Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:1 of 57

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

Facility Number:	10295	
Facility Name:	Frank R. Howard Memorial Hospital	ı
Address:	1 Madrone Street	ı
City:	Willits	ı

Hospital Owner/Licensee: Willits Hospital Inc. dba Frank R. Howard Memorial Hospital

Year of Reporting: 2013

Contact 1 e-mail Address:

Contact 2 e-mail Address:

Contact 3 e-mail Address::

Name of Submitter: Frank R. Howard Memorial Hospital - 10295

Submission Date: 12/6/2013 4:13:14 PM

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:2 of 57

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- 00460	Original Hospital	1 Madrone Street	Rebuild	SPC5	01/01/2015	08/31/2014
BLD- 00461	Radiology	1 Madrone Street	Rebuild	SPC5	01/01/2015	08/31/2014
BLD- 00462	Plant Operations	1 Madrone Street	Rebuild	SPC5	01/01/2015	08/31/2014
BLD- 00464	Administration	1 Madrone Street	Rebuild	SPC5	01/01/2015	08/31/2014
BLD- 00466	Materials Management	1 Madrone Street	Rebuild	SPC5	01/01/2015	08/31/2014
BLD- 00467	Medical Records	1 Madrone Street	Rebuild	SPC5	01/01/2015	08/31/2014
BLD- 00468	CT Trailer	1 Madrone Street	Rebuild	SPC5	01/01/2015	08/31/2014
BLD- 03101	Canopy	1 Madrone Street	Rebuild	SPC5	01/01/2015	08/31/2014

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:3 of 57

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-00460 Original Hospital	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10295 HS102235-0 0 REPLACEMENT HOSPITAL	11/16/2010 4/30/2012 06/15/2012 06/15/2014 FIEL No 12:00:00 12:00:00 AM AM
Building No: BLD-00461 Radiology	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10295 HS102235-0 0 REPLACEMENT HOSPITAL	11/16/2010 4/30/2012 06/15/2012 06/15/2014 FIEL No 12:00:00 12:00:00 AM AM
Building No: BLD-00462 Plant Operations	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10295 HS102235-0 0 REPLACEMENT HOSPITAL	11/16/2010 4/30/2012 06/15/2012 06/15/2014 FIEL No 12:00:00 12:00:00 AM AM

Report Year: 2013 10295 Frank R. Howard Memorial F	Ospital Willits Page:4 of 57
Building No: BLD-00464 Administration	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10295 HS102235-0 0 REPLACEMENT HOSPITAL	11/16/2010 4/30/2012 06/15/2012 06/15/2014 FIEL No 12:00:00 12:00:00 AM AM
Building No: BLD-00466 Materials Management	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10295 HS102235-0 0 REPLACEMENT HOSPITAL	11/16/2010 4/30/2012 06/15/2012 06/15/2014 FIEL No 12:00:00 12:00:00 AM AM
Building No: BLD-00467 Medical Records	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10295 HS102235-0 0 REPLACEMENT HOSPITAL	11/16/2010 4/30/2012 06/15/2012 06/15/2014 FIEL No 12:00:00 12:00:00 AM AM
Building No: BLD-00468 CT Trailer	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10295 HS102235-0 0 REPLACEMENT HOSPITAL	11/16/2010 4/30/2012 06/15/2012 06/15/2014 FIEL No 12:00:00 12:00:00 AM AM

Frank R. Howard Memorial Hospital 10295 Willits Report Year: 2013 Page:5 of 57 Yes-Submitted Building No: BLD-03101 Canopy Retrofit/Replacement Project: Facility Project Sub Number Number Num Date Plan Approved Proj. Start Proj. Completed Status CEQA Scope Date Ďate Review 10295 HS102235-0 0 REPLACEMENT HOSPITAL 4/30/2012 06/15/2012 06/15/2014 No 11/16/2010 FIEL 12:00:00 12:00:00 AM AM

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:6 of 57

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

Building Number: BL	.D-00460	Building Name:	Original Hospital	
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   X Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services Obstetrical	Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:7 of 57

