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

Facility Number: 10202

Facility Name: Southern Inyo Hospital

Address: 501 East Locust Street

City: Lone Pine

Hospital Owner/Licensee: Southern Inyo Healthcare District

Year of Reporting: 2012

Contact 1 e-mail Address:

Contact 2 e-mail Address:

Contact 3 e-mail Address::

Name of Submitter: Lee Barron

Submission Date: 10/30/2012 4:46:21 PM

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-00779	Main Hospital Building	501 East Locust Street	Retrofit	SPC2	01/01/2020	01/01/2020
BLD-00780	Maintenance Building	501 East Locust Street	Retrofit	SPC2	01/01/2020	01/01/2020
BLD-00782	East Wing Addition	501 East Locust Street	Retrofit	SPC2	01/01/2020	01/01/2020
BLD-00789	Laundry Building	501 East Locust Street	Retrofit	SPC2	01/01/2020	01/01/2020
BLD-00790	Storage Building	501 East Locust Street	Retrofit	SPC2	01/01/2020	01/01/2020

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

Building Number: **BLD-00779**   Building Name: **Main Hospital Building**

Type of Service Provided

[X] Nursing	Inpatient Beds	4	Inpatient Days	260	[ ] Surgical
[ ] IntensiveCare	Inpatient Beds	0	Inpatient Days	0	[ ] Anesthesia
[ ] Pediatric/Adolescent	Inpatient Beds	0	Inpatient Days	0	[ ] Clinical Lab
[ ] Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	0	[ ] Radiological/Imaging
[ ] Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days	0	[ ] Pharmaceutical
[ ] Intermediate Care	Inpatient Beds	0	Inpatient Days	0	[ ] Dietetic
[X] Skilled Nursing	Inpatient Beds	11	Inpatient Days	3895	[ ] Administration

Right column services:
- [ ] Surgical
- [ ] Anesthesia
- [ ] Clinical Lab
- [ ] Radiological/Imaging
- [ ] Pharmaceutical
- [ ] Dietetic
- [ ] Administration
- [ ] Support Services
- [ ] Obstetrical Cesarean/Deliv
- [ ] Obstetrical Recovery
- [ ] Newborn/WellBaby
- [ ] Emergency
- [ ] Nuclear Medicine
- [ ] Rehabilitation Therapy
- [ ] Renal Dialysis
- [ ] Outpatient Surgery
- [ ] Central Plant

Total Beds this Building: **15**

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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

Building Number: **BLD-00780**   Building Name: **Maintenance Building**

Type of Service Provided

☐ Nursing	Inpatient Beds `0`	Inpatient Days `0`
☐ IntensiveCare	Inpatient Beds `0`	Inpatient Days `0`
☐ Pediatric/Adolescent	Inpatient Beds `0`	Inpatient Days `0`
☐ Psychiatric Nursing	Inpatient Beds `0`	Inpatient Days `0`
☐ Obstetrical Ante/Postprtum	Inpatient Beds `0`	Inpatient Days `0`
☐ Intermediate Care	Inpatient Beds `0`	Inpatient Days `0`
☐ Skilled Nursing	Inpatient Beds `0`	Inpatient Days `0`

Total Beds this Building `0`

☐ Surgical
☐ Anesthesia
☐ Clinical Lab
☐ Radiological/Imaging
☐ Pharmaceutical
☐ Dietetic
☐ Administration
☐ Support Services
☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery
☐ Newborn/WellBaby
☐ Emergency
☐ Nuclear Medicine
☐ Rehabilitation Therapy
☐ Renal Dialysis
☐ Outpatient Surgery
☒ Central Plant

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

Building Number: **BLD-00782**   Building Name: **East Wing Addition**

Type of Service Provided

☐ Nursing	Inpatient Beds	0	Inpatient Days	0	☐ Surgical	☐ Obstetrical Recovery
☐ IntensiveCare	Inpatient Beds	0	Inpatient Days	0	☐ Anesthesia	☐ Newborn/WellBaby
☐ Pediatric/Adolescent	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	
☐ Intermediate Care	Inpatient Beds	0	Inpatient Days	0	☐ Dietetic	☐ Rehabilitation Therapy
☒ Skilled Nursing	Inpatient Beds	16	Inpatient Days	5710	☐ Administration	☐ Renal Dialysis
	Total Beds this Building			16	☐ Support Services	☐ Outpatient Surgery
					☐ Obstetrical Cesarean/Deliv	☐ Central Plant

