Office of Statewide Health Planning and Development Facilities Development Division

Senate Bill 499 (SB 499) Hospital Report

As submitted to California's Office of Statewide Health Planning and Development in accordance with Senate Bill 499 (SB 499) requirement for all general acute care hospitals with Structural Performance Category 1 (SPC-1) buildings to report annually with seismic safety compliance status, beds and services.

Provide the Hospital	al Owner and Year of Report per Section 130061(e)
Facility Number:	11205
Facility Name:	Rideout Memorial Hospital
Address:	726 Fourth St.
City:	Marysville
Year of Re Contact 1 e-mail A Contact 2 e-mail A Contact 3 e-mail A Name of Sul	eporting: 2014 Address: Address: Multiplication of the state of the s

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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- 01273	West Wing (1960)	726 Fourth St.	Rebuild	SPC5	01/01/2018	01/01/2018
BLD- 01274	North Wing (1925)	726 Fourth St.	Rebuild	SPC5	01/01/2018	01/01/2018

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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-01273 West Wing (1960) Retrofit/Replacement Yes-Submitted Project: Facility Project Sub Plan **Project** CEQA Number Number Num Scope Approved Start Date Complete Review Date In Status Date 11205 IS081773-0 0 PPR-RMH-ADDITIONS & ALTERATIONS 10/6/2008 11/01/2011 08/01/2015 ACTI No 12:00:00 AM

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).

North Wing (1925)

Building No: BLD-01274

Dallaling	IVO. DED O	1214	(1020)		Project:	Jiacement	TC3 Out		J
Facility Number	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Start Date	Project Complete d	Status	CEQA Review
11205	IS081773-0	0	PPR-RMH-ADDITIONS & ALTERATIONS	10/6/2008 12:00:00 AM		11/01/2011	08/01/2015	ACTI	No

Ves-Submitted

Retrofit/Replacement

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Provide the number of	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-01273	Building Name:	West Wing (196	50)				
Type of Service Provi	<u>ided</u>							
X Nursing	Inpatient Beds	52 Inpatient 1090	02 Surg	gical Obstetr Recove				
IntensiveCare	Inpatient Beds	0 Inpatient Days	0 Anes	sthesia Newbor WellBal				
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days	0 Clinic	cal Lab Emerge	ency			
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days	0 Imag					
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days	0 Phari	maceutical Rehabil Therapy				
Intermediate Care	Inpatient Beds	0 Inpatient Days		inistration Renal D	•			
Skilled Nursing	Inpatient	0 Inpatient Days	Supp O	oort Outpatie ices Surgery	ent ,			
	Beds	Total Beds this Building		etrical arean/Deliv Central	Plant			

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Provide the number of	of inpatient bed	ds and patient days per type of service pe	er building per Section 130061	(c)(1)(F)
Building Number: B		Building Name: No	orth Wing (1925)	
Type of Service Pro	<u>vided</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 AdministrationX Support	Renal Dialysis Outpatient
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Services	Surgery
	2000	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Plant

Report Year: 2014 11205 Rideout Memorial Hospital Marysville Page:6 of 43 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-01273 West Wing (1960) **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient 52 Inpatient 1090 Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn 0 Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Pediatric** intensive Care Newborn **Intermediate Card Nursery** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Days Bed Days Bed **Intensive Care** Rehabilitation Int. Care / development Center **Disabled** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Days Days Bed Davs Bed Bed **Total Beds this** Total Beds this **Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient 52 52 Inpatient Inpatient Inpatient Bed Days Days Bed

Report Year: 2014 11205 Rideout Memorial Hospital Marysville Page:7 of 43 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) North Wing (1925) **Building Number:** BLD-01274 **Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed Bed **Pediatric** intensive Care Newborn **Intermediate Card** Nursery Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient 0 Inpatient Inpatient ol Days Days Bed Bed

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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-01264	Patient Tower/Cath Lab/4th Floor	Remain
BLD-01267	Central Plant (1960 & 1988)	Remain
BLD-01268	Central Plant CP-1 ('92 '98 & 2000)	Remain
BLD-01272	East Wing (1978)	Remain
BLD-01273	West Wing (1960)	Rebuild
BLD-01274	North Wing (1925)	Rebuild
BLD-01275	North Wing N-1 ('74 '80 & '86)	Rebuild
BLD-03485	North Wing N-2 (1960)	Rebuild
BLD-03769	Registration Building	Remain

