum	BLD-02278 Building Nar Retrofit Non-Conforming buildir e Provided ursing ttensiveCare ediatric/Adol scent sychiatric ursing bstetrical nte/Postprtum ttermediate are X	BLD-02278 Building Name: 1953 Building Retrofit Non-Conforming building to SPC 2 and NPC 3 Provided Ursing Surgical Anesthesia Clinical Lab Sychiatric Ursing Radiological/ Imaging Pharmaceutical Inte/Postprtum Administration	BLD-02278 Building Name: 1953 Building Retrofit Non-Conforming building to SPC 2 and NPC 3 and rem e Provided ursing Surgical	BLD-02278 Building Name: 1953 Building Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030 e Provided ursing	Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030 Provided Surgical

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whether by retrofit or by			
per: BLD-02279	Building Name: 1953 Boiler H	House / Laundry	
n: Replace with exis	sting SPC3, SPC4, SPC4D or SF	PC5 and NPC4 or NPC5 building.	
rvice Provided			
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Anesthesia	Obstetrical	Renal Dialysis
Pediatric/Adol escent	Clinical Lab	Recovery	
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Pharmaceutical	Emorgonov	X Central Plant
Intermediate	Dietetic	Emergency	Central Plant
Care Skilled Nursing	Administration	Nuclear Medicine	X Support Services
	al configuration of all but whether by retrofit or by 30061(c)(5) Der: BLD-02279 In: Replace with exist rvice Provided Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing Obstetrical Ante/Postprtum	al configuration of all buildings on the hospital campus swhether by retrofit or by replacement and the type of set 30061(c)(5) Der: BLD-02279 Building Name: 1953 Boiler in: Replace with existing SPC3, SPC4, SPC4D or SET in: Replace with existing SPC3, SPC4, S	al configuration of all buildings on the hospital campus showing how each building will comply whether by retrofit or by replacement and the type of service that will be provided in each ger 30061(c)(5) Der: BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the results of the provided BLD-02279 Building Name: 1953 Boiler House / Laundry The results of the results of the results of t

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	whether by retrofit or by				ach building will comply voe provided in each gene					
Building Numb	per: BLD-02280	Building Na	me: 1969 Addition							
Configuratio	Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Se	rvice Provided									
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab		Receivery					
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical	X	Emergency		Central Plant			
	Intermediate Care		Dietetic	X	Nuclear Medicine	X	Support			
	Skilled Nursing	X	Administration	_			Services			

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	whether by retrofit or				ach building will comply be provided in each gen		
Building Num	ber: BLD-02281	Building Na	me: Replacement F	acility			
Configuration	n: Retrofit Confor	ming building to	NPC 4 or NPC 5				
Type of Se	ervice Provided						
X	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	IntensiveCare	X	Anesthesia	X	Obstetrical Recovery	X	Renal Dialysis
X	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging	X	Newborn/ WellBaby	X	Outpatient Surgery
X	Obstetrical Ante/Postprtum	X	Pharmaceutical		Emergency		Central Plant
	Intermediate	X	Dietetic				
X	Care Skilled Nursing	X	Administration		Nuclear Medicine	X	Support Services
		•					

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	nether by retrofit or by		showing how each building will comervice that will be provided in each g		
uilding Numbe	r: BLD-02282	Building Name: Replacement	nt Boiler House		
Configuration:	Retrofit Conformir	ng building to NPC 4 or NPC 5			
Type of Serv	rice Provided				
	Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
	IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis	
	Pediatric/Adol escent	Clinical Lab	Recovery		
	Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
	Obstetrical Ante/Postprtum	Pharmaceutical		X Central Plant	
	Intermediate	Dietetic	Emergency	X Central Plant	
	Care	Administration	Nuclear Medicine	Support Services	
	Skilled Nursing]			

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Report the final requirements who per Section 130	hether by retrofit or by	ldings on the replacement	hospital campus showi and the type of service	ng how e that will l	ach building will comply be provided in each gene	with the SPC-eral acute care	5/NPC-4 or 5 hospital building			
Building Numbe	er: BLD-03316	Building Na	me: 2005 Emergency	Expansion	on					
Configuration:	Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Serv	rice Provided									
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	IntensiveCare		Anesthesia		Obstetrical Recovery	R	Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab		Receivery					
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical	Х	Emergency	c	Central Plant			
	Intermediate Care		Dietetic	П	Nuclear Medicine		Support			
	Skilled Nursing		Administration	<u> </u>			Services			

