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MAYERS MEMORIAL HOSPITAL (Fac ID# 11000)

Masterplan 2023

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Aspen Street Architects, Inc.
Job Number 98013.08



Aspen Street
ARCHITECTS

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1.0 Purpose

Aspen Street Architects was contracted by the Mayers Memorial Healthcare District to provide an updated Master Plan. Scope included assessing District needs as well as the existing condition of building and infrastructure assets, in the development of a comprehensive master plan.

The need for the Master Plan is to document facility planning decisions to meet the District’s healthcare needs for the next 30 years. Priority is given to the obligation to comply with the seismic safety regulations and standards of SB-1953 (the Alfred E. Alquist Hospital Facilities Seismic Safety Act of 1983 and associated related regulations), and obtaining compliance by the deadline of January 1, 2030. Priority is also given to creating a comprehensive plan that allows for phased implementation to meet these standards, while also allowing for the District to continue to provide services during renovations and/or replacements.

The Master Plan development task was divided into two paths of work. The first being the programming meetings and reviews of District needs and site reuse/new build options, and the second being the facility condition assessments. These tasks were completed concurrently whereas each supported the other.

The programming meetings established input from administration, departmental managers, and the Board. This produced the “program” that drove the final masterplan concept. High level site concepts were reviewed, and the eventual option was selected for further development. At the same time, the design team reviewed existing building and site conditions, as well as review of as-built information and available documents, to assess and advise on asset reuse capabilities. This informed the decisions made on the site options presented to administration, staff and the Board.

The Master Plan that follows is the product of this process. The selected site option, phasing and budgetary information is a tool that documents the decisions made and a guide for implementation. This should be reviewed and updated on a regular basis as decided by the District as projects are completed, regulations are updated, and District needs evolve.



2.0 Campus Overview

The buildings the District currently owns/operates are listed below. These encompass both the Fall River and Burney campuses, as well as off-site buildings as noted.

<i>Building name</i>	<i>Building number</i>	<i>OSHPD BLD number</i>	<i>classification</i>	<i>year built</i>	<i>location</i>	<i>notes - reference plan sets</i>
Original Hospital	1	BLD-02327	OSHPD-1	1972/1987	Fall River	Addition to the Original Hospital building, ICU & PT Addition
Long Term Beds Addition	2	BLD-02328	OSHPD-1	1976/1981/ 1987/1993	Fall River	Addition (Middle Wing), Kitchen & Patient Room Addition, ICU & PT Addition, New Cold Box (Freezer)
Surgery/O.B. Addition	3	BLD-02329	OSHPD-1	1981	Fall River	Addition for Surgery
Pharmacy and 12 Bed Addition	4	BLD-02332	OSHPD-1	1983	Fall River	Pharmacy & 12 Bed Addition HS830003-45
Emergency Department Expansion	9	BLD-05334	OSHPD-1	2020	Fall River	Expansion H163250-45-00, includes generator yard, medgas storage yard
Connector	9A	BLD-06253	OSHPD-1	2020	Fall River	Expansion H163250-45-00, connecting corridor
Drop-Off Canopy	9B	BLD-06254	OSHPD-1	2020	Fall River	Expansion H163250-45-00
Water Tank	11	BLD-06969	OSHPD-1	2020	Fall River	Expansion H163250-45-00
Water Tank Pump Enclosure	11A	BLD-06970	OSHPD-1	ongoing	Fall River	Water Tank Pump Installation S201291-45-00
Oxygen Storage Yard	n/a	n/a	OSHPD-1		Fall River	serves older hospital buildings, not Emergency Department Expansion
Vacuum Pump Shed	n/a	n/a			Fall River	serves older hospital buildings, not Emergency Department Expansion
Administrative Building	n/a	n/a	non-OSHPD, local jurisdiction		Fall River	
Ambulance Building	n/a	n/a	non-OSHPD, local jurisdiction		Fall River	
Clinic Building	n/a	n/a	non-OSHPD, local jurisdiction		Fall River	currently housing Finance and PT
Physician Sleep House	n/a	n/a	non-OSHPD, local jurisdiction		Fall River	
Maintenance & Engineering/IT Office Building	n/a	n/a	non-OSHPD, local jurisdiction		Fall River	
Metal Storage Building	n/a	n/a	non-OSHPD, local jurisdiction		Fall River	
Retail Pharmacy (off-site)	n/a	n/a	non-OSHPD, local jurisdiction		Fall River	
Thrift Shop and Storage Building (off-site)	n/a	n/a	non-OSHPD, local jurisdiction		Fall River	
Lodge & Site (off-site)	n/a	n/a	non-OSHPD, local jurisdiction		Fall River	
Skilled Nursing Building Burney Campus	10	BLD-05268	OSHPD-2	1994	Burney	New Burney Annex SS912786-45
Rural Health Clinic	n/a	n/a	OSHPD-3	1981	Burney	2021 Remodel
Laundry Facility (off-site)	n/a	n/a	non-OSHPD, local jurisdiction		Burney	2021 Remodel after fire

