Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:1 of 26

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

Facility Number:	10338	
Facility Name:	George L Mee Memorial Hospital	
Address:	300 Canal Street	
City:	King City	
Hospital Owner/Lice	nsee: S. Monterey County Memorial Hospital/Lic.#0700000047	
Year of Rep	orting: 2013	
Contact 1 e-mail Ad	dress:	
Contact 2 e-mail Ad	dress:	
Contact 3 e-mail Add	ress::	
Name of Sub	mitter: George L. Mee Memorial Hospital	
Submission	Date: 12/11/2013 10:14:08 AM	

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:2 of 26

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.	<b>Building Name</b>	Alternate Building Address	Building Resolution			Anticipated Completion Date
BLD- 03329	Administration	300 Canal Street	Replace	SPC2	01/01/2020	12/30/2013

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:3 of 26

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-03329 Administration	Retrofit/Replacement Yes-Planned Project:
Facility Project Sub Scope Number Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10338 S132361-27 0 -00	10/23/2013 11/1/2013 11/01/2013 12/30/2013 ACTI No 12:00:00 12:00:00 AM AM

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:4 of 26

## 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-03329		Building Name:	Adm	inistration	
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  Pharmaceutical	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days 0		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 E Buildir	Beds this 0		Cesarean/Deliv	Central Plant

2013

10338

George L Mee Memorial Hospital

King City

Page:5 of 26

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

Building Number:	BLD-03329	Building Name: Adm	inistration			
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	wborn	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	nent	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0	

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:6 of 26

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-01634	Main Hospital	Remain
BLD-03265	New Porte Cochere	Remain
BLD-03266	New Hospital	Remain
BLD-03328	Bottle Building	Remain
BLD-03329	Administration	Replace

Report Year: 2013 10338 George L Mee Memorial Hospital King City

ng City Page:7 of 26

10338

George L Mee Memorial Hospital

King City

Page:8 of 26

2013

10338

George L Mee Memorial Hospital

King City

Page:9 of 26

2013

10338

George L Mee Memorial Hospital

King City

Page:10 of 26

Report Year: 2013 10338 George L Mee Memorial Hospital King City

new, existing or retrofitted building and any

Page:11 of 26

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:  BLD-03329 Building Name: Administration									
Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?									
Administration Relocated to other building									
New Building RetroFitted Building	Other SPC2-SPC5 Building								
	BLD-01634-Main Hospital								
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj. Completed								
Number Num	in Date Date Date								
10338 S132361-27- 0 Removal from acute care services, OSHPD BLD-03329, Bldg. 1.3	2013-10-23 2013-11-01 11/01/2013 12/30/2013 ACTI								
Building Number:  BLD-03329 Building Name: Administration									
Will general acute care services and beds will be relocated to a new, Existing or	retrofitted building?								
Support Services N/A									

2013

10338

George L Mee Memorial Hospital

King City

Page:12 of 26

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:13 of 26

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-03329	Building Name:	Administration							
Type of Service Provided										
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	Nursing		Anesthesia							
	IntensiveCare	)		Obstetrical Recovery		Renal Dialysis				
П	Pediatric/Ado	,   [	Clinical Lab			Outpatient				
Ш	escent		Radiological/ Imaging	Newborn/ WellBaby		Surgery				
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant				
	Obstetrical									
Ш	Ante/Postprtu	ım _	Dietetic	Nuclear Medicine	X	Support Services				
	Intermediate									
	Care	X	Administration							
	Skilled Nursin	ng								

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:14 of 26

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	er: BLD-01634	Building Na	me: Main Hospital			
Configuration	: N/A					
Type of Serv	vice Provided					
X	Nursing		Surgical	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
	IntensiveCare	X	Anesthesia	Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab	Recovery		
	Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby	X	Outpatient Surgery
	Obstetrical	X	Pharmaceutical			
Ш	Ante/Postprtum			Emergency	X	Central Plant
	Intermediate	X	Dietetic			
	Care			Nuclear Medicine	X	Support Services
X	Skilled Nursing		Administration			

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:15 of 26

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-03265	Building Na	me: New Porte Co	ochere			
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		Central Plant
	Intermediate		Dietetic	_	Lineigonoy	<u></u>	Contract tark
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:16 of 26

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	er: BLD-03266	Building Na	me: New Hospital				
Configuration:	: N/A						
Type of Serv	vice 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	X	Outpatient Surgery
X	Obstetrical Ante/Postprtum		Pharmaceutical	X	Emergency	X	Central Plant
X	Intermediate		Dietetic				
	Care Skilled Nursing	X	Administration		Nuclear Medicine	X	Support Services

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:17 of 26

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-03328	Building Na	me: Bottle Building			
Configuration:	N/A					
Type of Service	ce Provided					
	Nursing		Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
I	ntensiveCare		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
	ntermediate		Dietetic			ooman lam
	Care Skilled Nursing		Administration	Nuclear Medicine		Support Services