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Report the final requirements with per Section 130	hether by retrofit or by	ldings on the replacement	hospital campus showing and the type of service	ng how e that will	ach building will comply on provided in each gene	with the SPC ral acute car	-5/NPC-4 or 5 e hospital building		
Building Number	er: BLD-03318	Building Na	me: Linear Accelerato	r					
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Serv	vice Provided								
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	Pediatric/Adol escent		Clinical Lab		Recovery				
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Gurgery		
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant		
	Intermediate Care		Dietetic		Nuclear Medicine		Support		
	Skilled Nursing		Administration				Services		

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Report the final corequirements whe per Section 13006	ther by retrofit or by	ldings on the replacement	hospital campus show and the type of service	ing how e that will l	ach building will comply be provided in each gene	with the SPC- eral acute care	5/NPC-4 or 5 e hospital building			
Building Number:	BLD-03319	Building Na	me: Canopy 1							
Configuration:	Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Servic	e Provided									
N	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
In	ntensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis			
	ediatric/Adol scent		Clinical Lab		Recovery					
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Gurgery			
	Obstetrical nte/Postprtum		Pharmaceutical		Emergency	X (Central Plant			
	ntermediate care		Dietetic	П	Nuclear Medicine		Support			
S	killed Nursing		Administration			_	Services			

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Report the final or requirements wh per Section 1300	nether by retrofit or by	ldings on the replacement	hospital campus showi and the type of service	ng how e that will l	ach building will comply on provided in each gene	with the SPC- eral acute care	5/NPC-4 or 5 e hospital building
Building Number	r: BLD-03320	Building Nar	me: Canopy 2				
Configuration:	Retrofit Conformir	ng building to	NPC 4 or NPC 5				
Type of Serv	ice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Dutpatient Gurgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	X (Central Plant
	Intermediate Care		Dietetic		Nuclear Medicine		Support
	Skilled Nursing		Administration				Services

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equirements		Idings on the hospital campus show replacement and the type of service		
Building Num	nber: BLD-05675	Building Name: 2005 Emergenc	y Expansion Canopy	
Configuration	on: Retrofit Conformir	ng building to NPC 4 or NPC 5		
Type of S	ervice Provided			
	Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent	Clinical Lab	Recovery	
	Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Pharmaceutical	C Emorganou	X Central Plant
	Intermediate	Dietetic	Emergency	[A] Celliai Flant
	Care	Administration	Nuclear Medicine	Support Services
	Skilled Nursing			

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	Include information on the number of inpatient beds by type of Service 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	D-02280	Building N	lame: 1969 Addition				
Type of Service Prov	<u>rided</u>						
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy		
IntensiveCare	Inpatient Beds	0	Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis		
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	X Emergency	Central Plant		
Intermediate Care	Inpatient Beds	0	Dietetic	X Nuclear Medicine	X Support Services		
Skilled Nursing	Inpatient Beds	0	X Administration				
Total Beds this Building		0					

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	e information on t d SPC-5 per Sect			y type of S	Service provided by b	ouildi	ngs that are classified a	as SPC-2	, SPC-3, SPC-4, SPC-
Buildir	ng Number: BLD	D-02281	Building Na	me: Re	eplacement Facility				
<u>Type</u>	of Service Prov	<u>ided</u>							
X	Nursing	Inpatient Beds	210	X	Surgical		X Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare	Inpatient Beds	32	X	Anesthesia				
X	Pediatric/Adol escent	Inpatient Beds	27	X	Clinical Lab		X Obstetrical Recovery	X	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging		X Newborn/ WellBaby		Outpatient Surgery
X	Obstetrical Ante/Postprtum	Inpatient Beds	65	X	Pharmaceutical		Emergency		Central Plant
	Intermediate Care	Inpatient Beds	0	X	Dietetic		Nuclear Medicine		Support Services
X	Skilled Nursing	Inpatient Beds	24	X	Administration				
	Total Beds this Building		358						

