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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:	11125		
Facility Name:	Trinity H	lospital	
Address:	60 East	er Avenue	
City:	Weaver	ville	
Hospital Owner/Lice	ensee:	Mountain Communities Healthcare District	
Year of Repo	orting:	2018	
Contact 1 e-mail Ado	dress:	[Confidential data left blank intentionally.]	
Contact 2 e-mail Add	dress:	[Confidential data left blank intentionally.]	
Contact 3 e-mail Add	lress::	[Confidential data left blank intentionally.]	
Name of Subr	mitter:	Wally Couch	
Submission	Date:	12/19/2018 8:25:00 AM	

Report \	Year: 2018 11125	Trinity Hospital		Weaverville		Page:2 of 34
rebuild, r 130060 d	etrofit or replace the build or 130061.5,for rebuild, ret	re planned for rebuild, retrofit or rep ing to SPC2, SPC3, SPC4, SPC4D crofit or replacement of the building t approved per Section 130061(c)(1	or SPC5 per 130 hat the hospital	061(c)(1)(A). The de	eadline, as desc	ribed in Section
Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 02525	Security Addition	60 Easter Avenue	Retrofit	SPC2	01/01/2020	07/01/2019
BLD- 02529	Connecting Corridor Addition	60 Easter Avenue	Remove	N/A	01/01/2020	07/01/2019

Report Year:         2018         11125	Trinity Hospital		Weaverville		Page:3 of 34
For each building which is planned projected construction start date o status and approvals per Section	r dates and projected Comp				
Building No: BLD-02525	Security Addition		Retrofit/Replacement Project:	No	
Facility Project Sub Number Number Num Scop	De	I Date In	Plan Approved Projected Date Start Date	Projected Completion Date	CEQA Status Review
11125 H142985-53 0 -00		12/26/201 4	11/2/2016 07/31/2015 12:00:00 AM	12/31/2020	PEND No
OSHPD FDD SB499 Report	Data Last Update: 12/19	/2018 Submiss	ion Date: 12/19/2018	Printed: 12/21/2	0019 6:20 AM

Report Year: 2018	11125	Trinity Hospital	Weaverville	Page:4 of 34	
Provide the number of	inpatient be	eds and patient days per type of service pe	er building per Section 130061(	c)(1)(F)	
Building Number: BL	D-02525	Building Name: Se	curity Addition		
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	Support Services	Outpatient Surgery	
	Deus	Total Beds this 0 Building	Obstetrical Cesarean/Deliv	Central Plant	
OSHPD FDD SB499 Repor	t	Data Last Update: 12/19/2018 S	ubmission Date: 12/19/2018	Printed: 12/21/2018 6:30 AM	

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Provide the number of inpatient t	peds and patient days per type of service p	er building per Section 130061(c)(1)(F)	
Building Number: BLD-02529 Type of Service Provided	Building Name:	onnecting Corridor Addition	
Nursing Inpatient Beds	0 Inpatient 0 Days	Surgical Obste	
IntensiveCare Inpatient Beds	0 Inpatient Days 0	Anesthesia Newb	
Pediatric/Adol Inpatient escent Beds	0 Inpatient Days 0	Clinical Lab	gency
Psychiatric Inpatient Nursing Beds	0 Inpatient Days 0	Radiological/ Nucle Imaging	
Obstetrical Inpatient Ante/Postprtum Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	bilitation apy
Intermediate Inpatient Care Beds	0 Inpatient Days 0		l Dialysis
Skilled Nursing Inpatient Beds	0 Inpatient Days 0	Support Outpa Services Surge	
	Total Beds this <b>0</b> Building	Obstetrical     Cesarean/Deliv     Centr	al Plant
OSHPD FDD SB499 Report	Data Last Update: 12/19/2018 S	Submission Date: 12/19/2018 Printed:	12/21/2018 6:30 AM

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Provide the numbe	r of Inpatient beds and patier	nt days per type of unit	t per building per Sect	ion 130061(c)(1)(F)	
Building Number:	BLD-02525 Build	ling Name: Secu	urity Addition		
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	nent
Inpatient 0 Bed	Inpatient 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
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0
OSHPD FDD SB499	Report Data Last U	pdate: 12/19/2018	Submission Date	e: 12/19/2018 Printe	ed: 12/21/2018 6:30 AM

