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

Facility Number:	10049	
Facility Name:	Contra Costa Regional Medical Center	
Address:	2500 Alhambra Avenue	
City:	Martinez	
Hospital Owner/Lice	nsee: Contra Costa Regional Hospital	
Year of Rep	rting: 2012	
Contact 1 e-mail Ad	ress:	
Contact 2 e-mail Ad	ress:	
Contact 3 e-mail Add	ess::	
Name of Sub	nitter: Anna Roth	
Submission	Date: 1/4/2013 12:48:30 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 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- 03852	Cafeteria	2500 Alhambra Avenue	Retrofit	SPC2	01/01/2015	04/15/2013
BLD- 05505	Lower Generator Building	2500 Alhambra Avenue	Retrofit	SPC2	01/01/2015	04/15/2013

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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-03852	Cafeteria Cafeteria	Retrofit/Replacement Yes-Submitted Project:
Facility Number	Project Sub Number Num	Scope	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10049	P-2011- 00966	0 Kitchen/Cafeteria Seismic Retrofit	12/29/2011 4/23/2012 01/15/2013 04/15/2013 PEND No 12:00:00 12:00:00 AM AM

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## Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: BL	_D-03852	Building Name:	Cafeteria
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/ Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical   Rehabilitation   Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration Renal Dialys
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Outpatient Services Surgery
		Total Beds this Building	Cesarean/Deliv Central Plant

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### Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: BL	.D-05505	Building Name:	ower Generator Building	
Type of Service Prov	<u>rided</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  Total Beds this 0	Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

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### Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number:	BLD-03852	Building Name:	Cafeteria				
Medical / Surgical (	Include GYN)	Acute Respira	itory Care	Acute Psychiatric	Acute Psychiatric		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse N	Newborn / GYN)	Burn		Skilled Nursing			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Pediatric		intensive Care Nursery	e Newborn	Intermediate Card			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	ent		
	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days		
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service		
	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	0	0		

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#### Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number:	BLD-05505	Building Name: Lowe	er Generator Building			
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 I	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 New Nursery	vborn	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 / developn 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	

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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-02468	1 - Main Hospital	Remain
BLD-02469	16 - Main Entrance Canopy	Remain
BLD-03719	2 - Clinical Lab	Remain
BLD-03852	Cafeteria	Retrofit
BLD-05505	Lower Generator Building	Retrofit

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	BLD-03852 Buildin	g Name: Ca	afeteria								
Type of Service Provided											
			Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	Nursing		Anesthesia								
	IntensiveCare		7 11 10 11 10 10		Obstetrical Recovery		Renal Dialysis				
	Pediatric/Adol		Clinical Lab				Outpatient				
	escent		Radiological/	Ш	Newborn/ WellBaby		Surgery				
	Psychiatric Nursing		Imaging  Pharmaceutical		Emergency		Central Plant				
	Obstetrical		rnamaceuticai		Lineigoney		Central Flant				
Ш	Ante/Postprtum	X	Dietetic		Nuclear Medicine		Support Services				
	Intermediate Care										
	Oute		Administration								
	Skilled Nursing										

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	BLD-05505	Building Name:	Lo	ower Generator Buildin	ıg			]
Type of Service	e Provided							
				Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
	Nursing			Anesthesia				
	IntensiveCare					Obstetrical Recovery	Renal Dialysis	
	Pediatric/Adol escent			Clinical Lab			Outpatient	
		] [		Radiological/ Imaging	Ш	Newborn/ WellBaby	Surgery	
Ш	Psychiatric Nursing			Pharmaceutical		Emergency	Central Plant	
	Obstetrical Ante/Postprtur	m   ,		Diototio		Nuclear Medicine	Support Services	
				Dietetic			23.1.000	
Ш	Intermediate Care			Administration				
П	Skilled Nursing	g						

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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 actue care hospital building per Section 130061(c)(5)

Building Number: BLD-02468 Building Name: 1 - Main Hospital									
Configuration:	N/A								
Type of Servi	ice Provided								
X	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy		
X	IntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis		
	Pediatric/Adol escent		Clinical Lab		Recovery				
	Psychiatric Nursing	X	Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency		Central Plant		
	Intermediate		Dietetic						
	Care Skilled Nursing		Administration	X	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 actue care hospital building per Section 130061(c)(5)

