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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 Year of Report per Section 130061(e)

Facility Number:	11268	
Facility Name:	Fairmont Hospital	
Address:	15400 Foothill Boulevard	
City:	San Leandro	
Hospital Owner/Lice	censee: County of Alameda, General Services Agency	
Year of Rep	eporting: 2017	
Contact 1 e-mail Ad	ddress: [Confidential data left blank intentionally.]	
Contact 2 e-mail Ad	ddress: [Confidential data left blank intentionally.]	
Contact 3 e-mail Ado	ddress:: [Confidential data left blank intentionally.]	
Name of Sub	bmitter: Tom McKimmy	
Submission	on Date: 10/18/2017 11:00:18 AM	

port Ye	ear: 2017 11268	Fairmont Hospital		San Leandro		Page:2 of 16
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)						
lg.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
)- 12	Building H	15400 Foothill Boulevard	Replace	SPC2	01/01/2020	04/01/2019
	DD SB499 Report	Data Last Update: 10/18/2017	Submissio	n Date: 10/18/2017	Printed: 10	D/20/2017 6:30 AM

eport Year: 2017 11268 Fa	irmont Hospital	San Leandro	Page:3 of	16			
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 $130061(c)(1)(E)$.							
uilding No: BLD-01312 Building	jΗ	Retrofit/Replacement Project:	Yes-Submitted]			
acility Project Sub umber Number Num Scope	Date In	Plan Approved Projected Date Start Date	Projected Completion Date Status	CEQA Review			
256 S143017-01 0 Acute Rehab -00	iliation Remodel 12/31/201 4	3/23/2016 04/01/2017 12:00:00 AM	04/01/2019 PEND	No			
HPD FDD SB499 Report Data	Last Update: 10/18/2017 Submi	ssion Date: 10/18/2017	Printed: 10/20/2017 6:30 AI	Л			

Report Year: 2017	11268	Fairmont Hospital	San Leandro	Page:4 of 16	
Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)					
Building Number: BL	D-01312	Building Name:	Building H		
Type of Service Prov	ided				
Nursing	Inpatient Beds	50 Inpatient 6568 Days	Surgical	Obstetrical Recovery	
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby	
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency	
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine	
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	X Rehabilitation Therapy	
Intermediate Care	Inpatient Beds	0 Inpatient Days 0		Renal Dialysis	
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery	
	Doub	Total Beds this 50 Building	Obstetrical Cesarean/Deliv	Central Plant	
OSHPD FDD SB499 Repor	t	Data Last Update: 10/18/2017	Submission Date: 10/18/2017	Printed: 10/20/2017 6:30 AM	

Report Year: 2017 11268 Fair	mont Hospital	San Leandro Page:5 of 16				
Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)						
Building Number: BLD-01312	Building Name: Building H					
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days				
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days				
Pediatric	intensive Care Newborn Nursery	Intermediate Card				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days				
Intensive Care	Rehabilitation Center	Int. Care / development Disabled				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 50 Inpatient 6568 Bed Days	Inpatient 0 Inpatient 0 Bed Days				
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per Unit Service				
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	50 50				
OSHPD FDD SB499 Report Data I	.ast Update: 10/18/2017 Submission Date	e: 10/18/2017 Printed: 10/20/2017 6:30 AM				

Report Year: 201	11268	Fairmont Hospita			San Leandro		Page:6 of 16
For all buildings at the facility, indicate which ones are scheduled for general acute service removal.							
Building Number	Building Nam	ne			Building to be Removed / Replaced	e / Rebuilt	
BLD-01312	Building H			I	Replace		
OSHPD FDD SB499 R	eport	Data Last Update:	10/18/2017	Submission Date	e: 10/18/2017	Printed: 10/20	0/2017 6:30 AM

Report Year:	2017	11268	Fairmont Hospital	San Leandro	Page:7 of 16

No proposed new buildings to be constructed at this or another site.

Report Year: 2017 1	1268 Fairmont Hospital	San Leandro)	Page:8 of 16		
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)(2)(C)						
Building Number: BLD-01	312 Building H	Removal Date:	04/01/2019			
Planned Uses for the buildin	g to be removed from acute care service:	:				
_	Other Jurisdie					
Other Usage:	Office Space					
Inpatient services currently of	delivered in the building:					
Nursing	Surgical	Obstetrical Cesarean/Deliv	X Rehabilitatior	1		
IntensiveCare	Anesthesia					
Pediatric/Adol escent	Clinical Lab	Obstetrical Recovery	Renal Dialysi	S		
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant			
Intermediate Care	Dietetic	Nuclear Medicine	Support Services			
Skilled Nursing	Administration		00111003			
OSHPD FDD SB499 Report	Data Last Update: 10/18/2017	Submission Date: 10/18/2017	Printed: 10/20/	2017 6:30 AM		

Report Year: 2017	11268	Fairmont Hospital	San Leandro	Page:9 of 16			
No data reported for Sectio	No data reported for Section 130061(c)(2)(D).						

Report Year: 2017	11268	Fairmont Hospital	San Leandro	Page:10 of 16		
No data reported for Section 130061(c)(2)(D).						