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

Building Number: BLD-00461	Building Name:	Radiology	
Type of Service Provided			
Nursing Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol Inpatient escent Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Inpatient Nursing Beds	0 Inpatient Days 0	X Radiological/ Imaging	Nuclear Medicine
Obstetrical Inpatient Ante/Postprtum Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Inpatient Care Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing Inpatient Beds	0 Inpatient Days 0	Support Services Obstetrical	Outpatient Surgery
	Total Beds this Building	Cesarean/Deliv	Central Plant

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:8 of 57

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

Building Number: BLD-00462	Building Name:	Plant Operations
Type of Service Provided		
Nursing Inpatient Beds	0 Inpatient 0 Days	Surgical Obstetrical Recovery
IntensiveCare Inpatient Beds	0 Inpatient Days 0	Anesthesia Newborn/ WellBaby
Pediatric/Adol Inpatient escent Beds	0 Inpatient Days 0	Clinical Lab Emergency
Psychiatric Inpatient Nursing Beds	0 Inpatient Days 0	Radiological/ Nuclear Medicine
Obstetrical Inpatient Ante/Postprtum Beds	0 Inpatient Days 0	Pharmaceutical  Dietetic  Rehabilitation Therapy
Intermediate Inpatient Care Beds	0 Inpatient Days 0	Administration Renal Dialysis  Support Outpatient
Skilled Nursing Inpatient Beds	0 Inpatient Days 0	Services Surgery  Obstetrical
	Total Beds this Building	Cesarean/Deliv X Central Plant

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:9 of 57

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

Building Number: BL	.D-00464	Building Name:	Administration	
Type of Service Prov	<u>ided</u>			_
Nursing	Inpatient Eeds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient [ Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Eeds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient [ Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient [	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  Obstetrical	Outpatient Surgery
	-	tal Beds this oliding	Cesarean/Deliv	Central Plant

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:10 of 57

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

Building Number: BLI	D-00466	Building Name:	Materials Management	
Type of Service Provi	<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	Beds	0 Inpatient Days 0	X Support Services Obstetrical Cesarean/Deliv	Outpatient Surgery
	Build		Cesaleal // Deliv	Central Plant

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:11 of 57

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

Building Number: BL	.D-00467	Building Name:	Medical Records	
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 Support	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0  Total Beds this 0	Services  Obstetrical Cesarean/Deliv	Outpatient Surgery
		Fotal Beds this Building	Cesaleal/Deliv	Central Plant

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:12 of 57

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

Building Number: BL	.D-00468		Building Na	me:	CT T	railer	
Type of Service Prov	<u>rided</u>						
Nursing	Inpatient Beds		Inpatient Days	0		Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 1	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		X 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
		Total Be Building	ds this	0		Obstetrical Cesarean/Deliv	Central Plant

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:13 of 57

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

Building Number: BLD-03101		Building Name:	Canopy	
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  Central Plant
		Building	L	

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:14 of 57

Building Number:	BLD-00460	Building Name: Orig	inal Hospital				
Medical / Surgical (Include GYN)		Acute Respiratory	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 N	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 Ne 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	Int. Care / development Disabled		
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		

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:15 of 57

Building Number:	BLD-00461	Building Name: Radi	ology				
Medical / Surgical (Include GYN)		Acute Respiratory	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	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 / development Disabled		
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		

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:16 of 57

Building Number: B	LD-00462 Buildir	ng Name: Plant	t Operations		
Medical / Surgical (Inc	lude GYN)	Acute Respiratory	Care	Acute Psychiatric	
	patient 0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse Nev	vborn / GYN)	Burn		Skilled Nursing	
	patient 0	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
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	nent
Inpatient 0 Inp		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 Inp		Inpatient 0 Bed	Inpatient 0 Days	0	0

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:17 of 57

Building Number:	BLD-00464 <b>Bui</b> l	Iding Name:	Iministration				
Medical / Surgical (I	nclude GYN)	Acute Respirato	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 N	lewborn / 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 N Nursery	ewborn	Intermediate Card			
	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	ment		
	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 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0		

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:18 of 57

Building Number:	BLD-00466 B	Building Name: Mate	erials Management		
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 l	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

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:19 of 57

Building Number:	BLD-00467	Building Name: Medi	ical Records			
Medical / Surgical (Include GYN)		Acute Respiratory	Acute Respiratory Care			
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	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 / development Disabled	
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	