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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

Building Number: **BLD-00789**   Building Name: **Laundry Building**

Type of Service Provided

☐ Nursing	Inpatient Beds	0	Inpatient Days 0
☐ IntensiveCare	Inpatient Beds	0	Inpatient Days 0
☐ Pediatric/Adolescent	Inpatient Beds	0	Inpatient Days 0
☐ Psychiatric Nursing	Inpatient Beds	0	Inpatient Days 0
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days 0
☐ Intermediate Care	Inpatient Beds	0	Inpatient Days 0
☐ Skilled Nursing	Inpatient Beds	0	Inpatient Days 0

Total Beds this Building: **0**

☐ Surgical
☐ Anesthesia
☐ Clinical Lab
☐ Radiological/Imaging
☐ Pharmaceutical
☐ Dietetic
☐ Administration
☒ Support Services
☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery
☐ Newborn/WellBaby
☐ Emergency
☐ Nuclear Medicine
☐ Rehabilitation Therapy
☐ Renal Dialysis
☐ Outpatient Surgery
☐ Central Plant

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

Building Number: **BLD-00790**   Building Name: **Storage Building**

Type of Service Provided

☐ Nursing	Inpatient Beds	0	Inpatient Days	0
☐ IntensiveCare	Inpatient Beds	0	Inpatient Days	0
☐ Pediatric/Adolescent	Inpatient Beds	0	Inpatient Days	0
☐ Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	0
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days	0
☐ Intermediate Care	Inpatient Beds	0	Inpatient Days	0
☐ Skilled Nursing	Inpatient Beds	0	Inpatient Days	0

Total Beds this Building   0

☐ Surgical
☐ Anesthesia
☐ Clinical Lab
☐ Radiological/ Imaging
☐ Pharmaceutical
☐ Dietetic
☐ Administration
☒ Support Services
☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery
☐ Newborn/ WellBaby
☐ Emergency
☐ Nuclear Medicine
☐ Rehabilitation Therapy
☐ Renal Dialysis
☐ Outpatient Surgery
☐ Central Plant

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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

Building Number: BLD-00779   **Building Name:** Main Hospital Building

Medical / Surgical (Include GYN)

| Inpatient Bed | 4 | Inpatient Days | 260 |

Acute Respiratory Care

| Inpatient Bed | 0 | Inpatient Days | 0 |

Acute Psychiatric

| Inpatient Bed | 0 | Inpatient Days | 0 |

Perinatal (exclude Newborn / GYN)

| Inpatient Bed | 0 | Inpatient Days | 0 |

Burn

| Inpatient Bed | 0 | Inpatient Days | 0 |

Skilled Nursing

| Inpatient Bed | 11 | Inpatient Days | 3895 |

Pediatric

| Inpatient Bed | 0 | Inpatient Days | 0 |

intensive Care Newborn Nursery

| Inpatient Bed | 0 | Inpatient Days | 0 |

Intermediate Card

| Inpatient Bed | 0 | Inpatient Days | 0 |

Intensive Care

| Inpatient Bed | 0 | Inpatient Days | 0 |

Rehabilitation Center

| Inpatient Bed | 0 | Inpatient Days | 0 |

Int. Care / development Disabled

| Inpatient Bed | 0 | Inpatient Days | 0 |

Coronary Care

| Inpatient Bed | 0 | Inpatient Days | 0 |

Chemical Dependency

| Inpatient Bed | 0 | Inpatient Days | 0 |

Total Beds this Building Per Unit

| 15 |

Total Beds this Building Per Service

| 15 |

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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

Building Number: BLD-00780   **Building Name:** Maintenance Building

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Medical / Surgical (Include GYN)

Inpatient Bed [0]   Inpatient Days [0]

Acute Respiratory Care

Inpatient Bed [0]   Inpatient Days [0]

Acute Psychiatric

Inpatient Bed [0]   Inpatient Days [0]

Perinatal (exclude Newborn / GYN)

Inpatient Bed [0]   Inpatient Days [0]

Burn

Inpatient Bed [0]   Inpatient Days [0]

Skilled Nursing

Inpatient Bed [0]   Inpatient Days [0]

Pediatric

Inpatient Bed [0]   Inpatient Days [0]

intensive Care Newborn Nursery

Inpatient Bed [0]   Inpatient Days [0]