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Provide the number of Inpatient beds and	patient days per type of unit per building per Se	ection 130061(c)(1)(F)						
Building Number: BLD-02529 Building Name: Connecting Corridor Addition								
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Pediatric	intensive Care Newborn Nursery	Intermediate Card						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0					
Intensive Care	Rehabilitation Center	Int. Care / development Disabled						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0					
Coronary Care	Chemical Dependency	Total Beds this Total E Building Per Buildin Unit Servic						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	0	0					
Inpatient 0 Inpatient 0   Bed 0 Inpatient 0   Perinatal (excluse Newborn / GYN)   Inpatient 0 Inpatient   Bed 0 Inpatient 0   Pediatric   Inpatient 0 Inpatient 0   Bed 0 Inpatient 0   Inpatient 0 Inpatient 0   Intensive Care   Inpatient 0 Inpatient 0   Bed 0 Inpatient 0   Inpatient 0 Inpatient 0   Coronary Care 0 Inpatient 0	Inpatient 0 Inpatient 0   Burn   Inpatient 0 Inpatient 0   Bed 0 Inpatient 0   Bed 0 Inpatient 0   Inpatient 0 Inpatient 0   Bed 0 Inpatient 0   Inpatient 0 Inpatient 0   Bed 0 Inpatient 0   Inpatient 0 Inpatient 0   Bed 0 Inpatient 0   Chemical Dependency 0 Inpatient 0	Inpatient       0       Inpatie         Bed       0       Inpatie         Skilled Nursing       1       Inpatie         Inpatient       0       Inpatie         Bed       0       Inpatie         Intermediate Card       1       Inpatie         Inpatient       0       Inpatie         Bed       0       Inpatie         Days       1       Inpatie         Inpatient       0       Inpatie         Disabled       0       Inpatie         Inpatient       0       Inpatie         Disabled       0       Inpatie         Inpatient       0       Inpatie         Bed       0       Inpatie         Disabled       0       Inpatie         Inpatient       0       Inpatie         Days       0       Inpatie         Disabled       0       Inpatie         Disabled       0       Inpatie         Days       0       Inpatie         Disabled       0       Inpatie         Disabled       0       Inpatie         Disabled       0       Inpatie         Disabled       0	nt 0 nt 0 Beds this ng Per					

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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-02523	Main Hospital Building	Remain
BLD-02525	Security Addition	Retrofit
BLD-02526	16-Bed Addition	Remain
BLD-02527	Lab and Radiology Addition	Remain
BLD-02528	Emergency Generator Building	Remain
BLD-02529	Connecting Corridor Addition	Remove