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:18 of 26

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-03329	Building Nar	me: Administration	า				
Configuration:	Remove from GAC	service by	service by 1/1/2020					
Type of Service	e Provided							
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis	
	Pediatric/Adol scent		Clinical Lab		Recovery			
	Psychiatric Iursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical Inte/Postprtum		Pharmaceutical		Emergency		Central Plant	
	ntermediate		Dietetic					
	Care Skilled Nursing	X	Administration		Nuclear Medicine	X	Support Services	

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:19 of 26

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: BLI	D-01634	Building I	Name: Ma	nin Hospital		
Type of Service Provided							
X	Nursing	Inpatient Beds	24		Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0	X	Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	X Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical	Emergency	X Central Plant
	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Support Services
X	Skilled Nursing	Inpatient Beds	16		Administration		
	Total Beds this Building		40				

Report Year: 2013 10338 George L Mee Memorial Hospital King City Page:20 of 26

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-03265	Building N	Name: New Porte Cochere		
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	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

Report Year: 2013 10338 George L Mee Memorial Hospital King City

Page:21 of 26

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: BLE	D-03266	Building N	Name: Ne	w Hospital		
Type of Service Provided							
X	Nursing	Inpatient Beds	64	X	Surgical	X Obstetrical Cesarean/Deliv	X Rehabilitation Therapy
X	IntensiveCare	Inpatient Beds	4	X	Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging	X Newborn/ WellBaby	X Outpatient Surgery
X	Obstetrical Ante/Postprtum	Inpatient Beds	8		Pharmaceutical	X Emergency	X Central Plant
X	Intermediate Care	Inpatient Beds	3		Dietetic	Nuclear Medicine	X Support Services
	Skilled Nursing	Inpatient Beds	0	X	Administration		
	Total Beds this Building		79				

Report Year:	2013	10338	George L Mee Memorial Hospital	King City	Page:22 of 26
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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)

Buildir	ng Number: BLI	D-03328	Building N	lame: Bo	ettle Building		
Туре	of Service Prov	<u>ided</u>					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X 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**: 12/11/2013 **Submission Date**: 12/11/2013 **Print Date**: 12/12/2013 1:50 PM

2013

10338

George L Mee Memorial Hospital

King City

Page:23 of 26

Building Number:	BLD-01634	Building Name:	Main Hospital			
Medical / Surgical (I	nclude GYN)	Acute Respi	ratory Care	Acute Psychiatric		
Inpatient 24 Bed	Inpatient 839 Days	95 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing	Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 16 Bed	Inpatient 5840 Days	
Pediatric		Intensive Ca Nursery	re Newborn	Intermediate Care		
Inpatient 0	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilitatio Center	n	Int. Care / Develop Disabled	mentally	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical De	pendency	Total Beds this Building Per	Total Beds this Building Per	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Unit 40	Service 40	

2013

10338

George L Mee Memorial Hospital

King City

Page:24 of 26

Building Number:	BLD-03265 Build	ding Name: New F	Porte Cochere		
Medical / Surgical (I	nclude GYN)	Acute Respiratory (	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Pediatric		Intensive Care New Nursery	born	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Inpatient 0 Days	
Coronary Care		Chemical Depender	ncy	Total Beds this Building Per Total Beds this Building Per	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Unit Service 0	

2013

10338

George L Mee Memorial Hospital

King City

Page:25 of 26

Building Number:	BLD-03266 Build	ing Name: New	Hospital		
Medical / Surgical (In	clude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 64 Bed	Inpatient 13505 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpati Bed Days	ent 0
Perinatal (Exclude Ne	ewborn / GYN)	Burn		Skilled Nursing	
Inpatient 8 Bed	Inpatient 1376 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpati Bed Days	ent 0
Pediatric		Intensive Care New	wborn	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 3 Inpati Bed Days	ent 0
Intensive Care		Rehabilitation Center		Int. Care / Developmental Disabled	ly
Inpatient 4 Bed	Inpatient 372 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Inpati Bed Days	ent 0
Coronary Care		Chemical Depende	ency		tal Beds this ilding Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days		rvice 79

2013

10338

George L Mee Memorial Hospital

King City

Page:26 of 26

Building Number:	BLD-03328 Bu	ilding Name:	Bottle Building		
Medical / Surgical (Ir	nclude GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Perinatal (Exclude N	ewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Pediatric		Intensive Car Nursery	e Newborn	Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient Days	0
Intensive Care		Rehabilitation Center	1	Int. Care / Developmentally Disabled	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Inpatient Bed Days	0
<b>Coronary Care</b>		Chemical Dep	pendency		Beds this
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Unit Service 0	_