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 BLD-01312 Building Name: Building H Number: Will general acute care services and beds will be relocated to a new, Existing or retrofitted building? Rehabilitation Relocated to other building Therapy RetroFitted Building Other SPC2-SPC5 Building BLD-01312-Building H BLD-01312-Building BLD-01312-Building New Building RetroFitted Building Other SPC2-SPC5 Building BLD-01312-Building H BLD-01312-Building H BLD-01312-Building H Facility Project Sub BLD-01312-Building H BLD-01312-Building H Facility Project Sub Date In Approved Astart Date Complete Status d Complete Status d 11256 \$143017- 0 Acute Rehabiliation Remodel 2014-12-31 2016-03-23 05/03/2017 04/01/2019 PEND	Report Year: 201	7 1	1268 Fairmont Hospita	al		San Leandro		Page:	11 of 16
Number: Vill general acute care services and beds will be relocated to a new, Existing or retrofitted building? Rehabilitation Therapy Relocated to other building New Building RetroFitted Building Other SPC2-SPC5 Building BLD-01312-Building H Facility Project Sub Num Scope Date In Plan Approved Date 11256 S143017- 0 Acute Rehabiliation Remodel									
Rehabilitation Therapy Relocated to other building New Building RetroFitted Building Other SPC2-SPC5 Building BLD-01312-Building H BLD-01312-Building H Facility Project Number Sub Num Scope Plan Approved Date In Start Date Project Complete Date Start Date 11256 \$143017- 0 Acute Rehabilitation Remodel 2014-12-31 2016-03-23 05/03/2017 04/01/2019 PEND									
Therapy New Building RetroFitted Building Other SPC2-SPC5 Building BLD-01312-Building H BLD-01312-Building H Facility Project Number Number Sub Num Scope Date In Plan Approved Date Start Date Project Complete Status d 11256 S143017- 0 Acute Rehabiliation Remodel 2014-12-31 2016-03-23 05/03/2017 04/01/2019 PEND	Will general acute care services and beds will be relocated to a new, Existing or retrofitted building?								
New Building RetroFitted Building Other SPC2-SPC5 Building BLD-01312-Building H BLD-01312-Building H Facility Project Number Number Sub Num Scope Date In Plan Approved Date Start Date Project Complete Status d 11256 S143017- 0 Acute Rehabiliation Remodel 2014-12-31 2016-03-23 05/03/2017 04/01/2019 PEND		Relo	ocated to other building						
Facility Project Number Sub Num Scope Plan Approved Date Plan Approved Date Start Date Project Complete Status 11256 \$143017- 0 Acute Rehabiliation Remodel 2014-12-31 2016-03-23 05/03/2017 04/01/2019 PEND		ng		RetroFitted Building		Other SP	C2-SPC5 Bu	ilding	
Number Num Scope Date In Approved Date Start Date Complete Status 11256 S143017- 0 Acute Rehabiliation Remodel 2014-12-31 2016-03-23 05/03/2017 04/01/2019 PEND						BLD-01312-Building	g H		
			Scope		Date In	Approved	Start Date	Complete	Status
		0	Acute Rehabiliation Remode	1	2014-12-31	2016-03-23	05/03/2017	04/01/2019	PEND

Report Year: 2017	11268	Fairmont Hospital	San Leandro	Page:12 of 16		
No data reported for Section 130061(c)(3).						

Report Year: 201	7 11268 Fairm	ont Hospital	San Leandro		Page:13 of 16			
Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)								
Building Number: BLD-01312 Building Name: Building H								
Type of Service	e Provided							
		Surgical	Obstetrical Cesarean/Deliv	X Rehabi Therap				
	Nursing	Anesthesia		Renal [Dialysis			
	IntensiveCare	Clinical Lab	Obstetrical Recovery		Jaiysis			
	Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	Outpati Surgery				
	Psychiatric Nursing	Imaging Pharmaceutical	Emergency	Central	Plant			
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Suppor Service	t IS			
	Intermediate Care	Administration						
	Skilled Nursing							
OSHPD FDD SB499 Report Data Last Update: 10/18/2017 Submission Date: 10/18/2017 Printed: 10/20/2017 6:30 AM								

Report Year: 2017 11268	Fairmont Hospital	San Leandro		Page:14 of 16				
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-01312 Building Name: Building H								
Configuration: Replace with	existing SPC3, SPC4, SPC4D or SPC	5 and NPC4 or NPC5 building.						
Type of Service Provided								
Nursing	Surgical	Obstetrical Cesarean/Deliv	X Rehal Thera	pilitation py				
IntensiveCare	Anesthesia	Obstetrical Recovery	Renal	Dialysis				
Pediatric/Adol escent	Clinical Lab	Recovery						
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge					
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centra	al Plant				
Intermediate Care	Dietetic							
Skilled Nursing	Administration	Nuclear Medicine	Supp Servi					
OSHPD FDD SB499 Report	Data Last Update: 10/18/2017	Submission Date: 10/18/2017	Printed: 10/20/2	2017 6:30 AM				

Report Year: 2017	11268	Fairmont Hospital		San Leandro	Page:15 of 16	
No data reported for Section 130061(e)						

Report Year:	2017	11268	Fairmont Hospital	San Leandro	Page:16 of 16		
No data reported for Section 130061(e) .							