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List ALL proposed	d new buildings to be constructed at this or another site.		
Building Number	Building Name	New Site	
N_1	09 RMH Tower		

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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)											
Building I	Building Number: BLD-01273 West Wing (1960) Removal Date:										
Planned	Uses for the build	ing to be rer	moved from acute care	service:							
	use for building:		fice Building		SHPD						
Inpatient X — — — — — — — — — — — — — — — — —	Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing Obstetrical Ante/Postprtum Intermediate Care Skilled Nursing	delivered in	n the building: Surgical Anesthesia Clinical Lab Radiological/ Imaging Pharmaceutical Dietetic Administration		Dbstetrical Desarean/Deliv Dbstetrical Recovery Newborn/ VellBaby Emergency Juclear Medicine		Rehabilitation Therapy Renal Dialysis Outpatient Surgery Central Plant Support Services				

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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)										
Building Number: BLD-01274 North Wing (1925) Removal Date:										
Planned	Uses for the buildi	ng to be remov	ved from acute care	e service:						
Planned	use for building:	Demolished		Jurisdiction:						
<u>Inpatient</u>	services currently	delivered in th	<u>ie building:</u>			_				
	Nursing		Surgical		Obstetrical Cesarean/Deliv	, \square	Rehabilitation Therapy			
	IntensiveCare		Anesthesia							
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery		Renal Dialysis	3		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical		·		Control Dlant			
	Intermediate Care	X	Dietetic		Emergency	Ш	Central Plant			
	Skilled Nursing	X	Administration		Nuclear Medicine	X	Support Services			

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No data reporte	No data reported for Section 130061(c)(2)(D).									

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No data reporte	d for Section	n 130061(c))(2)(D.		

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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-01273 Building Name:	West Wing (1960)								
Will general acute care services and beds will be	relocated to a new, Existing or retrofitted	building?							
Nursing Relocated to new building									
New Building	RetroFitted Building	Other SPC2-SPC5 Buildin	<u>g</u>						
N_1-09 RMH Tower									
Building Sites or project numbers for buildings with Building Number: Building Number: BLD-01273 Building Name: Will general acute care services and beds will be	West Wing (1960)								
		1							
Nuclear Medicine Relocated to new building									
New Building	RetroFitted Building	Other SPC2-SPC5 Buildin	<u>g</u>						
N_1-09 RMH Tower									

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Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Re		responding
Building Number: BLD-01273 Building Name: West Wing (1960)		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Medical/Surgical (Include GYN)		
New Building RetroFitted Building	Other SPC2-SPC5 Building	
N_1-09 RMH Tower		
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rebuild" or "Rebuilding Resolution of "Rebuild" or "Rebuilding Resolution of "Rebuild" or "Rebuilding Resolution of "Rebuild" or "Rebuilding Relocated Building Resolution of "Rebuilding or "Rebuilding Relocated to a new, Existing or retrofitted Rediological/Imaging Relocated to new building	eplace" per Section 130061(c)(2)(E)	
New Building RetroFitted Building	Other SPC2-SPC5 Building	
N_1-09 RMH Tower		

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		e services and beds will be relocated to a no uildings with a Building Resolution of "Rebu			
Building BLE Number:	0-01274 Build	ling Name: North Wing (1925)			
Will general acute care	services and b	eds will be relocated to a new, Existing or r	etrofitted	building?	
Dietetic	Relocated to r	new building			
New Building		RetroFitted Building		Other SPC2-SPC5 Buildir	ng
N_1-09 RMH Tower	,	-			
		e services and beds will be relocated to a no uildings with a Building Resolution of "Rebu			
building sites of projec	Thumbers for be	undings with a building Resolution of Rebu	ilid Ol Ke		-)
Building BLE Number:	0-01274 Build	ling Name: North Wing (1925)			
Will general acute care	services and b	eds will be relocated to a new, Existing or r	etrofitted	building?	
Administration	Relocated to r	new building			
New Building]	RetroFitted Building		Other SPC2-SPC5 Buildir	<u>ng</u>
N_1-09 RMH Tower					