Intermediate Card

Inpatient Bed [0]   Inpatient Days [0]

Intensive Care

Inpatient Bed [0]   Inpatient Days [0]

Rehabilitation Center

Inpatient Bed [0]   Inpatient Days [0]

Int. Care / development Disabled

Inpatient Bed [0]   Inpatient Days [0]

Coronary Care

Inpatient Bed [0]   Inpatient Days [0]

Chemical Dependency

Inpatient Bed [0]   Inpatient Days [0]

Total Beds this Building Per Unit [0]   **Total Beds this Building Per Service** [0]

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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

Building Number: BLD-00782   **Building Name:** East Wing Addition

Medical / Surgical (Include GYN)

Inpatient Bed `0`   Inpatient Days `0`

Acute Respiratory Care

Inpatient Bed `0`   Inpatient Days `0`

Acute Psychiatric

Inpatient Bed `0`   Inpatient Days `0`

Perinatal (exclude Newborn / GYN)

Inpatient Bed `0`   Inpatient Days `0`

Burn

Inpatient Bed `0`   Inpatient Days `0`

Skilled Nursing

Inpatient Bed `16`   Inpatient Days `5710`

Pediatric

Inpatient Bed `0`   Inpatient Days `0`

intensive Care Newborn Nursery

Inpatient Bed `0`   Inpatient Days `0`

Intermediate Card

Inpatient Bed `0`   Inpatient Days `0`

Intensive Care

Inpatient Bed `0`   Inpatient Days `0`

Rehabilitation Center

Inpatient Bed `0`   Inpatient Days `0`

Int. Care / development Disabled

Inpatient Bed `0`   Inpatient Days `0`

Coronary Care

Inpatient Bed `0`   Inpatient Days `0`

Chemical Dependency

Inpatient Bed `0`   Inpatient Days `0`

Total Beds this Building Per Unit

`16`

Total Beds this Building Per Service

`16`

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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

Building Number: BLD-00789   **Building Name:** Laundry Building

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Medical / Surgical (Include GYN)

Inpatient Bed [0]   Inpatient Days [0]

Acute Respiratory Care

Inpatient Bed [0]   Inpatient Days [0]

Acute Psychiatric

Inpatient Bed [0]   Inpatient Days [0]

Perinatal (exclude Newborn / GYN)

Inpatient Bed [0]   Inpatient Days [0]

Burn

Inpatient Bed [0]   Inpatient Days [0]

Skilled Nursing

Inpatient Bed [0]   Inpatient Days [0]

Pediatric

Inpatient Bed [0]   Inpatient Days [0]

intensive Care Newborn Nursery

Inpatient Bed [0]   Inpatient Days [0]

Intermediate Card

Inpatient Bed [0]   Inpatient Days [0]

Intensive Care

Inpatient Bed [0]   Inpatient Days [0]

Rehabilitation Center

Inpatient Bed [0]   Inpatient Days [0]

Int. Care / development Disabled

Inpatient Bed [0]   Inpatient Days [0]

Coronary Care

Inpatient Bed [0]   Inpatient Days [0]

Chemical Dependency

Inpatient Bed [0]   Inpatient Days [0]

Total Beds this Building Per Unit

[0]

Total Beds this Building Per Service

[0]

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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

Building Number: BLD-00790 **Building Name:** Storage Building

Medical / Surgical (Include GYN)

Inpatient Bed [0] Inpatient Days [0]

Acute Respiratory Care

Inpatient Bed [0] Inpatient Days [0]

Acute Psychiatric

Inpatient Bed [0] Inpatient Days [0]

Perinatal (exclude Newborn / GYN)

Inpatient Bed [0] Inpatient Days [0]

Burn

Inpatient Bed [0] Inpatient Days [0]

Skilled Nursing

Inpatient Bed [0] Inpatient Days [0]

Pediatric

Inpatient Bed [0] Inpatient Days [0]

intensive Care Newborn Nursery

Inpatient Bed [0] Inpatient Days [0]

Intermediate Card

Inpatient Bed [0] Inpatient Days [0]

Intensive Care

Inpatient Bed [0] Inpatient Days [0]

Rehabilitation Center

Inpatient Bed [0] Inpatient Days [0]

Int. Care / development Disabled

Inpatient Bed [0] Inpatient Days [0]

Coronary Care

Inpatient Bed [0] Inpatient Days [0]

