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	Owner and	d Year of Report per Section 130061(e)	
Facility Number:	10681		
Facility Name:	Mountai	ns Community Hospital]
Address:	29101 H	Hospital Road]
City:	Lake Ar	rowhead]
Year of Rep Contact 1 e-mail Ac Contact 2 e-mail Ac Contact 3 e-mail Ad	porting: ddress: ddress:	San Bernardino Mountains Community Hospital District 2017 [Confidential data left blank intentionally.] [Confidential data left blank intentionally.]]]
Name of Sub	omitter:	San Bernardino Mountains Community Hospital District	
Submission	n Date:	10/23/2017 11:19:15 AM	

Report Year: 2017 10681 Mountains Community Hospital Lake Arrowhead Page:2 of 29

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, SPC4D 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- 01474	Main Building	29101 Hospital Road	Retrofit	SPC2	01/01/2018	01/01/2018
BLD- 01477	Emergency Generator Bldg	29101 Hospital Road	Retrofit	SPC2	01/01/2013	07/01/2018
BLD- 01478	Oxygen Storage Bldg	29101 Hospital Road	Retrofit	SPC2	01/01/2013	07/01/2018

Report Year: 2017 Mountains Community Hospital Lake Arrowhead Page:3 of 29

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).

Main Building Yes-Submitted Building No: BLD-01474 Retrofit/Replacement Project: CEQA Facility Project Plan Approved Projected Projected Sub Completion Date Status Number Number Date Start Date Review Num Scope Date In 10681 H132915-36 0 Seismic Retrofit Project 12/26/201 11/17/2015 03/15/2015 10/15/2015 FIEL No. 3 12:00:00 -00 AM 10681 P-2012-Seismic Joint 1/3/2012 8/21/2014 05/01/2014 09/01/2014 FIEL No 00003 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).

Emergency Generator Bldg

BLD-01477

Building No:

Project: Facility Project Sub Plan Approved Projected Projected CEQA Completion Date Status Date Start Date Review Number Number Num Scope Date In 0 CLOS No 10681 HS022019-0 8/5/2002 8/5/2003 05/19/2005 07/01/2006 12:00:00

No-Planned

Retrofit/Replacement

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).

Building No: BLD-01478 Oxygen Storage Bldg Retrofit/Replacement Project: No-Planned



Report Year: 2017	10681	Mountains Community Hospital		Lake Arrowhead	Page:5 of 29
Provide the number of	inpatient bed	ls and patient days per type of servi	ce per building per	Section 130061(c)(1)(F)	
Building Number: BLI	D-01474	Building Name:	Main Building		
Type of Service Prov	<u>ided</u>				
X Nursing	Inpatient Beds	17 Inpatient 1433 Days	X Surg	ical Obstetri Recover	
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	X Anes	thesia Newborn WellBab	
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	X Clinic	cal Lab Emerge	ncy
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Imag		
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Pharr	maceutical Rehabili tic Therapy	
Intermediate Care	Inpatient Beds	0 Inpatient Days 0		nistration Renal D	•
X Skilled Nursing	Inpatient Beds	20 Inpatient Days 7003	X Supp Servi	ces Surgery	ent
	Deus	Total Beds this Building		etrical rean/Deliv X Central	Plant

Report Yea	ar: 2017	10681	Mountains Community	Hospital		Lake Arrowhead	d	Page:6 of 29
Provide t	the number of	inpatient bed	s and patient days per	type of service	per building per	r Section 130061	(c)(1)(F)	
	Number: BLI		Building N	lame:	Emergency Ger	nerator Bldg		
					I 🗆	to all	☐ Obstetrica	ı
∐ Nur	rsing	Inpatient Beds	0 Inpatient Days	0	Surg	ical	☐ Recovery	u
Inte	ensiveCare	Inpatient Beds	0 Inpatient Days	s 0	Anes	sthesia	Newborn/ WellBaby	
1 1	diatric/Adol cent	Inpatient Beds	0 Inpatient Day	ys 0	Clinic	cal Lab	Emergend	y
	ychiatric rsing	Inpatient Beds	0 Inpatient Day	ys 0	Radio Imag	ological/ ing	Nuclear Medicine	
	stetrical te/Postprtum	Inpatient Beds	0 Inpatient Day	ys 0	Phari	maceutical	Rehabilita Therapy	tion
	ermediate	Inpatient Beds	0 Inpatient Day	ys 0	Admi	inistration	Renal Dia	
Skil	lled Nursing	Inpatient Beds	0 Inpatient Day	ys 0	Servi	ices	Surgery	
		2000	Total Beds this Building	0		etrical arean/Deliv	X Central Pl	ant