Report Year: 2014 11205 Rideout Memorial Hospital Marysville Page:17 of 43 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) North Wing N-2 (1960) BLD-03485 Building Building Name: Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Relocated to new building Administration **RetroFitted Building New Building** Other SPC2-SPC5 Building N_1-09 RMH Tower 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) BLD-01275 **Building Name:** North Wing N-1 ('74 '80 & '86) 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

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No data reporte	d for Section	n 130061(c))(3).		

ling Number:	BLD-01273 Buildin	ng Name: W	est Wing (1960)			
ype of Service	e Provided	I \square	Surgical		Obstetrical	Rehabilitation
X	Nursing				Cesarean/Deliv	 Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		·	Outpatient Surgery
	Psychiatric		Radiological/ Imaging	Ш	Newborn/ WellBaby	Surgery
	Nursing		Pharmaceutical		Emergency	Central Plant
	Obstetrical Ante/Postprtum		Dietetic	X	Nuclear Medicine	Support Services
	Intermediate Care		Administration			
	Skilled Nursing					

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Report any general acute care he per Section 130061(c)(4)	spital inpatient service that is provided in any	y genaral acute care hospita	al building that is rated	d SPC-1
Building Number: BLD-01274	Building Name: North Wing (1925)			
Type of Service Provided				
	Surgical	Obstetrical Cesarean/Deliv	Rehabilit Therapy	
Nursing	Anesthesia		Renal Di	alveis
IntensiveCa	re Clinical Lab	Obstetrical Recovery	Keliai bi	aiysis
Pediatric/Adescent	ol Radiological/	Newborn/ WellBaby	Outpatie Surgery	nt
Psychiatric Nursing	Imaging Pharmaceutical	Emergency	Central F	Plant
_	Pharmaceutical	Linergency	Central i	ranı
Obstetrical Ante/Postpi	um X Dietetic	Nuclear Medicine	X Support Services	
Intermediat Care	X Administration			
Skilled Nurs	ng			

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Report the final configuration of all bui requirements whether by retrofit or by per Section 130061(c)(5)			
Building Number: BLD-01264	Building Name: Patient Tower/C	ath Lab/4th Floor	
Configuration: Retrofit Conforming	ng building to NPC 4 or NPC 5		
Type of Service Provided			
X Nursing	X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X IntensiveCare	X Anesthesia	Obstetrical Recovery	Renal Dialysis
Pediatric/Adol escent	Clinical Lab	Recovery	
Psychiatric Nursing	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	X Pharmaceutical	X Emergency	Central Plant
Intermediate	Dietetic		
Care Skilled Nursing	Administration	Nuclear Medicine	Support Services
	•		

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	whether by retrofit or by				ach building will comply be provided in each gen		
Building Numb	er: BLD-01267	Building Nan	ne: Central Plant (196	60 & 198	8)		
Configuration	n: Retrofit Conformi	ng building to l	NPC 4 or NPC 5				
Type of Sei	vice Provided	1					
	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		_		
	Anton ostpitam		Dietetic		Emergency	X	Central Plant
	Intermediate Care		Dietetic		Nuclear Medicine		Support
	Skilled Nursing		Administration				Services

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	her by retrofit or by				ach building will comply voe provided in each gene			
Building Number:	BLD-01268	Building Nar	me: Central Plant CP-	l ('92 '98	& 2000)			
Configuration: Retrofit Conforming building to NPC 4 or NPC 5								
Type of Service	e Provided							
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Int	tensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis	
	ediatric/Adol scent		Clinical Lab		recovery			
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	bstetrical nte/Postprtum		Pharmaceutical		Emergency	X c	Central Plant	
	termediate are		Dietetic		Nuclear Medicine		Support	
Sk	killed Nursing		Administration				Services	

L	2014 11205	Rideout Memorial	Hospital		Marysville		Page:24 of 43
Report the fina requirements per Section 13	al configuration of all bu whether by retrofit or by 80061(c)(5)	ildings on the hosp replacement and t	ital campus showing he type of service th	g how ean	ach building will comply be provided in each ger	with the SP neral actue c	C-5/NPC-4 or 5 are hospital building
Building Numl	per: BLD-01272	Building Name:	East Wing (1978)				
Configuratio	n: Retrofit Conformi	ng building to NPC	4 or NPC 5				
Type of Se	rvice Provided						
X	Nursing	Surg	gical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	Ane	sthesia		Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent	X Clin	ical Lab		Recovery		
	Psychiatric Nursing		diological/ ging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	Pha	ırmaceutical		Constraints.		Central Plant
	Intermediate	Die	tetic		Emergency	_	Central Plant
	Care Skilled Nursing	Adr	ninistration		Nuclear Medicine	X	Support Services