2.1 The Fall River Campus

The Fall River Campus (Facility ID#11000) is comprised of a series of buildings/additions that make up the main hospital building, as well as supporting non-attached buildings. The hospital buildings themselves are all OSHPD-1 buildings and under the jurisdiction of HCAI (the California Department of Health Care Access and Information, formerly OSHPD) for permitting and construction. The hospital campus is at 43563 CA-299, Fall River Mills, CA 96028. This is on the east side of Highway 299, between the highway and a bluff overlooking the Pit River to the east, on an 11.2 acre parcel. The District also owns the adjacent 1.5 acre parcel to the south which is vacant.

Original Hospital Building

The *Original Hospital Building* was built in 1953 and had additions, the latest in 1972 and 1987. The oldest portions of this building were demolished recently, after the addition of the new *Emergency Department Expansion*. The 1972 and 1987 Additions remain (building 1, or BLD-02327), and currently house the Acute Wing (Med-Surg Nursing Unit, and what was built as the ICU Addition, but is now housing OPM – Outpatient Medical). This is the only remaining SPC-2 building, and as such is only capable of housing acute-care services until January 1, 2030 under current state law.

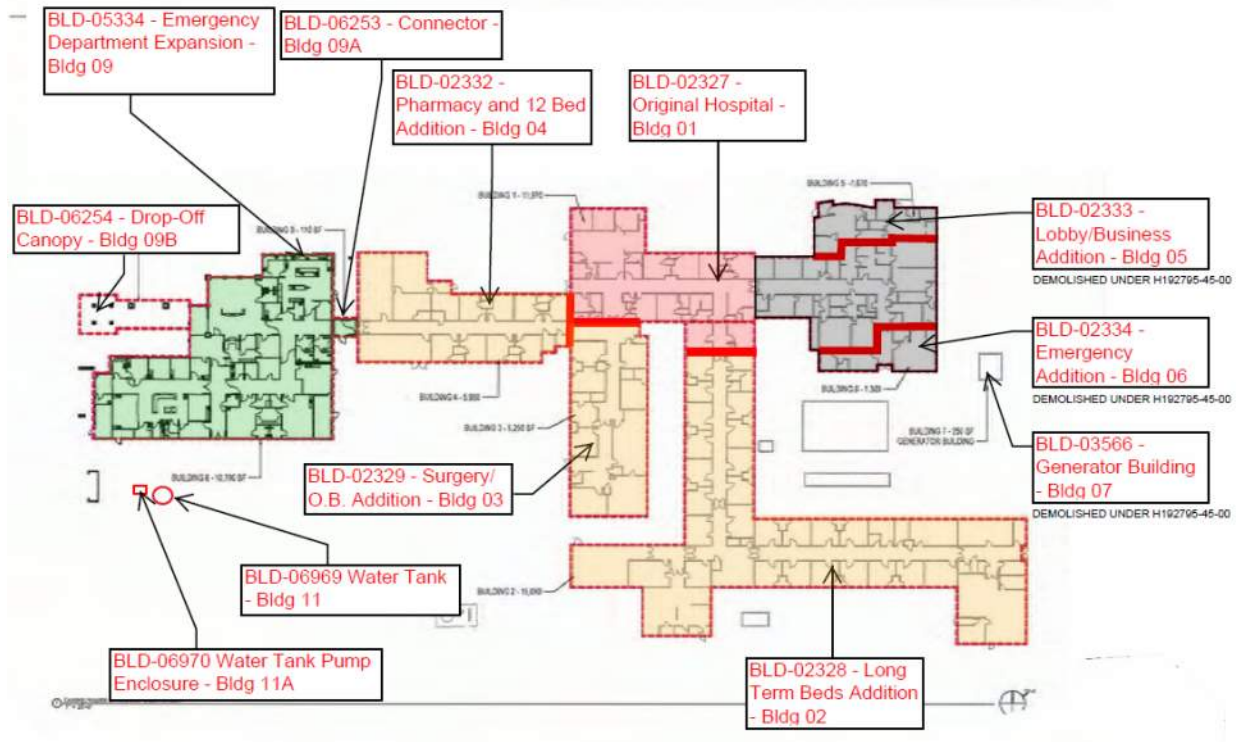
1970-80's Additions

In 1976 the Middle Wing was added off of the original building, and in 1981 a series of other additions were built, the Kitchen and Patient Room Addition, as well as the Surgery & OB Addition. The Middle Wing, Kitchen and Patient Room make up structurally one single building (*Long Term Beds Addition*, Building 2, or BLD-02328), while the *Surgery & OB Addition* encompasses another structural separate building (Building 3, or BLD-02329). Then in 1983 another addition was built, the *Pharmacy and 12 Bed Addition* (Building 4, or BLD-02332). Lastly, in 1987 an Addition was added to the end of the *Long Term Bed Addition* to house a Board Room and PT (Currently Cardiac Rehabilitation), and in 1993 a Cold Box (Freezer) was added off the Kitchen. The *Long Term Beds Addition* houses licensed SNF beds, as well