Report Year: 2017	10681	Mountains Community Hospital	Lake Arrowhea	ad	Page:7 of 29
Provide the number of	of inpatient be	ds and patient days per type of service pe	er building per Section 13006	1(c)(1)(F)	
Building Number: B		Building Name: Ox	kygen Storage Bldg		
Type of Service Pro	vided				
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	1
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine	
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitat Therapy	ion
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialy	ysis .
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery	
	Deus	Total Beds this Building	Obstetrical Cesarean/Deliv	X Central Pla	nt

Report Year: 2017 Mountains Community Hospital Lake Arrowhead

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-01474 Main Building **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient 17 Inpatient 1433 Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn 0 20 Inpatient | 7003 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days **Pediatric** intensive Care Newborn **Intermediate Card Nursery** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Days Bed Bed Days **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 37 Inpatient Inpatient Inpatient 37 Bed Days Days Bed

Page:8 of 29

Report Year: 2017 10681 Mountains Community Hospital Lake Arrowhead Page:9 of 29 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) **Emergency Generator Bldg Building Number:** BLD-01477 **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

Report Year: 2017 10681 Mountains Community Hospital Lake Arrowhead Page:10 of 29 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-01478 Oxygen Storage Bldg **Building Number: 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

Report Year: 2017 10681 Mountains Community Hospital Lake Arrowhead Page:11 of 29

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-01474	Main Building	Retrofit
BLD-01475	Radiology/Lab and ER Addition	Remain
BLD-01477	Emergency Generator Bldg	Retrofit
BLD-01478	Oxygen Storage Bldg	Retrofit
BLD-03687	Emergency Generator Bldg II	Remain

Report Year:	2017 10681 Mountains Communit	ty Hospital Lake Arrowhead	Page:12 of 29
List ALL prop	posed new buildings to be constructed at this o	or another site.	
Building Number	Building Name	New Site	
N_1	n/1		

Report Year: Mountains Community Hospital 2017 10681 Lake Arrowhead Page:13 of 29 No data reported for Section 130061 (c)(2)(A), (B), or (C)

Report Year: Mountains Community Hospital 2017 10681 Lake Arrowhead Page:14 of 29 No data reported for Section 130061(c)(2)(D).

Report Year: Mountains Community Hospital 2017 10681 Lake Arrowhead Page:15 of 29 No data reported for Section 130061(c)(2)(D).

Report Year:	2017	10681	Mountains Communi	ty Hospital		Lake Arrowhead		Page:16 of 29
No data reporte	ed for whethe	er the general	al acute care services	and beds will be reloc	ated to a	new, existing or retrofitted bebuild" or "Replace" per Sec	ouilding a	nd any 061(c)(2)(F)
borresponding	bullating offer	o or project i	idinibere for buildings	with a Ballating Resolu		sound of Replace per eet	011011100	001(0)(2)(2).

Report Year:	2017	10681	Mountains Community Hospital	Lake Arrowhead	Page:17 of 29
No data reporte	ed for Section	on 130061(c))(3).		

Report Year: 201	17 10681 Mount	ains Communi	ty Hospital		Lake Arrowhead		P	age:18 of 29
Report any general per Section 130061	acute care hospital inpa	tient service th	nat is provided in any	general	acute care hospital l	ouilding t	hat is rated S	PC-1
Building Number:	BLD-01474 Buildin	g Name: M	ain Building					
Type of Service	e Provided							
		X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitati Therapy	on
X	Nursing	×	Anesthesia					
	IntensiveCare		,		Obstetrical Recovery		Renal Dialy	rsis
	Pediatric/Adol	X	Clinical Lab		·	abla	Outpatient	
	escent	X	Radiological/		Newborn/ WellBaby		Surgery	
	Psychiatric Nursing							
	3	[X]	Pharmaceutical		Emergency	X	Central Pla	nt
Type of Service Provided X Surgical Obstetrical Rehabilitation Therapy X Nursing X Anesthesia Obstetrical Renal Dialysis IntensiveCare Obstetrical Recovery Renal Dialysis Y Clinical Lab Recovery X Outpatient Surgery X Radiological/ WellBaby								
		I X	Dietetic		Wedienie		COLVIOCO	
		 X	Administration					
	0		rammonation					
X	Skilled Nursing	l						