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No proposed new buildings to be constructed 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-02529     Connecting Corridor Addition     Removal Date:     07/01/2019										
Planned	Uses for the buildir	ig to be remo	ved from acute	care service:						
Planned	use for building:			7						
Inpatient	services currently	delivered in th	ne building:							
	Nursing		Surgical			Obstetrical			Rehabilitation	1
	IntensiveCare		Anesthesia			Cesarean/Deliv	V		Therapy	
	Pediatric/Adol escent		Clinical Lab			Obstetrical Recovery			Renal Dialysis	S
	Psychiatric Nursing		Radiological/ Imaging			Newborn/ WellBaby			Outpatient Surgery	
	Obstetrical Ante/Postprtum		Pharmaceuti	cal		Emergency			Central Plant	
	Intermediate Care		Dietetic			Nuclear Medicine			Support Services	
	Skilled Nursing		Administratio	n						
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Provide the number of inpatient beds and patient days per unit for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).							
Building Nbr: BLD-02529 Building Name:	Connecting Corridor Addition	Year of Information: 2015	5				
<u>Unit Type</u>		Information Current As Of:					
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 25 Patient 1145 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0				
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing					
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 26 Patient Beds Days	6866				
Pediatric	Intensive Care Newborn Nursery	Intermediate Care					
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0				
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled				
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0				
Coronary Care	Chemical Dependency	Total Beds this					
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Building per Unit	51				
Dous Days	Doub Days	Total Beds this Building per Service	51				
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Provide the number of inpatient beds and pat care services per Section 130061(c)(2)(D).	ient days per unit for the year of 2013, 2014	, and 2015 for buildings to be remo	oved from acute
Building Nbr: BLD-02529 Building Name:	Connecting Corridor Addition	Year of Information: 2016	3
Unit Type		Information Current As Of:	
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing	
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0
Coronary Care	Chemical Dependency	_ Total Beds this	
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Building per Unit	0
Dous Days	Deus Days	Total Beds this Building per Service	50
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Provide the number of inpatient beds and patcare services per Section 130061(c)(2)(D).	ient days per unit for the year of 2013, 2014	, and 2015 for buildings to be remo	oved from acute
Building Nbr: BLD-02529 Building Name:	Connecting Corridor Addition	Year of Information: 2017	7
Unit Type		Information Current As Of:	
Medical/Surgical (include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 25 Patient 919 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0
Perinatal (exclude Neborn/GYN)	Burn	Skilled Nursing	
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 25 Patient Beds Days	1903
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0
Intensive Care	Rehabilitation Center	Int. Care/Developmentally Dis	abled
Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient 0 Beds Days	Inpatient 0 Patient Beds Days	0
Coronary Care	Chemical Dependency	_ Total Beds this	
Inpatient 0 Patient 0	Inpatient 0 Patient 0 Beds Days		50
Beds Days	Beds Days	Total Beds this Building per Service	50
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Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).							
Building Nbr: BLD-0	02529 Building Name:	Connecting Corridor Add	ition	Year of Information:	2015		
<u>Type of Services</u> <u>Provided</u>	Humo.		1	Information Current As Of:			
X Nursing	Inpatient 25 Beds	Patient 1145 Days	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
IntensiveCare	Inpatient 0 Beds	Patient 0 Days	Anesthesia	Obstetrical	Renal Dialysis		
Pediatric/Adol escent	Inpatient 0 Beds	Patient 0 Days	Clinical Lab	Recovery			
Psychiatric Nursing	Inpatient 0 Beds	Patient 0 Days	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprtum	Inpatient 0 Beds	Patient 0 Days	Pharmaceuti	cal Emergency	Central Plant		
Intermediate Care	Inpatient 0 Beds	Patient 0 Days	Dietetic	Nuclear [ Medicine	Support Services		
X Skilled Nursing	Inpatient 26 Beds	Patient 6866 Days	Administratio	n			
Total Beds this Building per service 51							
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	Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).							
Building Nbr: BLD-02529 Building Name:	Year of Information: 2016	6						
<u>Type of Services</u> Provided		Information Current As						
Nursing Inpatient 0 Beds	Patient 0 Surgical Days		Rehabilitation herapy					
IntensiveCare Inpatient 0 Beds	Patient 0 Anesther Days		tenal Dialysis					
Pediatric/Adol Inpatient 0 escent Beds	Patient 0 Clinical L Days		ional Diagolo					
Psychiatric Inpatient 0 Nursing Beds	Patient 0 Radiolog Days Imaging		Dutpatient Surgery					
Obstetrical Inpatient 0 Ante/Postprtum Beds	Patient 0 Days Pharmad	ceutical Emergency C	Central Plant					
Intermediate Inpatient 0 Care Beds	Patient 0 Days Dietetic		Support Services					
Skilled Nursing Inpatient 0 Beds	Patient 0 Days Administ	ration						
Total Beds this Building per service	Total Beds this Building per service 0							
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	Provide the number of inpatient beds and patient days per type of service for the year of 2013, 2014, and 2015 for buildings to be removed from acute care services per Section 130061(c)(2)(D).							
Building Nbr: BLD-02529 Building Name:	Connecting Corridor Addition	Year of Information: 2017	7					
Type of Services Provided		Information Current As 0f:	3/2018					
X Nursing Inpatient 25 Beds	Patient 919 Surgical Days		Rehabilitation Therapy					
IntensiveCare Inpatient 0 Beds	Patient 0 Anesthes		enal Dialysis					
Pediatric/Adol Inpatient 0 escent Beds	Patient 0 Clinical L Days							
Psychiatric Inpatient 0 Nursing Beds	Patient 0 Radiolog Days Imaging		Outpatient Surgery					
Obstetrical Inpatient 0 Ante/Postprtum Beds	Patient 0 Days Pharmad	ceutical Emergency C	Central Plant					
Intermediate Inpatient 0 Care Beds	Patient 0 Days Dietetic		Support Services					
X Skilled Nursing Inpatient 25 Beds	Patient 1903 Days Administ	ration						
Total Beds this Building per service	Total Beds this Building per service 50							
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No data reported	l for wheth	er the gene	ral acute care services a numbers for buildings w	and beds will be reloc	cated to a l	new, existing or re	rofitted building a	and any 0061(c)(2)(E).	
		e el project						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