as Dietary and Cardiac Rehabilitation. The *Surgery/OB Addition* houses Surgical Services and Sterile Storage and Processing, as well as supporting services such as Respiratory Therapy. The *Pharmacy and 12 Bed Addition* houses Materials Management, Medical Records, the Pharmacy, and licensed SNF beds that are not in use. These 3 OSHPD-1 buildings are all SPC-4 as far as structural performance category and are capable of maintaining acute-care services past 2030, if the NPC ratings are elevated. The campus buildings with the exception of the 2020 and newer structures are all NPC-2 as far as non-structural performance category.

Related to these older buildings – there are a few auxiliary structures – such as the older Oxygen Yard and the *Vacuum Pump Shed*. These are not identified as OSHPD buildings, but supply utilities to the hospital buildings. Their installation dates are unknown.

New Expansion Hospital Buildings

Then, most recently, in 2020, an *Emergency Department Addition* (Building 9, or BLD-05334) was built attached to the end of the Pharmacy and 12 Bed Addition, with a *Connector Building* (Building 9A, or BLD-06253), and a *Drop-Off Canopy* (Building 9B, or BLD-06254). At this time the Water Tank (Building 11, or BLD-06969) was installed, along with a Helipad, a Generator Yard, and a Med Gas Storage Enclosure. Currently a *Water Tank Pump Enclosure* (Building 11A, or BLD-06970) is in construction. All of these buildings are SPC-5s, and NPC-4s.



OSHPD Building Site Plan 2023 (buildings in black has been demolished under HCAI project)

Non-OSHPD Buildings

There are other buildings and structures on the campus that are not OSHPD buildings, and as such are not under HCAI jurisdiction and do not have SPC/NPC ratings. These include the following:

Administrative Building – this building was built in 1978 as a “medical building”, had an addition added in 1994, and was most recently used as a clinic until it was remodeled into the current administrative offices recently (late 2010s). It is single-story, wood framed, approximately 1,860 square feet. Besides Administration, this building also houses Finance, Human Relations, and Public Relations.