lding Number:	BLD-01477 Buildi	ng Name: E	mergency Generator	Bldg				
Type of Service	e Provided		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	Nursing		Anesthesia		Obstetrical		Renal Dialysis	
	IntensiveCare Pediatric/Adol		Clinical Lab		Recovery		Outpatient	
	escent Psychiatric		Radiological/ Imaging		Newborn/ WellBaby		Surgery	
	Nursing		Pharmaceutical		Emergency	X	Central Plant	
	Obstetrical Ante/Postprtum		Dietetic		Nuclear Medicine		Support Services	
	Intermediate Care		Administration					
	Skilled Nursing							

lding Number:	BLD-01478 Buildi	ng Name: O	xygen Storage Bldg				
Type of Service	e Provided	ı —	Surgical	Obstetrical		Rehabilitation	
	Nursing		Gargioan	Cesarean/Deliv	Ш	Therapy	
	-		Anesthesia	Obstetrical		Renal Dialysis	
	IntensiveCare		Clinical Lab	Recovery			
	Pediatric/Adol escent		Cillical Lab	Newborn/		Outpatient Surgery	
	Psychiatric		Radiological/ Imaging	WellBaby			
	Nursing		Pharmaceutical	Emergency	X	Central Plant	
	Obstetrical Ante/Postprtum			Nuclear		Support	
	7tho/1 ostpitam		Dietetic	Medicine		Services	
	Intermediate Care						
	G G . G		Administration				
	Skilled Nursing	1					

Report Year: 2017	7 10681 Mou	ntains Co	mmunity Hospital		Lake Arrowhead		Page:21 of 29		
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 acute care hospital building per Section 130061(c)(5)									
Building Number:	BLD-01474 Bui	ilding Nar	ne: Main Building						
Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5									
Type of Service P	rovided								
X Nursi	ing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
Inten	siveCare	X	Anesthesia		Obstetrical Recovery		Renal Dialysis		
Pedia escel	atric/Adol nt	X	Clinical Lab		Recovery				
Psyc Nursi	hiatric ing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	etrical /Postprtum	X	Pharmaceutical		Emergency	X	Central Plant		
Interr Care	mediate	X	Dietetic		Nuclear Medicine	X	Support		
X Skille	ed Nursing	X	Administration				Services		

Report Year:	2017 10681	Mountains Co	mmunity Hospital		Lake Arrowhead		Page:22 of 29		
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 acute care hospital building per Section 130061(c)(5)									
Building Number:	: BLD-01475	Building Na	ne: Radiology/Lab an	d ER Ad	dition				
Configuration:	Retrofit Conformir	ng building to	NPC 4 or NPC 5						
Type of Service	ce Provided								
N	Nursing		Surgical		Obstetrical Cesarean/Deliv		habilitation erapy		
I	ntensiveCare		Anesthesia		Obstetrical Recovery	Re	nal Dialysis		
	Pediatric/Adol escent	X	Clinical Lab		recovery				
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		tpatient rgery		
	Obstetrical Ante/Postprtum		Pharmaceutical	X	Emergency	☐ Cei	ntral Plant		
	ntermediate		Dietetic		Linergency		mar ram		
	Care Skilled Nursing		Administration		Nuclear Medicine		ipport ervices		
		I							

Report Year: 20	17 10681	Mountains Co	mmunity Hospital		Lake Arrowhead		Page:23 of 29			
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 acute care hospital building per Section 130061(c)(5)										
Building Number:	BLD-01477	Building Nam	ne: Emergency Genera	ator Bld)					
Configuration:	Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5									
Type of Service	Provided									
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation erapy			
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	Re	enal Dialysis			
	diatric/Adol cent		Clinical Lab		Todovoly					
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery			
	stetrical		Pharmaceutical							
AIII	te/Postprtum			Ш	Emergency	∐ C∈	entral Plant			
Inte Car	ermediate re		Dietetic		Nuclear Medicine		upport ervices			
Ski	illed Nursing		Administration			Si	ervices			