Chemical Dependency

Inpatient Bed [0] Inpatient Days [0]

Total Beds this Building Per Unit

[0]

Total Beds this Building Per Service

[0]

Report Status: **Data Last Update:** 10/30/2012 **Submission Date:** 10/30/2012 **Print Date:** 11/5/2012 1:26 PM

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-00779	Main Hospital Building	Retrofit
BLD-00780	Maintenance Building	Retrofit
BLD-00782	East Wing Addition	Retrofit
BLD-00784	Diagnostics & Treatment Addition	Retrofit
BLD-00785	Patient Room Addition	Retrofit
BLD-00786	Storage Room Addition	Retrofit
BLD-00787	Boiler Room Addition	Retrofit
BLD-00789	Laundry Building	Retrofit
BLD-00790	Storage Building	Retrofit

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-00779] Building Name: [Main Hospital Building]

Type of Service Provided

[X] Nursing

[ ] IntensiveCare

[ ] Pediatric/Adol escent

[ ] Psychiatric Nursing

[ ] Obstetrical Ante/Postprtum

[ ] Intermediate Care

[X] Skilled Nursing

[ ] Surgical

[ ] Anesthesia

[ ] Clinical Lab

[ ] Radiological/ Imaging

[ ] Pharmaceutical

[ ] Dietetic

[ ] Administration

[ ] Obstetrical Cesarean/Deliv

[ ] Obstetrical Recovery

[ ] Newborn/ WellBaby

[ ] Emergency

[ ] Nuclear Medicine

[ ] Rehabilitation Therapy

[ ] Renal Dialysis

[ ] Outpatient Surgery

[ ] Central Plant

[ ] Support Services

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00780 Building Name: Maintenance Building

Type of Service Provided

☐ Nursing

☐ IntensiveCare

☐ Pediatric/Adolescent

☐ Psychiatric Nursing

☐ Obstetrical Ante/Postprtum

☐ Intermediate Care

☐ Skilled Nursing

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☒ Central Plant

☐ Support Services

Report Status: **Data Last Update:** 10/30/2012 **Submission Date:** 10/30/2012 **Print Date:** 11/5/2012 1:26 PM

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-00782   Building Name: East Wing Addition

Type of Service Provided

☐ Nursing	☐ Surgical
☐ IntensiveCare	☐ Anesthesia
☐ Pediatric/Adolescent	☐ Clinical Lab
☐ Psychiatric Nursing	☐ Radiological/Imaging
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical
☐ Intermediate Care	☐ Dietetic
☒ Skilled Nursing	☐ Administration

☐ Obstetrical Cesarean/Deliv
☐ Obstetrical Recovery
☐ Newborn/WellBaby
☐ Emergency
☐ Nuclear Medicine

☐ Rehabilitation Therapy
☐ Renal Dialysis
☐ Outpatient Surgery
☐ Central Plant
☐ Support Services

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-00789   Building Name: Laundry Building

Type of Service Provided

- [ ] Nursing
- [ ] IntensiveCare
- [ ] Pediatric/Adolescent
- [ ] Psychiatric Nursing
- [ ] Obstetrical Ante/Postprtum
- [ ] Intermediate Care
- [ ] Skilled Nursing

- [ ] Surgical
- [ ] Anesthesia
- [ ] Clinical Lab
- [ ] Radiological/Imaging
- [ ] Pharmaceutical
- [ ] Dietetic
- [ ] Administration

- [ ] Obstetrical Cesarean/Deliv
- [ ] Obstetrical Recovery
- [ ] Newborn/WellBaby
- [ ] Emergency
- [ ] Nuclear Medicine

- [ ] Rehabilitation Therapy
- [ ] Renal Dialysis
- [ ] Outpatient Surgery
- [ ] Central Plant
- [X] Support Services

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00790   Building Name: Storage Building

Type of Service Provided

- [ ] Nursing
- [ ] IntensiveCare
- [ ] Pediatric/Adolescent
- [ ] Psychiatric Nursing
- [ ] Obstetrical Ante/Postprtum
- [ ] Intermediate Care
- [ ] Skilled Nursing

- [ ] Surgical
- [ ] Anesthesia
- [ ] Clinical Lab
- [ ] Radiological/Imaging
- [ ] Pharmaceutical
- [ ] Dietetic
- [ ] Administration

