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

Facility Number:	10831	
Facility Name:	Goleta	Valley Cottage Hospital
Address:	351 So	uth Patterson Avenue
City:	Santa E	Barbara
Hospital Owner/Lie	censee:	Cottage Health System; Sole Corporate Member
Year of Re	porting:	2013
Contact 1 e-mail A	ddress:	
Contact 2 e-mail A	ddress:	
Contact 3 e-mail Ad	ddress::	
Name of Su	ıbmitter:	Brooks Larson
Submissio	on Date:	10/23/2013 2:52:13 PM

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For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)

Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 00867	Hospital and Addition	351 South Patterson Avenue	Rebuild	SPC5	01/01/2015	07/01/2014
BLD- 00868	Maintenance Shop	351 South Patterson Avenue	Rebuild	SPC5	01/01/2015	07/01/2014

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For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

Building	No: BLD-00867	Hospital and Addition		Retrofit/Re	eplacement	Yes-	Submitte	d
Facility Number	Project Sub Number Num	Scope	Date Plan in	• •	oj. Start Pro Date	oj. Completed Date	Status	CEQA Review
10831	HS070843-0	0 52 BED REPLACEMENT HOSPITAL	5/29/2007 12:00:00 AM	11/2/2010 12:00:00 AM	11/23/2010	07/01/2014	FIEL	No
10831	HS071995-0	0 SOIL STABILIZATION	10/30/2007 12:00:00 AM	10/15/2009 12:00:00 AM	10/28/2009	12/09/2013	PEND	No
10831	SS072211-0	0 SITE UTILITY RELOCATIONS & ALTERNATE EXITING	11/30/2007 12:00:00 AM	1/13/2009 12:00:00 AM	01/13/2009	11/01/2010	CLOS	No
10831	SS082197-0	0 ROCK COLUMN PRESSURE GROUT TESTING	12/10/2008 12:00:00 AM	12/10/2008 12:00:00 AM	12/10/2008	12/23/2009	CLOS	No

Report Year: 2013 10831 Goleta Valley Cottage Hospital Santa Barbara Page:4 of 45 BLD-00868 Maintenance Shop Retrofit/Replacement Yes-Submitted Building No: Project: Date Plan Approved Proj. Start Proj. Completed Facility Project Sub Status CEQA Scope Number Number Num Date Date Review HS070843-0 0 52 BED REPLACEMENT HOSPITAL 5/29/2007 11/2/2010 11/23/2010 07/01/2014 **FIEL** No 10831 12:00:00 12:00:00 AM AM 10831 HS071995-0 0 SOIL STABILIZATION 10/30/2007 10/15/2009 10/28/2009 10/14/2013 **PEND** No 12:00:00 12:00:00 AM AM 10831 SS072211-0 0 SITE UTILITY RELOCATIONS & 11/30/2007 1/13/2009 01/13/2009 11/01/2010 CLOS No ALTERNATE EXITING 12:00:00 12:00:00 AM AM 10831 SS082197-0 0 ROCK COLUMN PRESSURE GROUT 12/10/2008 12/10/2008 12/10/2008 12/23/2009 CLOS No **TESTING** 12:00:00 12:00:00 ΑM AM

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

Building Number: BLD-0086	Building N	ame: Hospital and Addition	
Type of Service Provided			
X Nursing Inpatie Beds	146 Inpatient Days	3118 X Surgical	Obstetrical Recovery
X IntensiveCare Inpatie Beds	nt 11 Inpatient Days	X Anesthesia	Newborn/ WellBaby
Pediatric/Adol Inpatie escent Beds	nt 0 Inpatient Day	x Clinical Lab	X Emergency
Psychiatric Inpatie Nursing Beds	nt 0 Inpatient Day		X Nuclear Medicine
Obstetrical Inpatie Ante/Postprtum Beds	nt 10 Inpatient Day	/s 0 X Pharmaceutica	Rehabilitation Therapy
Intermediate Inpation	nt 0 Inpatient Day		
Skilled Nursing Inpation	nt 55 Inpatient Day	/s 10664 X Support Services Obstetrical	X Outpatient Surgery
	Total Beds this Building	122 Cesarean/Deli	V X Central Plant

Report Status: **Data Last Update:** 10/23/2013 **Submission Date:** 10/23/2013 10/25/2013 1:50 PM Print Date:

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

Building Number: BLD-00868	Building Name:	Maintenance Shop	
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/ 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	X Support Services Obstetrical	Outpatient Surgery
	Total Beds this Building	Cesarean/Deliv	Central Plant