Report Year: 2	2017 10681	Mountains Co	ommunity Hospital		Lake Arrowhead		Page:24 of 29				
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 acute care hospital building per Section 130061(c)(5)											
Building Number: BLD-01478 Building Name: Oxygen Storage Bldg											
Configuration:	Configuration: Retrofit Non-Conforming building to SPC 4D or SPC 5 and NPC 4 or NPC 5										
Type of Servic	e Provided										
N	lursing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy				
Ir	ntensiveCare		Anesthesia		Obstetrical Recovery	R	tenal Dialysis				
	ediatric/Adol scent		Clinical Lab		Receivery						
	Psychiatric Iursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient urgery				
	Obstetrical Inte/Postprtum		Pharmaceutical		Emergency	X c	entral Plant				
	ntermediate Care		Dietetic		Nuclear Medicine		Support				
s	Skilled Nursing		Administration				Services				

Report Year: 20	017 10681	Mountains Cor	mmunity Hospital		Lake Arrowhead		Page:25 of 29			
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 acute care hospital building per Section 130061(c)(5)										
Building Number:	BLD-03687	Building Nam	ne: Emergency Gener	ator Bld	ı II					
Configuration:	Configuration: Retrofit Conforming building to NPC 4 or NPC 5									
Type of Service	e Provided									
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
In	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab		lossisiy					
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	bstetrical nte/Postprtum		Pharmaceutical		Emergency	X (Central Plant			
	termediate are		Dietetic	П	Nuclear Medicine		Support			
Sk	killed Nursing		Administration				Services			

Report Year: 2017	10681	Mountains Comm	unity Hospital	Lake Arrowhead	Page:26 of 29				
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, SPC-4D and SPC-5 per Section 130061(e)									
Building Number:	BLD-01475	Building Na	me: Radiology/Lab and ER	Addition					
Type of Service Pr	ovided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy				
IntensiveCare	Inpatient Beds	0	Anesthesia						
Pediatric/Adol escent	Inpatient Beds	0	X Clinical Lab	Obstetrical Recovery	Renal Dialysis				
Psychiatric Nursing	Inpatient Beds	0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery				
Obstetrical Ante/Postprtui	Inpatient m Beds	0	Pharmaceutical	X Emergency	Central Plant				
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services				
Skilled Nursing	g Inpatient Beds	0	Administration						
Total Beds this Building	s	0							

eport Year: 2017	10681	Mountains Commu	nity Hospital	Lake Arrowhead	Page:27 of 29
Include information on 4D and SPC-5 per Sec			type of Service provided by	buildings that are classified a	as SPC-2, SPC-3, SPC-4, SPC-
Building Number: BL	D-03687	Building Nar	me: Emergency Generato	r Bldg II	
Type of Service Prov	vided				
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 Year:

2017

10681

Mountains Community Hospital

Lake Arrowhead

Page:28 of 29

Include information on the number of innatient beds by type of unit provided by buildings that are classified as SPC-2_SPC-3_SPC-4_S

4D and SPC-5 per Section 130061(e)									
Building Number:	ilding Number: BLD-01475 Building		Name: Rad	iology/Lab and ER Additio	n				
Medical / Surgical (Include GYN)	A	Acute Respiratory	Care	Acute Psychiatric				
Inpatient 0 Bed	Inpatient Days		npatient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Perinatal (Exclude	Newborn / GYN)	В	Burn		Skilled Nursing				
Inpatient 0 Bed	Inpatient Days		npatient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Pediatric			ntensive Care Ne Iursery	wborn	Intermediate Care				
Inpatient 0 Bed	Inpatient Days		npatient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Intensive Care			Rehabilitation Center		Int. Care / Developr Disabled	nentally			
Inpatient 0 Bed	Inpatient Days		npatient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Coronary Care		С	Chemical Depend	ency	Total Beds this Building Per	Total Beds this Building Per			
Inpatient 0 Bed	Inpatient Days		npatient 0	Inpatient 0 Days	Unit 0	Service 0			

Report Year: 2017 10681 Mountains Community Hospital Lake Arrowhead Page:29 of 29 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, SPC-4D and SPC-5 per Section 130061(e) BLD-03687 Emergency Generator Bldg II **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Days Bed Bed Days Bed Days **Intensive Care Newborn Pediatric Intermediate Care** Nursery Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 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 Days Bed Days Bed ol 0