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	whether by retrofit or by				ach building will comply voe provided in each gene			
Building Numb	per: BLD-01273	Building Nar	ne: West Wing (1960)					
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.								
Type of Se	rvice Provided							
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	IntensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis	
	Pediatric/Adol escent		Clinical Lab		Recovery			
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Gurgery	
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant	
	Intermediate Care		Dietetic	Х	Nuclear Medicine		Support	
	Skilled Nursing		Administration				Services	

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	her by retrofit or by		hospital campus showin and the type of service t						
Building Number:	BLD-01274	Building Nar	me: North Wing (1925)						
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Service	Provided								
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		habilitation erapy		
Int	ensiveCare		Anesthesia		Obstetrical Recovery	Re	nal Dialysis		
	ediatric/Adol cent		Clinical Lab		resovery				
	ychiatric ırsing		Radiological/ Imaging		Newborn/ WellBaby		tpatient rgery		
	ostetrical		Pharmaceutical						
<u> </u>	te/Postprtum				Emergency	Ce	ntral Plant		
Int Ca	ermediate are	X	Dietetic		Nuclear Medicine		ıpport		
Sk	illed Nursing	X	Administration			Se	ervices		

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	ner by retrofit or by				ach building will comply wi be provided in each genera			
Building Number:	BLD-01275	Building Nan	ne: North Wing N-1 ('7	4 '80 & '	86)			
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.								
Type of Service	Provided							
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Into	ensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis	
	diatric/Adol cent		Clinical Lab		Recovery			
	ychiatric ırsing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Gurgery	
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant	
Into Ca	ermediate ire		Dietetic		Nuclear Medicine		Support	
Sk	illed Nursing		Administration			•	Services	

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requirements wheth	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-03485 Building Name: North Wing N-2 (1960)								
Configuration:	Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.								
Type of Service	Provided								
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy		
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	Re	enal Dialysis		
	diatric/Adol cent		Clinical Lab		Recovery				
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		utpatient Irgery		
Ob	estetrical		Pharmaceutical						
☐ An	te/Postprtum				Emergency	Ce	entral Plant		
Into Ca	ermediate ire		Dietetic	П	Nuclear Medicine		upport		
Ski	illed Nursing	X	Administration			<u> </u>	ervices		

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	ner by retrofit or by i				ach building will comply woe provided in each gener				
Building Number:	Building Number: BLD-03769 Building Name: Registration Building								
Configuration:	Configuration: Retrofit Conforming building to NPC 4 or NPC 5								
Type of Service	Provided								
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation herapy		
Into	ensiveCare		Anesthesia		Obstetrical Recovery	R	Renal Dialysis		
	diatric/Adol cent		Clinical Lab		Recovery				
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	estetrical te/Postprtum		Pharmaceutical		Emergency	c	Central Plant		
Into Ca	ermediate Ire		Dietetic		Nuclear Medicine	X s	Support		
Sk	illed Nursing	X	Administration			(Services		

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	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)								
Buildi	Building Number: BLD-01264 Building Name: Patient Tower/Cath Lab/4th Floor								
Тур	e of Service Prov	<u>rided</u>							
X	Nursing	Inpatient Beds	48	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare	Inpatient Beds	24	X	Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical	X	Emergency		Central Plant
	Intermediate Care	Inpatient Beds	0	Ш	Dietetic		Nuclear Medicine		Support Services
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		72						

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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 Numb	er: BLD-01267	Building Nam	ne: Central Plant (1960 &	1988)			
Type of Serv	ice Provided						
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
Intensiv	eCare Inpatient Beds	0	Anesthesia				
Pediatric escent	c/Adol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis		
Psychia Nursing	tric Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetri Ante/Po		0	Pharmaceutical	Emergency	X Central Plant		
Interme Care	diate Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services		
Skilled I	Nursing Inpatient Beds	0	Administration				
Total Be Building		0					