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No data reported	No data reported for Section 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-02525 Building Name: Security Addition								
Type of Service Provided								
	Surgical	Obstetrical Cesarean/Deliv	Rehabil Therapy					
Nursing	Anesthesia		Renal D	)ialvsis				
IntensiveCare	Clinical Lab	Obstetrical Recovery		naryolo				
Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	Outpatie Surgery					
Psychiatric Nursing	Imaging Pharmaceutical	Emergency	Central	Plant				
Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Service:	s				
Intermediate Care	X Administration							
Skilled Nursing								
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Report any general per Section 130061		atient service that is provided in any	general a	cute care hospital l	building that is ra	ated SPC-1
Building Number:	BLD-02529 Buildi	ng Name: Connecting Corridor Ac	ddition			
Type of Service	e Provided					
		Surgical		Obstetrical Cesarean/Deliv	Reha Thera	bilitation py
	Nursing	Anesthesia				
	IntensiveCare			Obstetrical Recovery	Rena	l Dialysis
	Pediatric/Adol	Clinical Lab			Outpa	atient
	escent	Radiological/		Newborn/ WellBaby	Surge	
	Psychiatric Nursing	Imaging				
	Noroling	Pharmaceutical		Emergency	Centr	al Plant
	Obstetrical Ante/Postprtum			Nuclear Medicine	Suppo Servic	
		Dietetic				
	Intermediate Care	Administration				
	Skilled Nursing	I				
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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-02523 Building Name: Main Hospital Building										
Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5										
Type of Service Provided										
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehal Thera	pilitation py						
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal	Dialysis						
Pediatric/Adol escent	Clinical Lab	Receivery								
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge							
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centra	al Plant						
	Dietetic									
Care Skilled Nursing	Administration	Nuclear Medicine	Supp Servi							
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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-02525 Building Name: Security Addition									
Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5									
Type of Service Provided									
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy						
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal Dialysis						
Pediatric/Adol escent	Clinical Lab	Receivery							
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery						
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant						
Intermediate Care	Dietetic								
Skilled 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-02526 Building Name: 16-Bed Addition								
Configuration: Retrofit N	n-Conforming building to SPC 4D or SPC 5	and NPC 4 or N	NPC 5					
Type of Service Provided								
Nursing	Surgical		etrical	Rehabilitation Therapy				
IntensiveCare	Anesthesia	Obste Reco	etrical	Renal Dialysis				
Pediatric/Adol escent	Clinical Lab							
Psychiatric Nursing	Radiological/ Imaging	Newb Well		Outpatient Surgery				
Obstetrical Ante/Postprtu	Pharmaceutical	Emei	rgency	Central Plant				
Intermediate Care	Dietetic		ear Medicine	Support				
Skilled Nursin	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-02527 Building Name: Lab and Radiology Addition									
Configuration: Retrofit Non-C	onforming building to SPC 4D or SPC 5	and NPC 4 or NPC 5							
Type of Service Provided									
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehal Thera	bilitation py					
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal	Dialysis					
Pediatric/Adol escent	Clinical Lab	Recovery							
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge						
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centra	al Plant					
Intermediate Care	Dietetic	Nuclear Medicine	Supp	ort					
Skilled Nursing	Administration		Servi						
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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-02528 Building Name: Emergency Generator Building									
Configuration: Retrofit Non-C	Conforming building to SPC 4D or SPC 5	5 and NPC 4 or NP	C 5						
Type of Service Provided									
Nursing	Surgical	Obstetr Cesare	ical an/Deliv	Rehabilitation Therapy					
IntensiveCare	Anesthesia	Obstetr Recove		Renal Dialysis					
Pediatric/Adol escent	Clinical Lab	Keeve	' y						
Psychiatric Nursing	Radiological/ Imaging	Newbor WellBal		Outpatient Surgery					
Obstetrical Ante/Postprtum	Pharmaceutical	Emerge	ency	Central Plant					
Intermediate Care	Dietetic	Nuclear	Medicine	Support					
Skilled 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-02529 Building Name: Connecting Corridor Addition								
Configuration: Remove from C	GAC service by 1/1/2020							
Type of Service Provided								
Nursing	Surgical	Obstetrical Cesarean/I		Rehabilitation Therapy				
IntensiveCare	Anesthesia	Obstetrical Recovery		Renal Dialysis				
Pediatric/Adol escent	Clinical Lab							
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery				
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency		Central Plant				
Intermediate Care	Dietetic	Nuclear Me	dicine	Support				
Skilled Nursing	Administration			Services				
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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-4, AD and SPC-5 per Section 130061(e)							
Building Number: BL	D-02523	Building N	ame: Ma	in Hospital Building			]
Type of Service Pro	vided						
X Nursing	Inpatient Beds	25		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		itpatient rgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical	Emergency	X Ce	entral Plant
Intermediate	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Su Se	pport rvices
Skilled Nursing	Inpatient Beds	0	X	Administration			
Total Beds this Building		25					
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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: BLI	D-02526	Building N	lame: 16-	Bed Addition			]	
Type of Service Prov	vided							
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv		habilitation erapy	
IntensiveCare	Inpatient Beds	0	X	Anesthesia				
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Re	nal Dialysis	
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		tpatient rgery	
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency		ntral Plant	
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	pport rvices	
Skilled Nursing	Inpatient Beds	0		Administration				
Total Beds this Building		0						
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Include information on 4D and SPC-5 per Sec			by type of S	Service provided by I	ouildings that are c	lassified as SPC-2, S	PC-3, SPC-4, SPC-	
Building Number: BLD-02527 Building Name: Lab and Radiology Addition								
Type of Service Prov	<u>vided</u>							
Nursing	Inpatient Beds	0		Surgical	Obstetric Cesarear		habilitation erapy	
IntensiveCare	Inpatient Beds	0		Anesthesia				
Pediatric/Adol	Inpatient Beds	0	X	Clinical Lab	Obstetric Recovery		nal Dialysis	
Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	Newborn WellBaby		itpatient rgery	
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergen	cy Ce	entral Plant	
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Su Se	pport rvices	
Skilled Nursing	Inpatient Beds	0		Administration				
Total Beds this Building		0						
OSHPD FDD SB499 Report	Da	ata Last Update:	12/19/2018	3 Submissior	Date: 12/19/2018	Printed: 12/21	/2018 6:30 AM	

