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	d Year of Report per Section 130061(e)	
Facility Number:	10009		
Facility Name:	Enloe M	ledical Center - Cohasset	
Address:	560 Coh	nasset Rd	
City:	Chico		
Hospital Owner/Lic	ensee:	Mike Wiltermood	
Year of Rep	porting:	2019	
Contact 1 e-mail A	ddress:	[Confidential data left blank intentionally.]	
Contact 2 e-mail Ad	ddress:	[Confidential data left blank intentionally.]	
Contact 3 e-mail Ad	ddress::	[Confidential data left blank intentionally.]	
Name of Sub	bmitter:	Leonard V Fisher	
Submission	n Date:	10/10/2019 1:58:46 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- 00101	Original Hospital and	560 Cohasset Rd	Rebuild	SPC5	01/01/2013	01/01/2020

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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).

Building	No: BLD-0	0101	Original Hospital and Additions		Retrofit/Re	eplacement	Yes-Subr	nitted	
Facility Number	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
10013	HS041907-0	0	FOUNDATIONS, SPREAD FOOTINGS & DRILLED PIERS/RE HS042981-04	8/16/2004	8/31/2006 12:00:00 AM	09/19/2006	06/01/2012	CLOS	No
10013	HS042981-0	0	SITEWORK, UTIL, ARCH, PRIMARY STRUCTURE,MECH & PLUMBING/RE HS041907-04	12/17/200 4	2/20/2007 12:00:00 AM	03/06/2007		CLOS	No

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Provide the number of	f inpatient bed	ds and patient days per type of service p	er building per Section 130061(c)(1)(F)
Building Number: BL	D-00101	Building Name:	riginal 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 Dietetic	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
	beus	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Plant

Report Year: 2019 10009 **Enloe Medical Center - Cohasset** Chico Page:5 of 35 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-00101 **Building Number: Building Name:** Original Hospital and Additions 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 0 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

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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-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	new buildings to be constructed at this or another site.		
Building Number	Building Name	New Site	
N_1	Magnolia Tower	X	

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The proje replaced The plans replaced	uilding or buildings to be cted date or dates the or rebuild buildings as ned uses of the building or rebuild buildings as ient service currently or	building w well. g or buildir well.	ill be removed from	m service per Sec from acute care	ction 130061 (c)(2 service per Section)(A) and provi on 130061(c)(2		
Building N	Number: BLD-00101	I	Original H	lospital and Addit	ions	Removal Date:	12/31/2019]
Planned I	Jses for the building to	be remov	ed from acute car	e service:				
Planned	use for building: Med	dical Office	Building	Jurisdiction:	Local Authority			
Inpatient	services currently deliv	vered in the	e building:					
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Ш	IntensiveCare		Anesthesia			_	_	
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery		Renal Dialysis	3
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	[Central Plant	
	Intermediate Care		Dietetic		Nuclear Medicine	[Support Services	
	Skilled Nursing		Administration					

Report Year: Chico 2019 10009 Enloe Medical Center - Cohasset Page:9 of 35 No data reported for Section 130061(c)(2)(D).

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No data reporte	ed for whethe	er the genera	al acute care services and beds will be relo	ocated to a	new, existing or retrofitted build	ding and any
corresponding	building sites	or project i	numbers for buildings with a building feeso	idilori or TX	ebulla of Replace per decilo	11 130001(c)(2)(L).