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

Building Number:	BLD-00867	Building Name:	Hospital and Addition		
Medical / Surgical (	Include GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 46 Bed	Inpatient 3118 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 10 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 55 Bed	Inpatient 1066 Days 4
Pediatric		intensive Care Nursery	• Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	ent
Inpatient 11 Bed	Inpatient 861 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	122	122

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

Building Number:	BLD-00868	Building Name: Main	tenance Shop		
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	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 / 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

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For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

Building Number	Building Name	Building to be Removed / Replaced / Rebuilt
BLD-00867	Hospital and Addition	Rebuild
BLD-00868	Maintenance Shop	Rebuild
BLD-00869	Emergency Power System Building	Rebuild
BLD-05290	Medical Gas Facility	Rebuild

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#### List ALL proposed new buildings to be constructd at this or another site.

Building Number	Building Name	New Site	
N_1	52 Bed Replacement Hospital		

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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-00867 Building Name: Hospital and Addition	
Will general acute care services and beds will be relocated to a new, Existing or re	etrofitted building?
Nursing Relocated to new building	
New Building RetroFitted Building	Other SPC2-SPC5 Building
N_1-52 Bed Replacement Hospital	
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj. Completed
Number Num	in Date Date Date
10831 HS070843-0 0 52 BED REPLACEMENT HOSPITAL	2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL
Building Number:  BLD-00867 Building Name: Hospital and Addition	
Will general acute care services and beds will be relocated to a new, Existing or re	etrofitted building?
Intensive Care Relocated to new building	
New Building RetroFitted Building	Other SPC2-SPC5 Building
N_1-52 Bed Replacement Hospital	
Facility Project Sub Scope Status Number Num	Date Plan Approved Proj. Start Proj. Completed in Date Date Date
10831 HS070843-0 0 52 BED REPLACEMENT HOSPITAL	

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Report Year: 2013 10831 Goleta Valley Cottage Hospital Santa Barbara Page:16 of 45 BLD-00867 Hospital and Addition **Building Name:** Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Removed from hospital services Obstetrical Ante Postprtum BLD-00867 **Building Name:** Hospital and Addition Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Skilled Nursing Removed from hospital services BLD-00867 **Building Name:** Hospital and Addition Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Surgical Relocated to new building **New Building** RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Proj. Start Proj. Completed Facility Project Sub Date Plan Approved Scope Status Number Number Num in Date Date Date HS070843-0 10831 0 52 BED REPLACEMENT HOSPITAL 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL

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Report Year: 2013 10831 Goleta Valley Cottage Hospital Santa Barbara Page:18 of 45 BLD-00867 Hospital and Addition **Building Name:** Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Anesthesia Relocated to new building **New Building** RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843-0 10831 0 52 BED REPLACEMENT HOSPITAL 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL BLD-00867 **Building Name:** Hospital and Addition Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? ClinicalLab Relocated to new building New Building RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843-0 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL 10831 0 52 BED REPLACEMENT HOSPITAL

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Report Year: 2013 10831 Goleta Valley Cottage Hospital Santa Barbara Page:20 of 45 BLD-00867 Hospital and Addition **Building Name:** Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Radiological/Imaging Relocated to new building **New Building** RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843-0 10831 0 52 BED REPLACEMENT HOSPITAL 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL BLD-00867 **Building Name:** Hospital and Addition Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Pharmaceutical Relocated to new building New Building RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Date Plan Approved Proj. Start Proj. Completed Project Sub Scope Status Number Number Num Date Date Date in HS070843-0 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL 10831 0 52 BED REPLACEMENT HOSPITAL

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Report Year: 2013 10831 Goleta Valley Cottage Hospital Santa Barbara Page:22 of 45 BLD-00867 Hospital and Addition **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 Dietetic **New Building** RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843-0 10831 0 52 BED REPLACEMENT HOSPITAL 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL BLD-00867 **Building Name:** Hospital and Addition Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Administration Relocated to new building New Building RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status **Date** Number Number Num Date Date in HS070843-0 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL 10831 0 52 BED REPLACEMENT HOSPITAL

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Report Year: 2013 10831 Goleta Valley Cottage Hospital Santa Barbara Page:24 of 45 BLD-00867 Hospital and Addition **Building Name:** Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Support Services Relocated to new building New Building RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843-0 07/01/2014 FIEL 10831 0 52 BED REPLACEMENT HOSPITAL 2007-05-29 2010-11-02 11/23/2010 BLD-00867 **Building Name:** Hospital and Addition Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Emergency Relocated to new building New Building RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status **Date** Number Number Num Date Date in HS070843-0 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL 10831 0 52 BED REPLACEMENT HOSPITAL