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:20 of 57

Building Number:	BLD-00468 Buildi	ng Name: CT 1	Frailer			
Medical / Surgical (In	clude GYN)	Acute Respiratory Care		Acute Psychiatric		
	npatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse Ne	ewborn / GYN)	Burn		Skilled Nursing		
	npatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card		
	npatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	nent	
	npatient 0 lays	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	
	npatient 0 lays	Inpatient 0 Bed	Inpatient 0 Days	0	0	

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:21 of 57

Building Number: BLD-031	01 Building Name:	Canopy		
Medical / Surgical (Include G	YN) Acute Re	spiratory Care	Acute F	Psychiatric
Inpatient 0 Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatien Bed	t 0 Inpatient 0 Days
Perinatal (excluse Newborn /	GYN) Burn		Skilled	Nursing
Inpatient 0 Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatien Bed	t 0 Inpatient 0 Days
Pediatric	intensive Nursery	Care Newborn	Interme	diate Card
Inpatient 0 Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatien Bed	t 0 Inpatient 0 Days
Intensive Care	Rehabilita Center	tion	Int. Care Disable	e / development d
Inpatient 0 Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days
Coronary Care	Chemical Dependen	асу	Total Be Building Unit	
Inpatient 0 Inpatient Bed Days	0 Inpatient Bed	0 Inpatient Days	0	0 0

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:22 of 57

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-00460	Original Hospital	Rebuild
BLD-00461	Radiology	Rebuild
BLD-00462	Plant Operations	Rebuild
BLD-00463	Nursing Unit	Rebuild
BLD-00464	Administration	Rebuild
BLD-00465	Operating Rooms	Rebuild
BLD-00466	Materials Management	Rebuild
BLD-00467	Medical Records	Rebuild
BLD-00468	CT Trailer	Rebuild
BLD-03101	Canopy	Rebuild
-		

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:23 of 57

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:24 of 57

10295

Frank R. Howard Memorial Hospital

Willits

Page:25 of 57

Report Year: 2013 10295

Frank R. Howard Memorial Hospital

Willits

Page:26 of 57

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:27 of 57

Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c) (2)(E)

Building Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?  Dietetic  N/A  Dietetic
Building Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?  Administration  N/A  Original Hospital  Original Hospital  N/A
Building Number:  BLD-00460 Building Name: Original Hospital
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?  Support Services  N/A

Frank R. Howard Memorial Hospital Report Year: 2013 10295 Willits Page:28 of 57 BLD-00462 **Building Name:** Plant Operations Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? N/A CentralPlant BLD-00463 **Building Name:** Nursing Unit Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Nursing Relocated to new building Date Plan Approved Sub Facility Project Scope Proj. Start Proj. Completed Status Number Number Num Date Date Date 18198 HS102235-0 0 REPLACEMENT HOSPITAL 2010-11-16 2012-04-30 05/01/2012 08/31/2014 FIEL BLD-00463 Nursing Unit **Building Name:** Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Relocated to new building Intensive Care Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Number Number Num in Date Date Date HS102235-0 05/01/2012 18198 0 REPLACEMENT HOSPITAL 2010-11-16 2012-04-30 08/31/2014 FIEL

Report Year: 2013 10295

Frank R. Howard Memorial Hospital

Willits

Page:29 of 57

Frank R. Howard Memorial Hospital Report Year: 2013 10295 Willits Page:30 of 57 BLD-00463 **Building Name:** Nursing Unit Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Emergency Relocated to new building Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Number Number Num Date Date Date in 18198 HS102235-0 0 REPLACEMENT HOSPITAL 2010-11-16 2012-04-30 05/01/2012 08/31/2014 FIEL BLD-00463 **Building Name:** Nursing Unit Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Medical/Surgical Relocated to new building (Include GYN) Date Plan Approved Facility Project Sub Scope Proj. Start Proj. Completed Status Number Number Num in Date Date Date HS102235-0 05/01/2012 18198 0 REPLACEMENT HOSPITAL 2010-11-16 2012-04-30 08/31/2014 FIEL