Ambulance Building – this is a 2-story building adjacent to the original hospital building that houses the contracted ambulance service, with 2 vehicle garage space, and sleeping rooms above. It also contains storage of hospital records. It has approximately 1,200 square feet on the lower level.

Clinic Building – this was built in 1986 as a Medical Office Building. It is a single story, wood framed structure that currently houses Physical Therapy and the Business Offices. This building is in the NE corner of the site backing up against the bluff overlooking the Pit River, and is approximately 3,120 square feet.

Physician Sleep House – this is a single-story residential style wood framed building at the rear of the hospital on the building overlooking the Pit River. It is approximately 2,000 square feet and contains 6 sleeping rooms with shared kitchen and living spaces. There are two garage structures in front, one open, and one closed and being used for miscellaneous uses, including a small gym.

Maintenance & Engineering Building – this is a two-story building at the backside of the campus backing up to the bluff overlooking the Pit River. Maintenance and Engineering occupy the lower level, with IT on the upper level. Each floor is approximately 1,200 square feet.

Metal Storage Building – on the north side of the campus, along the property line, there is a metal warehouse building used for storage. It is approximately 1,300 square feet. There is no heating/cooling or electrical to this building. It is on a concrete foundation built into the parking lot.

Off-site Buildings

Retail Pharmacy Building – the District operates a Retail Pharmacy in a separate stand-alone building to the south of the hospital campus at 543471 CA-299 in Fall River Mills. This is a single-story building, approximately 1,600 square feet and was recently acquired by the District. It has a small commercial retail section operated by the Foundation along with the pharmaceuticals.

Thrift Store and Storage Building – these buildings are across Highway 299 and slightly south from the hospital campus on two separate parcels next to each other, at 43504 CA-299 and 43514 CA-299 respectively. The Thrift Store is a residential style single-floor wood framed structure approximately 1,400 square feet. And the Storage Building, or *Arts Building* as it's also called, is single-story commercial front with open warehouse storage rear, approximately 3,800 square feet.

Lodge and Site – the District has recently purchased a historic lodge building, along with its site and accompanying out buildings. This is at 24500 Pit One Powerhouse Rd., in Fall River Mills. This occupies approximately 44.5 acres to the south of downtown Fall River Mills off Highway 299 alongside a PGE powerhouse/hydroelectric plant and very close to the Pit River. The lodge was built in the 1920's by the power company and previously used for employees. The District now utilizes the lodge and surrounding buildings for traveling staff and temporary housing for new staff waiting on permanent housing in the area. The lodge is designed in the craftsman style by Julia Morgan (of Hearst Castle fame).

The Lodge contains a lobby/receptions area, living spaces, a commercial kitchen, and 7 resident rooms with their own toilet/shower rooms on the main level, along with an open bunk area on the 2nd floor (not accessible, no elevator). There is a large porch in the front that extends the length of the building overlooking the grounds. The building is wood-framed, non-rated without sprinklers. The main level is approximately 5,000 square feet.

Adjacent to the Lodge is a smaller lodge building, the *Sycamore Lodge*, which contains 6 resident rooms.

Additional cottages are on the property:

Dogwood Duplex – two 2-bed/1-bath units

Aspen House – 3-bed/2-bath unit

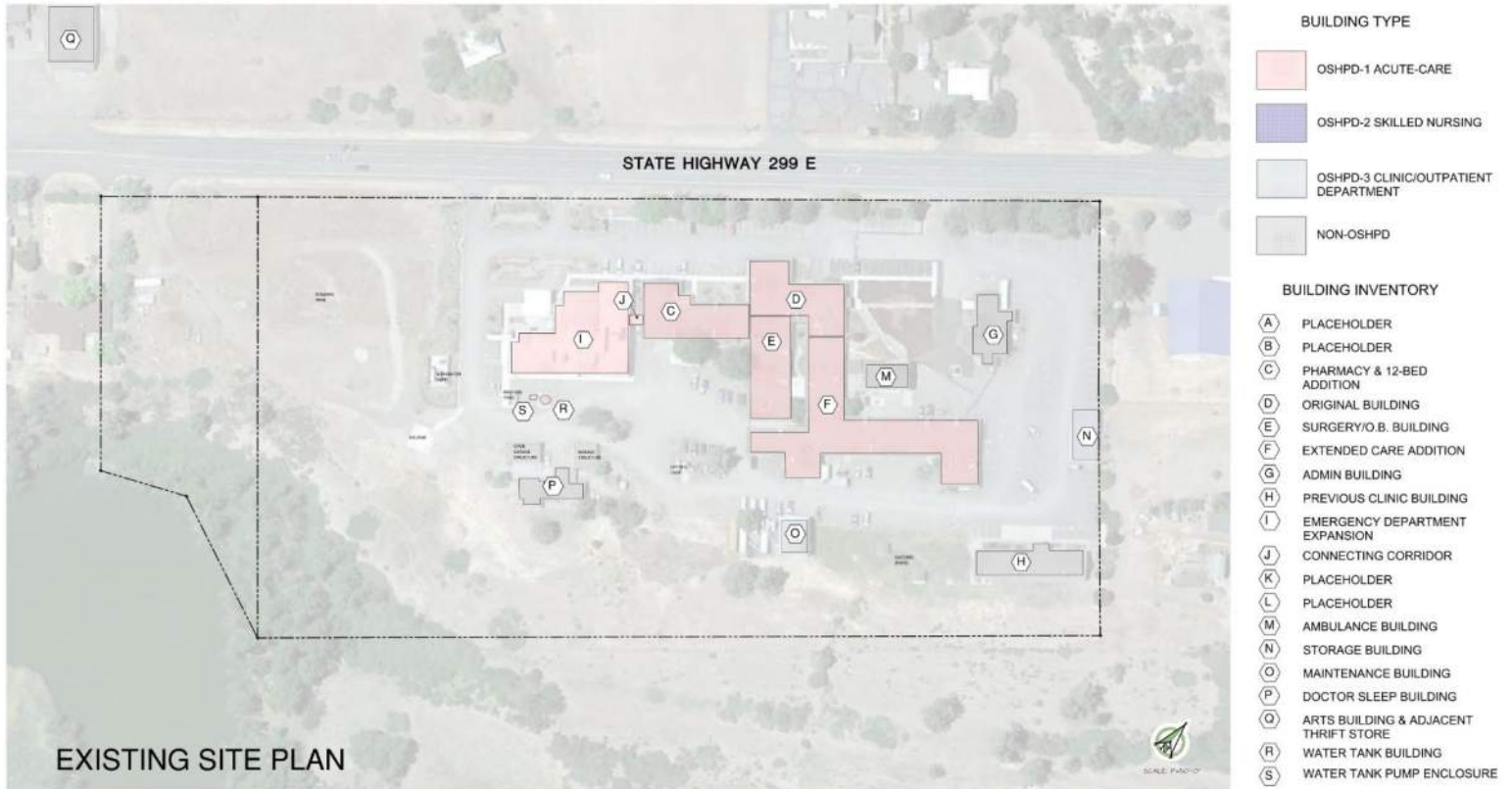
Buckeye House – mirror image of Aspen House, 3-bed/2-bath unit. There is a garage with between Aspen and Buckeye with one space for each house.

Oak House – 3-bed/2-bath unit

There is also a single Recreational Vehicle hook up spot behind the Duplex.

Laundry/Storage Building – this is a small building behind the Lodge that was previously the fly shop under previous ownership. It is being used for storage only at this time.

Shop/Maintenance Building – a large open warehouse shop is located on the property. This building is being used for storage, and currently the District is building out enclosed storage rooms for different departments to utilize. This is approximately 3,600 square feet.



Existing Fall River Site Plan (larger image in appendices)

2.2 The Burney Campus

The Burney Campus (part of Facility ID#11000) is located about 20 miles to the south of the main Fall River Hospital campus and houses a Skilled Nursing Facility (SNF) and Rural Health Clinic (RHC). It is approximately 10 acres across 3 parcels off Commerce Way in Burney. The site is adjacent to the Post Office Building and in the vicinity of other medical and dental facilities. Besides the buildings noted, it is a heavily wooded site, that has a paved fire loop road, and borders along Highway 299 on the north side of downtown Burney.