- [ ] Obstetrical Cesarean/Deliv
- [ ] Obstetrical Recovery
- [ ] Newborn/WellBaby
- [ ] Emergency
- [ ] Nuclear Medicine

- [ ] Rehabilitation Therapy
- [ ] Renal Dialysis
- [ ] Outpatient Surgery
- [ ] Central Plant
- [X] Support Services

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00779   Building Name: Main Hospital Building

Configuration: Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5

Type of Service Provided

- [X] Nursing
- [ ] IntensiveCare
- [ ] Pediatric/Adolescent
- [ ] Psychiatric Nursing
- [ ] Obstetrical Ante/Postprtum
- [ ] Intermediate Care
- [X] Skilled Nursing

- [ ] Surgical
- [ ] Anesthesia
- [ ] Clinical Lab
- [ ] Radiological/ Imaging
- [ ] Pharmaceutical
- [ ] Dietetic
- [ ] Administration

- [ ] Obstetrical Cesarean/Deliv
- [ ] Obstetrical Recovery
- [ ] Newborn/ WellBaby
- [ ] Emergency
- [ ] Nuclear Medicine

- [ ] Rehabilitation Therapy
- [ ] Renal Dialysis
- [ ] Outpatient Surgery
- [ ] Central Plant
- [ ] Support Services

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00780**   Building Name: **Maintenance Building**

Configuration: **Retrofit Non-Conforming building to 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		
☐ 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 Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00782   Building Name: East Wing Addition

Configuration: Retrofit Non-Conforming building to 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/Adolescent	☐ Clinical Lab		
☐ 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 Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00784   Building Name: Diagnostics & Treatment Addition

Configuration: Retrofit Non-Conforming building to 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/Adolescent	☒ Clinical Lab		
☐ 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 Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00785   Building Name: Patient Room Addition

Configuration: Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5

Type of Service Provided

☐ Nursing	☐ Surgical	☐ Obstetrical Cesarean/Deliv
☐ IntensiveCare	☐ Anesthesia	☐ Obstetrical Recovery
☐ Pediatric/Adolescent	☐ Clinical Lab	
☐ Psychiatric Nursing	☐ Radiological/Imaging	☐ Newborn/WellBaby
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical	☐ Emergency
☐ Intermediate Care	☐ Dietetic	☐ Nuclear Medicine
☒ Skilled Nursing	☐ Administration	

☐ Rehabilitation Therapy
☐ Renal Dialysis
☐ Outpatient Surgery
☐ Central Plant
☐ Support Services

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00786   Building Name: Storage Room Addition

Configuration: Retrofit Non-Conforming building to 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		
☐ 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

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00787   Building Name: Boiler Room Addition

Configuration: Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5

Type of Service Provided

	Service		Service		Service		Service
☐	Nursing	☐	Surgical	☐	Obstetrical Cesarean/Deliv	☐	Rehabilitation Therapy
☐	IntensiveCare	☐	Anesthesia	☐	Obstetrical Recovery	☐	Renal Dialysis
☐	Pediatric/Adolescent	☐	Clinical Lab				
☐	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 Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00789** Building Name: **Laundry Building**

Configuration: **Retrofit Non-Conforming building to SPC 5 and NPC 4 or NPC 5**

Type of Service Provided

☐ Nursing	☐ Surgical
☐ IntensiveCare	☐ Anesthesia
☐ Pediatric/Adolescent	☐ Clinical Lab
☐ Psychiatric Nursing	☐ Radiological/Imaging
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical
☐ Intermediate Care	☐ Dietetic
☐ Skilled Nursing	☐ Administration

☐ Obstetrical Cesarean/Deliv
☐ Obstetrical Recovery
☐ Newborn/WellBaby
☐ Emergency
☐ Nuclear Medicine

☐ Rehabilitation Therapy
☐ Renal Dialysis
☐ Outpatient Surgery
☐ Central Plant
☒ Support Services

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00790   Building Name: Storage Building

Configuration: Retrofit Non-Conforming building to 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/Adolescent	☐ Clinical Lab		
☐ 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

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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: **BLD-00784**　Building Name: **Diagnostics & Treatment Addition**

Type of Service Provided

☐ Nursing	Inpatient Beds	0
☐ IntensiveCare	Inpatient Beds	0
☐ Pediatric/Adolescent	Inpatient Beds	0
☐ Psychiatric Nursing	Inpatient Beds	0
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0
☐ Intermediate Care	Inpatient Beds	0
☐ Skilled Nursing	Inpatient Beds	0