10295

Frank R. Howard Memorial Hospital

Willits

Page:31 of 57

Frank R. Howard Memorial Hospital Report Year: 2013 10295 Willits Page:32 of 57 BLD-00463 **Building Name:** Nursing Unit Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Relocated to new building Intensive Care Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Date Date Date Number Number Num in 18198 HS102235-0 0 REPLACEMENT HOSPITAL 2010-11-16 2012-04-30 05/01/2012 08/31/2014 FIEL BLD-00464 Administration **Building Name:** Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Administration N/A Operating Rooms BLD-00465 **Building Name:** Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Relocated to new building Surgical Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Number Number Num in Date Date Date HS102235-0 05/01/2012 18198 0 REPLACEMENT HOSPITAL 2010-11-16 2012-04-30 08/31/2014 FIEL

10295

Frank R. Howard Memorial Hospital

Willits

Page:33 of 57

Report Year: 2013 10295 Frank R. Howard Memorial Hospital	Willits	Page:34 of 57			
Building Number:  Will general acute care services and beds will be relocated to a new, Existing or re  Anesthesia Relocated to new building	etrofitted building?				
Facility Project Sub Scope Status Number Number Num  18198 HS102235-0 0 REPLACEMENT HOSPITAL	Date Plan Approved Proj. Start Proj. Start Proj. Date Date 2010-11-16 2012-04-30 05/01/2012	oj. Completed  Date  08/31/2014 FIEL			
Building Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?  Support Services  N/A					
Building Number:  Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?  Administration  N/A					
Building Number:  Will general acute care services and beds will be relocated to a new, Existing or re  Radiological/Imaging N/A	etrofitted building?				

10295

Frank R. Howard Memorial Hospital

Willits

Page:35 of 57

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:36 of 57

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-00460 Buildin	g Name:	Original Hospital			
Type of Service	e Provided					
			Surgical	Obstetrical Cesarean/Deli	v	Rehabilitation Therapy
	Nursing		Anesthesia			
	IntensiveCare			Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol		Clinical Lab			Outpatient
	escent		Radiological/	Newborn/ WellBaby		Surgery
	Psychiatric Nursing		Imaging  Pharmaceutical	Emergency		Central Plant
	Obstetrical		Filamiaceutical	Lineigoney	Ш	Central Flant
	Ante/Postprtum	X	Dietetic	Nuclear Medicine	X	Support Services
	Intermediate					
_	Care	X	Administration			
	Skilled Nursing					

Report Year:	2013	10295	Frank R. Howard Memorial Hospital	Willits	Page:37 of 57
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Building Number:	BLD-00461	Building Name:	Radiology						
Type of Service Provided									
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	Nursing		Anesthesia						
	IntensiveCare		_	Obstetrical Recovery		Renal Dialysis			
П	Pediatric/Ado escent	.	Clinical Lab	Nowhow /		Outpatient Surgery			
		X	Radiological/ Imaging	Newborn/ WellBaby	_	Surgery			
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant			
	Obstetrical Ante/Postprtu	ım _	_	Nuclear	П	Support			
	,		Dietetic	Medicine		Services			
	Intermediate Care		Administration						
	Skilled Nursin	ng							

Report Year:	2013	10295		Frank R. Howard Memorial Hospital		Willits	Page:38 of 57
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Building Number:	BLD-00462	Building Name:	Plant Operations						
Type of Service Provided									
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	Nursing		Anesthesia						
	IntensiveCare	· _		Obstetrical Recovery		Renal Dialysis			
	Pediatric/Ado escent	,	Clinical Lab	□ N. L/	П	Outpatient Surgery			
			Radiological/ Imaging	Newborn/ WellBaby		Surgery			
Ш	Psychiatric Nursing		Pharmaceutical	Emergency	Х	Central Plant			
	Obstetrical Ante/Postprtu	ım _	_	Nuclear		Support			
	·		Dietetic	Medicine		Services			
	Intermediate Care		Administration						
	Skilled Nursin	ng							

Report Year:	2013	10295	Frank R. Howard Memorial Hospital	Willits	Page:39 of 57
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Building Number:	BLD-00464	Building Name:	Administration						
Type of Service Provided									
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	Nursing		Anesthesia						
	IntensiveCare	e		Obstetrical Recovery		Renal Dialysis			
П	Pediatric/Ado	,   [	Clinical Lab			Outpatient			
	escent		Radiological/	Newborn/ WellBaby		Surgery			
	Psychiatric Nursing		Imaging  Pharmaceutical	Emergency		Central Plant			
	Obstetrical		Filamiacedical			Central Flant			
	Ante/Postprtu	ım _	Dietetic	Nuclear Medicine		Support Services			
	Intermediate								
	Care	×	Administration						
	Skilled Nursin	ng							