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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-4, AD and SPC-5 per Section 130061(e)							
Building Number: BLD-02528 Building Name: Emergency Generator Building								
Type of Service Prov	vided							
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/D		habilitation erapy	
IntensiveCare	Inpatient Beds	0		Anesthesia				
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	enal Dialysis	
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		itpatient rgery	
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Ce	entral Plant	
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Su Su Se	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 E	Date: 12/19/2018	Printed: 12/21	/2018 6:30 AM	

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Include information on the number of inpatient k 4D and SPC-5 per Section 130061(e)	peds by type of unit provided by buildings that	at are classified as SPC-2, SPC-3,	SPC-4, SPC-
Building Number: BLD-02523 Build	<b>ling Name:</b> Main Hospital Building		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 25 Inpatient 919 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t O
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0
Coronary Care	Chemical Dependency		Beds this ling Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servi	25
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Include information on the number of inpatient k 4D and SPC-5 per Section 130061(e)	peds by type of unit provided by buildings tha	t are classified as SPC-2, SPC-3,	SPC-4, SPC-					
Building Number:     BLD-02526     Building Name:     16-Bed Addition								
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O					
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O					
Pediatric	Intensive Care Newborn Nursery	Intermediate Care						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0					
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O					
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0					
OSHPD FDD SB499 Report Data Last U	pdate: 12/19/2018 Submission Date:	12/19/2018 Printed: 12/21	/2018 6:30 AM					

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Include information on the number of inpatient to 4D and SPC-5 per Section 130061(e)	peds by type of unit provided by buildings tha	t are classified as SPC-2, SPC-3	, SPC-4, SPC-					
Building Number:     BLD-02527     Building Name:     Lab and Radiology Addition								
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Pediatric	Intensive Care Newborn Nursery	Intermediate Care						
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	/					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0					
Coronary Care	Chemical Dependency	Building Per Buil	al Beds this ding Per					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	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-02528         Building Name:         Emergency Generator Building		ing		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient <u>0</u> Inpatie Bed Days	nt 0	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care		
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0	
Intensive Care	Rehabilitation Center	Int. Care / Developmentall Disabled	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatie Bed Days	nt 0	
Coronary Care	Chemical Dependency	Building Per Bui	al Beds this Iding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Ser	0	
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