Total Beds this Building: 0

☐ Surgical

☐ Anesthesia

☒ Clinical Lab

☒ Radiological/Imaging

☐ Pharmaceutical

☐ Dietetic

☒ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/WellBaby

☒ Emergency

☐ Nuclear Medicine

☒ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

☒ Support Services

Report Status:　**Data Last Update:** 10/30/2012　**Submission Date:** 10/30/2012　**Print Date:** 11/5/2012 1:26 PM

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: **BLD-00785**   Building Name: **Patient Room Addition**

Type of Service Provided

☐ Nursing	Inpatient Beds	0	
☐ IntensiveCare	Inpatient Beds	0	
☐ Pediatric/Adolescent	Inpatient Beds	0	
☐ Psychiatric Nursing	Inpatient Beds	0	
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0	
☐ Intermediate Care	Inpatient Beds	0	
☒ Skilled Nursing	Inpatient Beds	6	

Total Beds this Building: 6

☐ Surgical
☐ Anesthesia
☐ Clinical Lab
☐ Radiological/Imaging
☐ Pharmaceutical
☐ Dietetic
☐ Administration

☐ Obstetrical Cesarean/Deliv
☐ Obstetrical Recovery
☐ Newborn/WellBaby
☐ Emergency
☐ Nuclear Medicine

☐ Rehabilitation Therapy
☐ Renal Dialysis
☐ Outpatient Surgery
☐ Central Plant
☐ Support Services

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: **BLD-00786** Building Name: **Storage Room Addition**

Type of Service Provided

☐ Nursing	Inpatient Beds	0
☐ IntensiveCare	Inpatient Beds	0
☐ Pediatric/Adolescent	Inpatient Beds	0
☐ Psychiatric Nursing	Inpatient Beds	0
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0
☐ Intermediate Care	Inpatient Beds	0
☐ Skilled Nursing	Inpatient Beds	0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/WellBaby

☐ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

☒ Support Services

Total Beds this Building: 0

Report Status: **Data Last Update:** 10/30/2012 **Submission Date:** 10/30/2012 **Print Date:** 11/5/2012 1:26 PM

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: **BLD-00787**   Building Name: **Boiler Room Addition**

Type of Service Provided

☐ Nursing	Inpatient Beds	0	
☐ IntensiveCare	Inpatient Beds	0	
☐ Pediatric/Adolescent	Inpatient Beds	0	
☐ Psychiatric Nursing	Inpatient Beds	0	
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0	
☐ Intermediate Care	Inpatient Beds	0	
☐ Skilled Nursing	Inpatient Beds	0	

Total Beds this Building: 0

- ☐ Surgical
- ☐ Anesthesia
- ☐ Clinical Lab
- ☐ Radiological/Imaging
- ☐ Pharmaceutical
- ☐ Dietetic
- ☐ Administration

- ☐ Obstetrical Cesarean/Deliv
- ☐ Obstetrical Recovery
- ☐ Newborn/WellBaby
- ☐ Emergency
- ☐ Nuclear Medicine

- ☐ Rehabilitation Therapy
- ☐ Renal Dialysis
- ☐ Outpatient Surgery
- ☒ Central Plant
- ☒ Support Services

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00784   **Building Name:** Diagnostics & Treatment Addition

Medical / Surgical (Include GYN)

Inpatient Bed `0`   Inpatient Days `0`

Acute Respiratory Care

Inpatient Bed `0`   Inpatient Days `0`

Acute Psychiatric

Inpatient Bed `0`   Inpatient Days `0`

Perinatal (exclude Newborn / GYN)

Inpatient Bed `0`   Inpatient Days `0`

Burn

Inpatient Bed `0`   Inpatient Days `0`

Skilled Nursing

Inpatient Bed `0`   Inpatient Days `0`

Pediatric

Inpatient Bed `0`   Inpatient Days `0`

intensive Care Newborn Nursery

Inpatient Bed `0`   Inpatient Days `0`

Intermediate Card

Inpatient Bed `0`   Inpatient Days `0`

Intensive Care

Inpatient Bed `0`   Inpatient Days `0`

Rehabilitation Center

Inpatient Bed `0`   Inpatient Days `0`

Int. Care / development Disabled

Inpatient Bed `0`   Inpatient Days `0`

Coronary Care

Inpatient Bed `0`   Inpatient Days `0`

Chemical Dependency

Inpatient Bed `0`   Inpatient Days `0`

Total Beds this Building Per Unit

`0`

Total Beds this Building Per Service

`0`

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00785 **Building Name:** Patient Room Addition