Report Year:	2013	10295	Frank R. Howard Memorial Hospital	Willits	Page:40 of 57
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Building Number:	BLD-00466	Building Name:	Materials Management						
Type of Service Provided									
		L	Surgical	Obstetrical Cesarean/Deliv	Ш	Rehabilitation Therapy			
	Nursing		Anesthesia						
	IntensiveCare		_	Obstetrical Recovery		Renal Dialysis			
	Pediatric/Adol escent	L	Clinical Lab	Newborn/		Outpatient Surgery			
_			Radiological/ Imaging	WellBaby		Odigory			
Ш	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant			
	Obstetrical Ante/Postprtu	m _	_	Nuclear	Х	Support			
	·		Dietetic	Medicine		Services			
	Intermediate Care		Administration						
	Skilled Nursin	g							

Report Year:	2013	10295		Frank R. Howard Memorial Hospital		Willits	Page:41 of 57
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Building Number:	BLD-00467	Building Name:	Medical Records						
Type of Service Provided									
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	Nursing	l	Anesthesia						
	IntensiveCare	•	_	Obstetrical Recovery		Renal Dialysis			
П	Pediatric/Ado	,   [	Clinical Lab			Outpatient			
	escent		Radiological/ Imaging	Newborn/ WellBaby		Surgery			
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant			
	Obstetrical								
Ш	Ante/Postprtu	ım [	Dietetic	Nuclear Medicine		Support Services			
	Intermediate	_							
_	Care	X	X Administration						
	Skilled Nursin	ng							

Report Year:	2013	10295		Frank R. Howard Memorial Hospital		Willits	Page:42 of 57
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Building Number:	BLD-00468 Buildi	ng Name: CT Trailer						
Type of Service Provided								
		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
	Nursing	Anesthesia						
	IntensiveCare		Obstetrical Recovery	Renal Dialysis				
	Pediatric/Adol escent	Clinical Lab		Outpatient				
_	escent	X Radiological/ Imaging	Newborn/ WellBaby	L_J Surgery				
	Psychiatric Nursing	Pharmaceutical	Emergency	Central Plant				
	Obstetrical			<u> </u>				
	Ante/Postprtum	Dietetic	Nuclear Medicine	Support Services				
	Intermediate							
	Care	Administration						
	Skilled Nursing							

Report Year:	2013	10295		Frank R. Howard Memorial Hospital		Willits	Page:43 of 57
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Building Number:	BLD-03101	Building Name:	Canopy			
Type of Service	e Provided					
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia			
П	IntensiveCare	,		Obstetrical Recovery		Renal Dialysis
	Pediatric/Ado	,   [	Clinical Lab	,		Outpatient
	escent		Radiological/	Newborn/ WellBaby	Ш	Surgery
	Psychiatric Nursing		Imaging			
	_		Pharmaceutical	Emergency		Central Plant
	Obstetrical Ante/Postprtu	ım   _	Dietetic	Nuclear Medicine		Support Services
	Latarra B. f		→			
	Intermediate Care		Administration			
П	Skilled Nursin	ng				

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:44 of 57

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-00460	Building Na	me: Original Hospi	ital			
Configuration:	N/A						
Type of Servi	ice 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	X	Dietetic		Emergency		Contrain land
	Care Skilled Nursing	X	Administration		Nuclear Medicine	X	Support Services

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:45 of 57

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-00461	Building Na	me: Radiology				
Configuration:	N/A						
Type of Serv	ice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic	_	Linergency	_	Contrar Flam
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:46 of 57

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-00462	Building Na	me: Plant Operation	ons			
Configuration:	N/A						
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	X	Central Plant
	Intermediate		Dietetic		Lineigoney	<u></u>	Contrar Flam
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:47 of 57

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 Numbe	r: BLD-00463	Building Na	me: Nursing Unit				
Configuration:	N/A						
Type of Serv	rice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	X	Emergency		Central Plant
	Intermediate		Dietetic		Lineigency	Ш	Contrair
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:48 of 57