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Report Year: 2013 10831 Goleta Valley Cottage Hospital Santa Barbara Page:26 of 45 BLD-00867 Hospital and Addition **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 Nuclear Medicine **New Building** RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843-0 10831 0 52 BED REPLACEMENT HOSPITAL 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL BLD-00867 **Building Name:** Hospital and Addition Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Rehabilitation Relocated to new building Therapy New Building RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Project Sub Date Plan Approved Proj. Start Proj. Completed Facility Scope Status Number Number Num in Date Date Date HS070843-0 2007-05-29 2010-11-02 11/23/2010 10831 0 52 BED REPLACEMENT HOSPITAL 07/01/2014 FIEL

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Report Year: 2013 10831 Goleta Valley Cottage Hospital Santa Barbara Page:28 of 45 BLD-00867 Hospital and Addition **Building Name:** Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? OutpatientSurgery Relocated to new building New Building RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Project Sub Date Plan Approved Proj. Start Proj. Completed Facility Scope Status Number Number Num Date Date Date in HS070843-0 10831 0 52 BED REPLACEMENT HOSPITAL 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL BLD-00867 **Building Name:** Hospital and Addition Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? CentralPlant Relocated to new building New Building RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Date Plan Approved Proj. Start Proj. Completed Project Sub Scope Status Number Number Num Date Date Date in HS070843-0 2007-05-29 2010-11-02 11/23/2010 10831 0 52 BED REPLACEMENT HOSPITAL 07/01/2014 FIEL HS070843-0 10831 0 52 BED REPLACEMENT HOSPITAL 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL

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Report Year: 2013 10831 Goleta Valley Cottage Hospital Santa Barbara Page:30 of 45 BLD-00867 **Building Name:** Hospital and Addition 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) **New Building** RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Project Sub Scope Date Plan Approved Proj. Start Proj. Completed Status Number Number Num Date in Date Date HS070843-0 2007-05-29 2010-11-02 11/23/2010 10831 07/01/2014 FIEL 0 52 BED REPLACEMENT HOSPITAL BLD-00867 **Building Name:** Hospital and Addition Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Removed from hospital services Perinatal (exclude Newborn / GYN))

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Report Year: 2013 10831 Goleta Valley Cottage Hospital Santa Barbara Page:32 of 45 BLD-00867 **Building Name:** Hospital and Addition 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 **New Building** RetroFitted Building Other SPC2-SPC5 Building N\_1-52 Bed Replacement Hospital Facility Project Sub Date Plan Approved Proj. Start Proj. Completed Scope Status Number Number Num Date Date Date in HS070843-0 10831 0 52 BED REPLACEMENT HOSPITAL 2007-05-29 2010-11-02 11/23/2010 07/01/2014 FIEL BLD-00867 **Building Name:** Hospital and Addition Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Skilled Nursing Removed from hospital services BLD-00868 **Building Name:** Maintenance Shop Building Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Support Services N/A

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Building Number: Will general acu CentralPlant		ng Name: Maintenance Shop  ds will be relocated to a new, Existing or re	etrofitted building?		
Building Number: Will general acu Support Service	ite care services and be	g Name: Emergency Power System Buds will be relocated to a new, Existing or re			
Building Number: Will general acu CentralPlant		ng Name: Emergency Power System Buds will be relocated to a new, Existing or re			
Building Number: Will general acu Support Service	ite care services and be	ng Name: Medical Gas Facility  ds will be relocated to a new, Existing or re	etrofitted building?		

Report Year:	2013 10831 Goleta Valley Cottag	e Hospital	Santa Barbara	Page:35 of 45
Building Number: Will general acu	BLD-05290 Building Name: Medical G	Sas Facility a new, Existing or retrofitte	d building?	
CentralPlant	N/A			

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

Building Number:	BLD-00867	Building Name:	Hospital and Addition						
Type of Service	Type of Service Provided								
			X Surgical	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy			
X	Nursing	 	X Anesthesia						
X	IntensiveCare			Obstetrical Recovery		Renal Dialysis			
	Pediatric/Adol		X Clinical Lab			Outpatient			
	escent		X Radiological/	Newborn/ WellBaby	X	Surgery			
	Psychiatric Nursing		Imaging						
			X Pharmaceutical	X Emergency	X	Central Plant			
	Obstetrical Ante/Postprtu	m [>	X Dietetic	X Nuclear Medicine	X	Support Services			
	Intermediate Care		X Administration						
	Skilled Nursin		Auministration						