Skilled Nursing Building

The *Skilled Nursing Building* is an OSHPD-2 building built in 1994. It was built on to the existing clinic building at the time and called the Burney Annex (BLD-05268). This is a single-story type V-A (wood framed, one hour construction), sprinklered building, approximately 29,600 square feet. This building houses 50 of the District’s 99 licensed SNF beds. It has a full kitchen to support the SNF operations, as well as a covered canopy for ambulance access on the side.

Rural Health Clinic

The *Rural Health Clinic* was built in 1981, and underwent remodels in 1993 and 2021, and is currently licensed as OSHPD-3 (Clinic). It is single-story, type V-B (wood framed, non-rated) with a 2-hour separation between it and the adjacent SNF building. It is approximately 3,200 square feet. This building houses the RHC, comprised of 8 exam rooms and a procedure room. The RHC offices extend into the adjacent SNF building.

Off-site Buildings

Laundry Facility – the District operates a laundry facility in a single-story type V-B (wood framed, non-rated) building two parcels to the east of the RHC and SNF. This is 1,865 square feet and was recently remodeled after a fire in 2020. This contains industrial sized washer and dryers that the District uses to handle in-house laundry.



Existing Burney Site Plan (larger image in appendices)

3.0 SB-1953 Compliance

As a licensed acute-care hospital in the state of California, Mayers Memorial Healthcare District is subject to the requirements of the Alfred E Alquist Hospital Facilities Seismic Safety Act (SB-1953). As such, all facilities housing acute-care services are required to be upgraded to certain seismic standards by January 1, 2030, or have the acute-care services removed from these buildings prior to then.

The standards are separated into two categories, SPC (structural performance category) and NPC (non-structural performance category). Buildings must have an SPC rating of 3, 4, 4D or 5, and an NPC rating of 5 to meet this.

Structural Performance Category (SPC)

As far as SPC ratings are concerned, Mayers Memorial only has one building that is non-compliant, the *Original Hospital Building*, which is SPC-2. SPC is related to the primary structural systems (lateral and gravity systems of the building), or as better explained, as the “bones” of the building. The *Original Hospital Building* currently houses the nursing wing (Med-Surg department) which is a required service of the acute-care hospital. The path forward for this building is varied, either upgrade to seismic compliance, or remove acute-care services and reuse for alternate services or demolish. Due to the original construction date and codes built under, the only upgrade option available is a structural upgrade to SPC-4D. This would require an analysis to first determine eligibility for the SPC-4D upgrade, and if determined a possibility, then would most likely require a material testing and condition assessment program (MTCAP). MTCAP’s require review and approval by HCAI, prior to the actual testing by qualified testing contractors. The findings of the program, the material testing and condition assessment report (MTCAR) would then be utilized by a structural engineer in the design of structural upgrades/strengthening work that would be part of an HCAI permitted project. It is likely that the upgrades would be highly disruptive to ongoing use of the space for continued Acute Care services. Upgrades may entail such things as introduction of added shear walls in the interior and/or exterior of the building, added straps/ties of roof framing to walls, and added connections of walls to footings. All of this would have to be determined by an engineered analysis.

The deadline for compliance with SPC standards is January 1, 2030. There are no intermediary deadlines. Although the process to complete the above series of events would take 4-6 years depending on access and availability of the building/spaces for review, testing and eventual construction.



Non-structural Performance Category (NPC)

As far as NPC ratings are concerned, the campus is NPC-2. NPC is related to the equipment and systems within the buildings, such as medical equipment and mechanical/electrical/plumbing systems. These “non-structural components” are required to be seismically braced, ideally to continue to serve their function in the event of a major earthquake.

Hospital campuses housing OSHPD-1 buildings are required to be NPC-5 by January 1, 2030, and there are intermediary milestones required for compliance. The Fall River campus would be required to ascend through the NPC steps to reach NPC-5 ultimately prior to 2030.