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	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)						
Building Number:	BLD-01268	Building Na	ame: Central Plant CP-1 ('92	? '98 & 2000)			
Type of Service P	Provided						
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
IntensiveCar	e Inpatient Beds	0	Anesthesia				
Pediatric/Add	ol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis		
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprt	Inpatient um Beds	0	Pharmaceutical	Emergency	X Central Plant		
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services		
Skilled Nursi	ng Inpatient Beds	0	Administration				
Total Beds th Building	nis	0					

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	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)								
Buildir	ng Number: BLE	D-01272	Building Nan	ne: Ea	ast Wing (1978)]
<u>Type</u>	of Service Prov	rided							
X	Nursing	Inpatient Beds	49		Surgical		Obstetrical Cesarean/Deliv		nabilitation erapy
	IntensiveCare	Inpatient Beds	0		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab		Obstetrical Recovery	Rei	nal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby	Ou ⁻ Sui	tpatient gery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	Cei	ntral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine	X Sup Ser	pport vices
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		49						

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	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)						
Building Number: BL	D-01275	Building Na	ame: North Wing N-1 ('74 '8	0 & '86)			
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	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprtum	Inpatient Beds	0	Pharmaceutical	Emergency	Central Plant		
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services		
Skilled Nursing	Inpatient Beds	0	Administration				
Total Beds this Building		0					

Report Year:	2014	11205	Rideout Memori	ial Hospita	1		Marysville	Page:35 of 43
	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 Nui	mber: BLI	D-03485	Building Na	ıme: No	rth Wing N-2 (1960)			
Type of Se	ervice Prov	<u>rided</u>						
Nursi	ng	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Intens	siveCare	Inpatient Beds	0		Anesthesia			
Pedia escer	atric/Adol nt	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	Renal Dialysis
Psych Nursi	niatric ng	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	etrical Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	Central Plant
Intern Care	nediate	Inpatient Beds	0		Dietetic		Nuclear Medicine	Support Services
Skille	d Nursing	Inpatient Beds	0	X	Administration			
Total Buildi	Beds this		0					

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	Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)							
Building Number:	LD-03769	Building Na	me: Registra	ation Building				
Type of Service Pro	ovided							
Nursing	Inpatient Beds	0	Su	rgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	And	esthesia				
Pediatric/Adol escent	Inpatient Beds	0	Clir	nical Lab		Obstetrical Recovery		Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0		diological/ aging		Newborn/ WellBaby		Outpatient Surgery
Obstetrical Ante/Postprtun	Inpatient n Beds	0	Pha	armaceutical		Emergency		Central Plant
Intermediate Care	Inpatient Beds	0	□ Die	tetic		Nuclear Medicine	X	Support Services
Skilled Nursing	Inpatient Beds	0	X Adr	ministration				
Total Beds this Building	3	0						

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Include information on the SPC-5 per Section 1300		eds by type of unit provided by buildings that	t are classified as SPC-2, SPC-3, SPC-4, and
Building Number:	LD-01264 Buildi	ng Name: Patient Tower/Cath Lab/4th	Floor
Medical / Surgical (Inc	lude GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 48 Bed	Inpatient 14029 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Perinatal (Exclude Nev	vborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Days
Pediatric		Intensive Care Newborn Nursery	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 24 Bed	Inpatient 6100 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days
Coronary Care		Chemical Dependency	Total Beds this Building Per Building Per
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Unit Service 72

Report Year: 2014 11205 Rideout Memorial Hospital Marysville Page:38 of 43 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) BLD-01267 Central Plant (1960 & 1988) **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 11205 Rideout Memorial Hospital Marysville Page:39 of 43 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) BLD-01268 Central Plant CP-1 ('92 '98 & 2000) **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 11205 Rideout Memorial Hospital Marysville Page:40 of 43 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) BLD-01272 **East Wing (1978) Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 14117 Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Days Bed Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 49 49

Report Year: 2014 11205 Rideout Memorial Hospital Marysville Page:41 of 43 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) BLD-01275 North Wing N-1 ('74 '80 & '86) **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 11205 Rideout Memorial Hospital Marysville Page:42 of 43 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) BLD-03485 North Wing N-2 (1960) **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 11205 Rideout Memorial Hospital Marysville Page:43 of 43 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) BLD-03769 Registration Building **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0