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

Building Number:	BLD-00868	Building Name:	Maintenance Shop				]			
Type of Service	Type of Service Provided									
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	Nursing		Anesthesia							
	IntensiveCare	÷		Obstetrical Recovery		Renal Dialysis				
	Pediatric/Ado	,   [	Clinical Lab			Outpatient				
Ш	escent		Radiological/	Newborn/ WellBaby		Surgery				
	Psychiatric Nursing		Imaging  Pharmaceutical	Emergency	abla	Central Plant				
	Obstatrical		Filalinaceutical	Emergency	Х	Central Flant				
	Obstetrical Ante/Postprtum	ım _	Dietetic	Nuclear Medicine	X	Support Services				
	Intermediate Care		_							
	Caro		Administration							
	Skilled Nursin	ng								

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

Building Numbe	Building Number: BLD-00867 Building Name: Hospital and Addition								
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new S	PC5 and N	NPC4 or NPC5 building.				
Type of Serv	vice Provided								
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy		
X	IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis		
	Pediatric/Adol escent	X	Clinical Lab		Recovery				
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery		
	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency	X	Central Plant		
	Intermediate	X	Dietetic		- ,				
	Care Skilled Nursing	X	Administration	X	Nuclear Medicine	X	Support Services		

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

Building Number:	Building Number: BLD-00868 Building Name: Maintenance Shop							
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new S	PC5 and N	NPC4 or NPC5 building.			
Type of Service	ce Provided							
1	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	П	Emergency	X	Central Plant	
	ntermediate Care		Dietetic		Nuclear Medicine	  X	Support	
	Skilled Nursing		Administration		Nucleal Medicille		Services	

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

Building Number:	Building Number: BLD-00869 Building Name: Emergency Power System Building								
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new \$	SPC5 and N	IPC4 or NPC5 building.				
Type of Service	e Provided								
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recovery				
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical nte/Postprtum		Pharmaceutical		Emergency	X	Central Plant		
	ntermediate		Dietetic						
	are killed Nursing		Administration		Nuclear Medicine	X	Support Services		

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

Building Number: BLD-05290 Building Name: Medical Gas Facility								
Configuration	n: Rebuild (Per SB90	Definition fo	or Rebuild) with nev	v SPC5 and N	NPC4 or NPC5 building.			
Type of Service 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		F		Control Blood	
			Dietetic		Emergency	X	Central Plant	
	Intermediate Care		2.3.0.10		Nuclear Medicine	X	Support Services	
	Skilled Nursing		Administration				GELVICES	

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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	0-00869	Building N	lame: Em	ergency Power Sys	tem Building	
Type o	of Service Provi	<u>ided</u>					
N	lursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
_ In	ntensiveCare	Inpatient Beds	0		Anesthesia		
1 1	ediatric/Adol scent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	sychiatric Iursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
_	Obstetrical .nte/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Central Plant
	ntermediate care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services
s	killed Nursing	Inpatient Beds	0		Administration		
	otal Beds this building		0				

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report rear.	2010	10001	Colota valley Cottage Hospital		Odrita Darbara	1 agc.+3 01 +3

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-05290	Building N	Name: Medical Gas Facility					
Type of Service Provided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveCare	e Inpatient Beds	0	Anesthesia					
Pediatric/Ado escent	I Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis			
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprtu	Inpatient Im Beds	0	Pharmaceutical	Emergency	X Central Plant			
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services			
Skilled Nursin	ng Inpatient Beds	0	Administration					
Total Beds thi Building	is	0						

Report Status: **Data Last Update:** 10/23/2013 **Submission Date:** 10/23/2013 **Print Date:** 10/25/2013 1:50 PM

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

Building Number:	BLD-00869	Building Name:	Emergency Power	er System Building			
Medical / Surgical (	Include GYN)	Acute Res	piratory Care	Acute P	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatien Bed	t 0 Inpatient 0 Days		
Perinatal (Exclude	Newborn / GYN)	Burn		Skilled	Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatien Bed	t 0 Inpatient 0 Days		
Pediatric		Intensive C Nursery	Care Newborn	Interme	diate Care		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatien Bed	t 0 Inpatient 0 Days		
Intensive Care		Rehabilitat Center	tion	Int. Car Disable	e / Developmentally d		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatien Bed	t 0 Inpatient 0 Days		
<b>Coronary Care</b>		Chemical I	Dependency	Total B Buildin	eds this Total Beds this g Per Building Per		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Unit	<b>Service</b> 0		

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

Building Number:	BLD-05290	Building Name:	Medical Gas Facility	у	
Medical / Surgical (	nclude GYN)	Acute Res	piratory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude I	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days
Pediatric		Intensive ( Nursery	Care Newborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitat Center	ion	Int. Care / Develop Disabled	mentally
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical I	Dependency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	O Unit	Service 0