Medical / Surgical (Include GYN)

| Inpatient Bed | 0 | Inpatient Days | 0 |

Acute Respiratory Care

| Inpatient Bed | 0 | Inpatient Days | 0 |

Acute Psychiatric

| Inpatient Bed | 0 | Inpatient Days | 0 |

Perinatal (exclude Newborn / GYN)

| Inpatient Bed | 0 | Inpatient Days | 0 |

Burn

| Inpatient Bed | 0 | Inpatient Days | 0 |

Skilled Nursing

| Inpatient Bed | 6 | Inpatient Days | 2066 |

Pediatric

| Inpatient Bed | 0 | Inpatient Days | 0 |

intensive Care Newborn Nursery

| Inpatient Bed | 0 | Inpatient Days | 0 |

Intermediate Card

| Inpatient Bed | 0 | Inpatient Days | 0 |

Intensive Care

| Inpatient Bed | 0 | Inpatient Days | 0 |

Rehabilitation Center

| Inpatient Bed | 0 | Inpatient Days | 0 |

Int. Care / development Disabled

| Inpatient Bed | 0 | Inpatient Days | 0 |

Coronary Care

| Inpatient Bed | 0 | Inpatient Days | 0 |

Chemical Dependency

| Inpatient Bed | 0 | Inpatient Days | 0 |

Total Beds this Building Per Unit

6

Total Beds this Building Per Service

6

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00786   **Building Name:**   Storage Room Addition

Medical / Surgical (Include GYN)

Inpatient Bed: 0   Inpatient Days: 0

Acute Respiratory Care

Inpatient Bed: 0   Inpatient Days: 0

Acute Psychiatric

Inpatient Bed: 0   Inpatient Days: 0

Perinatal (exclude Newborn / GYN)

Inpatient Bed: 0   Inpatient Days: 0

Burn

Inpatient Bed: 0   Inpatient Days: 0

Skilled Nursing

Inpatient Bed: 0   Inpatient Days: 0

Pediatric

Inpatient Bed: 0   Inpatient Days: 0

intensive Care Newborn Nursery

Inpatient Bed: 0   Inpatient Days: 0

Intermediate Card

Inpatient Bed: 0   Inpatient Days: 0

Intensive Care

Inpatient Bed: 0   Inpatient Days: 0

Rehabilitation Center

Inpatient Bed: 0   Inpatient Days: 0

Int. Care / development Disabled

Inpatient Bed: 0   Inpatient Days: 0

Coronary Care

Inpatient Bed: 0   Inpatient Days: 0

Chemical Dependency

Inpatient Bed: 0   Inpatient Days: 0

Total Beds this Building Per Unit

0

Total Beds this Building Per Service

0

Report Status: **Data Last Update:** 10/30/2012   **Submission Date:** 10/30/2012   **Print Date:** 11/5/2012 1:26 PM

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-00787 **Building Name:** Boiler Room Addition

Medical / Surgical (Include GYN)

Inpatient Bed: 0   Inpatient Days: 0

Acute Respiratory Care

Inpatient Bed: 0   Inpatient Days: 0

Acute Psychiatric

Inpatient Bed: 0   Inpatient Days: 0

Perinatal (exclude Newborn / GYN)

Inpatient Bed: 0   Inpatient Days: 0

Burn

Inpatient Bed: 0   Inpatient Days: 0

Skilled Nursing

Inpatient Bed: 0   Inpatient Days: 0

Pediatric

Inpatient Bed: 0   Inpatient Days: 0

intensive Care Newborn Nursery

Inpatient Bed: 0   Inpatient Days: 0

Intermediate Card

Inpatient Bed: 0   Inpatient Days: 0

Intensive Care

Inpatient Bed: 0   Inpatient Days: 0

Rehabilitation Center

Inpatient Bed: 0   Inpatient Days: 0

Int. Care / development Disabled

Inpatient Bed: 0   Inpatient Days: 0

Coronary Care

Inpatient Bed: 0   Inpatient Days: 0

Chemical Dependency

Inpatient Bed: 0   Inpatient Days: 0

Total Beds this Building Per Unit

0

Total Beds this Building Per Service

0

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