Report Year: 10009 Enloe Medical Center - Cohasset Chico 2019 Page:12 of 35 No data reported for Section 130061(c)(3).

ling Number:	BLD-00101 Buildin	ng Name: O	riginal Hospital and A	dditions		
ype of Service	e Provided		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing		Anesthesia			
	IntensiveCare		Clinical Lab		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent				Newborn/ WellBaby	Outpatient Surgery
	Psychiatric Nursing		Radiological/ Imaging	_	·	
	-		Pharmaceutical	Ш	Emergency	Central Plant
	Obstetrical Ante/Postprtum		Dietetic		Nuclear Medicine	Support Services
	Intermediate Care		Administration			
	Skilled Nursing					

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Report the final configuration of all built requirements whether by retrofit or by per Section 130061(c)(5)	ldings on the hospital campus show replacement and the type of service	ving how each building will comply v e that will be provided in each gene	vith the SPC-5/NPC-4 or 5 ral acute care hospital building
Building Number: BLD-00101	Building Name: Original Hospita	I and Additions	
Configuration: N/A			
Type of Service 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	Emergency	Central Plant
Intermediate	Dietetic	Emergency	Central Flant
Care	Administration	Nuclear Medicine	Support Services
Skilled Nursing			

Report Year: 201	9 10009 E	nloe Medica	l Center - Cohasset		Chico		Page:15 of 35
Report the final confirequirements whether per Section 130061(er by retrofit or by re	ngs on the placement	hospital campus showin and the type of service t	g how e hat will t	ach building will comply wi be provided in each genera	th the SPoll acute ca	C-5/NPC-4 or 5 are hospital building
Building Number:	BLD-00102	Building Nar	me: Radiology Addition	1			
Configuration:	N/A						
Type of Service F	Provided						
Nurs	sing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	nsiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
Ped esce	liatric/Adol ent		Clinical Lab		recovery		
Psyc Nurs	chiatric sing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical e/Postprtum		Pharmaceutical		Emergency		Central Plant
Intel Care	rmediate e		Dietetic		Nuclear Medicine		Support
Skill	led Nursing		Administration				Services

		hospital campus show	vina how e	Chico	with the SF	Page:16 of 35
ther by retrofit or by re 1(c)(5)	eplacement	and the type of service	e that will	be provided in each gen	eral acute o	are hospital building
BLD-00103	Building Na	me: Behavioral Heal	th & Admi	nistration		
N/A						
e Provided						
ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
tensiveCare		Anesthesia		Obstetrical		Renal Dialysis
ediatric/Adol scent		Clinical Lab		Recovery		
sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
bstetrical nte/Postprtum		Pharmaceutical		Emorgonov		Central Plant
termediate		Dietetic				Ociliai Fialit
are killed Nursing		Administration		Nuclear Medicine		Support Services
t t t t t t t t t t t t t t t t t t t	nfiguration of all build ther by retrofit or by ret	nfiguration of all buildings on the ther by retrofit or by replacement 1(c)(5) BLD-00103 Building Na N/A Provided ursing tensiveCare ediatric/Adol scent sychiatric ursing bstetrical nte/Postprtum termediate are	nfiguration of all buildings on the hospital campus show ther by retrofit or by replacement and the type of service 1(c)(5) BLD-00103 Building Name: Behavioral Health N/A Provided	nfiguration of all buildings on the hospital campus showing how ether by retrofit or by replacement and the type of service that will 1(c)(5) BLD-00103	Infiguration of all buildings on the hospital campus showing how each building will comply their by retrofit or by replacement and the type of service that will be provided in each general (c)(5) BLD-00103	Infiguration of all buildings on the hospital campus showing how each building will comply with the SF ther by retrofit or by replacement and the type of service that will be provided in each general acute of 1(c)(5) BLD-00103

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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 Name: Radiology Addition											
Configuration: N/A											
Type of Service P	rovided										
Nursi	ing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
Inten	siveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis				
Pedia escer	atric/Adol nt		Clinical Lab		Recovery						
Psyc Nursi	hiatric ing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
	etrical /Postprtum		Pharmaceutical		Emergency		Central Plant				
Interr Care	mediate		Dietetic		Nuclear Medicine		Support				
Skille	ed Nursing		Administration	_		_	Services				