oort Year:	2018	10919	O'Connor Hospital				San Jose		Page:29 of 42
Include infor 4D and SPC				y type of \$	Service provided by I	buildi	ngs that are classified a	s SPC-2,	SPC-3, SPC-4, SPC-
Building Nur	mber: BLD)-02282	Building Na	me: Re	placement Boiler Ho	ouse			
Type of Se	rvice Provi	ided							
Nursi	ng	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy
Intens	siveCare	Inpatient Beds	0		Anesthesia				
Pedia escer	tric/Adol	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	R	enal Dialysis
Psych Nursii	niatric ng	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient urgery
Obste	etrical Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	X C	entral Plant
Intern Care	nediate	Inpatient Beds	0		Dietetic		Nuclear Medicine		upport ervices
Skille	d Nursing	Inpatient Beds	0		Administration				
Total Buildi	Beds this ng		0						

eport Year: 2018	10919	O'Connor Hospital		San Jose	Page:30 of 42
Include information on 4D and SPC-5 per Sec			type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-03316	Building Nar	me: 2005 Emergency Exp	ansion	
Type of Service Prov	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	X Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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Include information of 4D and SPC-5 per Se			type of Service provided by	buildings that are classified	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: B	LD-03318	Building Nar	me: Linear Accelerator		
Type of Service Pro	ovided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia	_	
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtun	Inpatient n Beds	0	Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building	;	0			

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Include information on 4D and SPC-5 per Sec			type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-03319	Building Nar	me: Canopy 1		
Type of Service Prov	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

oort Year: 2018	10919	O'Connor Hospita		San Jose	Page:33 of 42
Include information o 4D and SPC-5 per Se			y type of Service provided by I	ouildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: B	LD-03320	Building Na	me: Canopy 2		
Type of Service Pro	<u>ovided</u>				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia	_	_
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtur	Inpatient n Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building	3	0			

port Year: 2018	10919	D'Connor Hospital		San Jose	Page:34 of 42
Include information on 4D and SPC-5 per Sec			type of Service provided by	buildings that are classified	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-05675	Building Nar	me: 2005 Emergency Exp	ansion Canopy	
Type of Service Prov	vided				
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	X Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
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_S

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) BLD-02280 1969 Addition **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Days Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient 0 Inpatient Inpatient 0 Inpatient Inpatient Inpatient Bed Davs Bed Davs Bed Davs Int. Care / Developmentally **Intensive Care** Rehabilitation Disabled Center Inpatient Inpatient 0 Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days 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)

4D and SPC-5 per Section 130061(e)		
Building Number: BLD-02281 Build	Replacement Facility	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 210 Inpatient 26146 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing
Inpatient 65 Inpatient 4959 Days	Inpatient 0 Inpatient 0 Days	Inpatient 24 Inpatient 8224 Bed Days
Pediatric	Intensive Care Newborn Nursery	Intermediate Care
Inpatient 27 Inpatient 808 Days	Inpatient 10 Inpatient 1227 Bed Days	Inpatient 0 Inpatient 0 Days
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled
Inpatient 14 Inpatient 2433 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days
Coronary Care	Chemical Dependency	Total Beds this Building Per Building Per
Inpatient 8 Inpatient 1390 Days	Inpatient 0 Inpatient 0 Days	Unit Service 358

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Report Year: 2018 10919 O'Connor Hospital San Jose Page:38 of 42 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) BLD-03316 2005 Emergency Expansion **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Bed Days Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days ol 0

Report Year: 2018 10919 O'Connor Hospital San Jose Page:39 of 42 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) BLD-03318 Linear Accelerator **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days ol 0

Report Year: 2018 10919 O'Connor Hospital San Jose Page:40 of 42 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) BLD-03319 Canopy 1 **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient Inpatient 0 Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0

Report Year: 2018 10919 O'Connor Hospital San Jose Page:41 of 42 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) BLD-03320 Canopy 2 **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient Inpatient 0 Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Bed ol 0

Report Year: 2018 10919 O'Connor Hospital San Jose Page:42 of 42 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) BLD-05675 2005 Emergency Expansion Canopy **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Burn Skilled Nursing** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Bed Days Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days ol 0