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-00464	Building Na	me: Administration	1		
Configuration:	N/A					
Type of Servi	ce Provided					
	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	ntensiveCare		Anesthesia		Obstetrical Page Vent	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	Central Plant
	ntermediate		Dietetic		Emergency	Contrain land
	Care Skilled Nursing	X	Administration		Nuclear Medicine	Support Services

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:49 of 57

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 Numbe	r: BLD-00465	Building Na	me: Operating Ro	ooms		
Configuration:	N/A					
Type of Serv	rice Provided					
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	X	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		Dietetic		Lineigency	Contract
	Care Skilled Nursing		Administration		Nuclear Medicine	Support Services

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:50 of 57

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	r: BLD-00466	Building Na	me: Materials Man	agement			
Configuration:	N/A						
Type of Serv	ice 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		Dietetic		Emergency		Contrain land
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:51 of 57

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	r: BLD-00467	Building Na	me: Medical Reco	rds			
Configuration:	N/A						
Type of Serv	ice 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		Dietetic		Emergency	Ш	Contrain
	Care Skilled Nursing	X	Administration		Nuclear Medicine		Support Services

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:52 of 57

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 Numbe	r: BLD-00468	Building Na	me: CT Trailer		
Configuration:	N/A				
Type of Serv	ice Provided				
	Nursing		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia	Obstetrical	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab	Recovery	
	Psychiatric Nursing	X	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	Emergency	Central Plant
	Intermediate		Dietetic	Emergency	Contrain
	Care Skilled Nursing		Administration	Nuclear Medicine	Support Services

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:53 of 57

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-03101	Building Na	me: Canopy		
Configuration:	N/A				
Type of Serv	ice 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		Dietetic	Linergency	Contrain
	Care Skilled Nursing		Administration	Nuclear Medicine	Support Services

Report Year: 2013 10295 Frank R. Howard Memorial Hospital Willits Page:54 of 57

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-00463 Building Name: Nursing Unit								
Type of Service Provided								
X	Nursing	Inpatient Beds	34		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
X	IntensiveCare	Inpatient Beds	4		Anesthesia			
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	X Emergency	Central Plant	
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		38					

Report Year:	2013	10295		Frank R. Howard Memorial Hospital		Willits	Page:55 of 57
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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: BLD-00465 Building Name: Operating Rooms							
Type of Service Provided							
Nu	rsing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Inte	ensiveCare	Inpatient Beds	0	X	Anesthesia		
1 1 -	diatric/Adol cent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	ychiatric Irsing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	estetrical te/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant
Inte	ermediate ire	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services
Ski	illed Nursing	Inpatient Beds	0		Administration		
	tal Beds this ilding		0				

Report Status: **Data Last Update:** 12/06/2013 **Submission Date:** 12/06/2013 **Print Date:** 12/8/2013 1:50 PM

Report Year:

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:56 of 57

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-00463	Building Name:	Nursing Unit			
Medical / Surgical (	Include GYN)	Acute Re	spiratory Care		Acute Psychiatric	
Inpatient 34 Bed	Inpatient Days	4848 Inpatient Bed	0 Inpatier Days	ot 0	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude I	Newborn / GYN)	Burn			Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatier Days	nt 0	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		Intensive Nursery	Care Newborn		Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatier Days	nt 0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilita Center	ation		Int. Care / Developmentally Disabled	
Inpatient 4 Bed	Inpatient Days	548 Inpatient Bed	0 Inpatier Days	nt 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical	Dependency		Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatier Days	nt 0	Unit 38	Service 38

Report Year:

2013

10295

Frank R. Howard Memorial Hospital

Willits

Page:57 of 57

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-00465	Building Name:	Operating Rooms				
Medical / Surgical (I	nclude GYN)	Acute Resp	iratory Care	Acute Psychiatric	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient C	Inpatient 0 Days		
Perinatal (Exclude I	Newborn / GYN)	Burn		Skilled Nursing	Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient C	Inpatient 0 Days		
Pediatric		Intensive C Nursery	are Newborn	Intermediate Care	•		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient C Bed	Inpatient 0 Days		
Intensive Care		Rehabilitati Center	on	Int. Care / Develo Disabled	omentally		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days		
<b>Coronary Care</b>		Chemical D	ependency	Total Beds this Building Per	Total Beds this Building Per		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Unit 0	Service 0		