Report Year: 201	9 10009 Er	loe Medica	l Center - Cohasset		Chico		Page:18 of 35			
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 E	Building Nar	ne: Central Stores							
Configuration: N/A										
Type of Service F	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 e		Dietetic		Nuclear Medicine		Support			
Skille	ed Nursing		Administration				Services			

Report Year: 2019 10	Enloe Medica	al Center - Cohasset		Chico		Page:19 of 35				
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-001	106 Building Na	me: Cardiac Cath Lab								
Configuration: N/A										
Type of Service Provided	t l									
Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
IntensiveCar	re	Anesthesia		Obstetrical Recovery		Renal Dialysis				
Pediatric/Addescent	ol	Clinical Lab		recovery						
Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
Obstetrical Ante/Postprt	tum	Pharmaceutical		Emergency		Central Plant				
Intermediate Care	,	Dietetic		Nuclear Medicine	П	Support				
Skilled Nursi	ing	Administration				Services				

Report Year: 201	19 10009 Enlo	e Medica	l Center - Cohasset		Chico		Page:20 of 35			
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 equirements 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 Bu	ilding Nar	me: Administration							
Configuration: N/A										
Type of Service I	Provided									
Nur	sing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Inte	nsiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
Ped	liatric/Adol ent		Clinical Lab		recovery					
	chiatric sing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	stetrical e/Postprtum		Pharmaceutical		F		Control Blood			
	rmediate		Dietetic		Emergency	Ш	Central Plant			
Car			Administration		Nuclear Medicine		Support Services			
Skill	led Nursing									

Report Year: 201	10009 E	nloe Medica	l Center - Cohasset		Chico		Page:21 of 35					
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:	Building Number: BLD-00108 Building Name: Surgery Addition											
Configuration: N/A												
Type of Service I	Provided											
Nur	sing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
Inte	nsiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis					
Ped	liatric/Adol ent		Clinical Lab		receivery							
	chiatric sing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery					
	stetrical e/Postprtum		Pharmaceutical		Emergency		Central Plant					
Inte Car	rmediate e		Dietetic		Nuclear Medicine		Support					
Skill	led Nursing		Administration				Services					

Report Year: Include ir 4D and S		he number of in	oe Medical Ce			Chi		SPC-2,	Page:22 of 35 SPC-3, SPC-4, SPC-
Building N	Number: BLD	-00102	Building N	ame: Rac	diology Addition				
Type of	Service Provi	<u>ded</u>							
Nu	ırsing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	ensiveCare	Inpatient Beds	0		Anesthesia				
	ediatric/Adol cent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	F	Renal Dialysis
	ychiatric ırsing	Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical te/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency		Central Plant
Int Ca	ermediate are	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services
Sk	illed Nursing	Inpatient Beds	0		Administration				
	tal Beds this ilding		0						

eport Year: 2019	10009	Enloe Medical Cer	iter - Cohasset	Chico	Page:23 of 35
Include information on 4D and SPC-5 per Sec	the number option 130061(of inpatient beds by e)	type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-00103	Building Nar	me: Behavioral Health & A	Administration	
Type of Service Prov	<u>vided</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	30	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient 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		30			

eport Year: 2019	10009 E	nloe Medical Cen	ter - Cohasset	Chico	Page:24 of 35
Include information on 4D and SPC-5 per Sec	the number of tion 130061(e	f inpatient beds by	type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLI	D-00104	Building Nar	ne: Radiology Addition		
Type of Service Prov	<u>/ided</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	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient 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			

port Year:	2019 10009	Enloe Medical Cer	nter - Cohasset	Chico	Page:25 of 35
Include inforn 4D and SPC-	nation on the number of 5 per Section 130061(of inpatient beds by e)	type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Num	ber: BLD-00105	Building Na	me: Central Stores		
Type of Ser	vice Provided				
Nursin	g Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Intensi	veCare Inpatient Beds	0	Anesthesia		
Pediati escent	ric/Adol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychi Nursin		0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstet Ante/P	rical Inpatient ostprtum Beds	0	Pharmaceutical	Emergency	Central Plant
Interme Care	ediate Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled	Nursing Inpatient Beds	0	Administration		
Total B Buildin	Beds this	0			