Building Number: BLD-02469 Building Name: 16 - Main Entrance Canopy									
Configuration:	N/A								
Type of Serv	vice 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	П	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 actue care hospital building per Section 130061(c)(5)

								_
Building Number:	BLD-03719	Building Na	me: 2 - Clinical Lab					
Configuration:	Configuration: N/A							
Type of Service	Provided							
☐ Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Int	ensiveCare		Anesthesia		Obstetrical		Renal Dialysis	
	ediatric/Adol cent		Clinical Lab		Recovery			
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	ostetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant	
	ermediate		Dietetic				22.11.3.1.13.11	
Ca	are silled 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 actue care hospital building per Section 130061(c)(5)

Building Number:	BLD-03852	Building Nar	me: Cafeteria							
Configuration:	Configuration: Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030									
Type of Service	Provided									
☐ Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
Int	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis			
	ediatric/Adol cent		Clinical Lab		Recovery					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	ostetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	termediate	X	Dietetic				os.mar ram			
	are killed Nursing		Administration		Nuclear Medicine		Support Services			

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number	: BLD-05505	Building Na	me: Lower Generato	or Building			
Configuration: Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030							
Type of Servi	ce 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		Emergency		Central Plant
	Intermediate Care		Dietetic		Nuclear Medicine		Support
	Skilled Nursing		Administration		Nucleal Medicine	Ш	Support 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, and SPC-5 per Section 130061(e)

Buildi	ng Number: BLC	0-02468	Building N	Name: 1 -	Main Hospital		
Туре	e of Service Prov	<u>ided</u>					
X	Nursing	Inpatient Beds	99	X	Surgical	X Obstetrical Cesarean/Deliv	X Rehabilitation Therapy
X	IntensiveCare	Inpatient Beds	14	X	Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Renal Dialysis
X	Psychiatric Nursing	Inpatient Beds	43	X	Radiological/ Imaging	X Newborn/ WellBaby	Outpatient Surgery
X	Obstetrical Ante/Postprtum	Inpatient Beds	10	X	Pharmaceutical	X Emergency	Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	X Nuclear Medicine	Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		166				

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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, and SPC-5 per Section 130061(e)

Building Number: BI	_D-02469	Building N	Name: 16	- Main Entrance (	Canopy	
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/Postprtum	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 the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: BL	D-03719	Building I	Name: 2 - Clinical Lab		
Type of Service Pro	<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	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			

Report Status: **Data Last Update:** 01/04/2013 **Submission Date:** 01/04/2013 **Print Date:** 1/5/2013 6:25 AM

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number:	BLD-02468 Build	ing Name: 1 - N	lain Hospital		
Medical / Surgical (Ir	nclude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 99 Bed	Inpatient 20085 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 43 Bed	Inpatient 7145 Days
Perinatal (excluse No	ewborn / GYN)	Burn		Skilled Nursing	
Inpatient 10 Bed	Inpatient 6505 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care New Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 6 Bed	Inpatient 1458 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop	nent
Inpatient 8 Bed	Inpatient 2095 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	166	166

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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, and SPC-5 per Section 130061(e)

Building Number:	BLD-02469	Building Name: 10	6 - Main Entrance Canopy		
Medical / Surgical (I	nclude GYN)	Acute Respirato	ory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0	Inpatient 0 Days
Perinatal (excluse N	ewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care I Nursery	Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 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 Days	0 Inpatient Bed	0 Inpatient 0 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, and SPC-5 per Section 130061(e)

Building Number:	BLD-03719 Build	ing Name: 2 - Clinical Lab	
Medical / Surgical (Inc	lude GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Perinatal (excluse Nev	wborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Pediatric		intensive Care Newborn Nursery	Intermediate Card
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center	Int. Care / development Disabled
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 Inpatient 0 Inpatient 0 Days
Coronary Care		Chemical Dependency	Total Beds this Building Per Unit Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	0 0 0

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