eport Year: 2019	10009 E	Enloe Medical Cen	ter - Cohasset	Chico	Page:26 of 35
Include information on 4D and SPC-5 per Sec	the number option 130061(e	f inpatient beds by	type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLI	D-00106	Building Nar	ne: Cardiac Cath Lab		
Type of Service Prov	<u>/ided</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/Postprtum	Inpatient 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			

eport Year: 2019	10009 E	Enloe Medical Cer	ter - Cohasset	Chico	Page:27 of 35
Include information on 4D and SPC-5 per Sec	the number option 130061(6	f inpatient beds by	type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-00107	Building Nar	me: Administration		
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	Central Plant
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	X Administration		
Total Beds this Building		0			

teport Year: 2019	10009	Enloe Medical Cen	ter - Cohasset	Chico	Page:28 of 35
Include information on 4D and SPC-5 per Sec	the number o	f inpatient beds by e)	type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BLI	D-00108	Building Nar	ne: Surgery Addition		
Type of Service Prov	<u>/ided</u>				
Nursing	Inpatient Beds	0	X 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	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, SPC-4D and SPC-5 per Section 130061(e) BLD-00102 **Building Name:** Radiology Addition **Building Number:** 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

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Include information on t 4D and SPC-5 per Sect		eds by type of unit provided by bu	ildings that a	re classified as SPC-2, SPC	-3, SPC-4, SPC-
Building Number:	LD-00103 Build	ing Name: Behavioral Health	h & Administr	ation	
Medical / Surgical (Inc	lude GYN)	Acute Respiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0	Inpatient 30 Inpat Days	
Perinatal (Exclude Nev	wborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0	Inpatient 0 Inpat Days	
Pediatric		Intensive Care Newborn Nursery		Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0	Inpatient 0 Inpat Bed Days	
Intensive Care		Rehabilitation Center		Int. Care / Developmenta Disabled	lly
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0	Inpatient 0 Inpat Bed Days	
Coronary Care		Chemical Dependency			otal Beds this uilding Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0		30

Report Year: 2019 10009 **Enloe Medical Center - Cohasset** Chico Page:31 of 35 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-00104 Radiology Addition **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 Days Bed Days Bed ol 0

Report Year: 2019 10009 **Enloe Medical Center - Cohasset** Chico Page:32 of 35 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-00105 **Central Stores 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

Days

ol

0

Bed

Bed

Days

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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-

Include information on the number of inpa 4D and SPC-5 per Section 130061(e)	tient beds by type of unit provide	d by buildings that are classified as SPC-	2, SPC-3, SPC-4, SPC-
Building Number: BLD-00106	Building Name: Cardiac C	Cath Lab	
Medical / Surgical (Include GYN)	Acute Respiratory Care	e Acute Psychiatric	
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient Day	patient 0 Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient Day	patient 0 Inpatient 0 Bed	Inpatient 0 Days
Pediatric	Intensive Care Newbor Nursery	n Intermediate Care	,
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient Day	patient 0 Inpatient 0 Bed	Inpatient 0 Days
Intensive Care	Rehabilitation Center	Int. Care / Develop Disabled	omentally
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient Day	patient 0 Inpatient 0 Bed	Inpatient 0 Days
Coronary Care	Chemical Dependency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient Day	eatient 0 Unit	Service 0

Report Year: 2019 10009 **Enloe Medical Center - Cohasset** Chico Page:34 of 35 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-00107 Administration **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 Days Bed Days Bed ol 0

Report Year: 2019 10009 **Enloe Medical Center - Cohasset** Chico Page:35 of 35 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-00108 Surgery Addition **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 Days Bed Days Bed ol 0