NPC-3 – this is the bracing of equipment and systems (non-structural components as outlined in the 1995 CBC) within critical care areas, as well as Radiology, Imaging, Pharmaceutical Departments, and Central and Sterile Supply.

NPC-4 – this is the bracing of all non-structural components in the rest of the hospital buildings.

NPC-4D (option to NPC-4) – this has 3 level options, with Level 1 being no further required areas than NPC-3, but the inclusion of an Operational Plan that outlines how the facility will repair nonstructural damage and bring systems and services back online, or provide them in an alternative manner to accommodate continuation of critical care operations. Level 2 includes the option to braces utilities from the NPC-3 areas to their source or origin so that the NPC-3 areas would be supported, and Level 3 includes any other services determined by the facility to be added to the NPC-3 areas, so that they remain functional and available after a seismic event.

NPC-5 – this requires onsite supplies of water and holding tanks for sewage and liquid waste, sufficient to support 72 hours emergency operations, and integrated to the building plumbing systems. Also, the emergency onsite electrical system (standby generator) is provided to critical care areas, as well as radiology, and an onsite fuel supply for 72 hours of acute care operation is provided.

The newer OSHPD-1 buildings were built to NPC-4 standards, and NPC-5 requirements added for the ED Addition capacity. If any of the older buildings are to be reutilized for acute-care services (remain OSHPD-1) in the Master Plan, they would require upgrades to NPC-3 (for any critical care) areas within them, NPC-4D Level 1 at a minimum, and the campus would require an evaluation of the NPC-5 storage capacities for water, waste, fuel for the entire acute-care services/buildings, and provide upgrades as needed.

Below is the HCAI/OSHPD Building Matrix, with associated SB-1953 Ratings (SPC/NPC). The Skilled Nursing Facility and Clinic Building in Burney are exempt from these requirements, since they are OSHPD-2 and -3 respectively.

HCAI BLD Number	Bldg Number	Bldg Name	Classification & Status	Governing Building Code	Year Built	SPC Existing	NPC Existing
BLD-02327	1	Original Hospital	OSHPD 1 In Service	1949 UBC	1973	2	2
BLD-02328	2	Long Term Beds Addition	OSHPD 1 In Service	1973 CBC	1980	4	2
BLD-02329	3	Surgery/O.B. Addition	OSHPD 1 In Service	1979 CBC	1996	4	2
BLD-02332	4	Pharmacy and 12 Bed Addition	OSHPD 1 In Service	1979 CBC	1997	4	2
BLD-05334	9	Emergency Department Expansion	OSHPD 1 In Service	2013 CBC	2008	5	5
BLD-06253	9A	Connector	OSHPD 1 In Service	2013 CBC	2013	5	5
BLD-06254	9B	Drop-Off Canopy	OSHPD 1 In Service	2013 CBC	2013	5	5
BLD-06969	11	Water Tank	OSHPD 1 In Service	2013 CBC	2013	n/a	4s
BLD-06970	11A	Water Tank Pump Enclosure	OSHPD 1 In Service	2019 CBC	2023	n/a	5
BLD-05268		Skilled Nursing Building - Burney Campus	OSHPD 2, Skilled Nursing Only	1992 CBC	1994	n/a	n/a

4.0 Current Service Lines & Locations

Below is a current list of services and where the services are provided within the campus buildings. These are broken down by the California Building Code, section 1224 for Acute-Care Hospitals, in to Basic and Supplemental Services, as well as Other.

List of Services	Existing Building Location - 2023	
	HCAI Building #	Building Name
Basic Services		
Med/Surgical Units	BLD-02327	Original Hospital
Surgical Services	BLD-02329	Surgery/O.B. Addition
Anesthesia/Recovery	BLD-02329	Surgery/O.B. Addition
Clinical Laboratory	BLD-05334	Emergency Department Expansion
Radiological	BLD-05334	Emergency Department Expansion
Pharmaceutical	BLD-02332	Pharmacy and 12 Bed Addition
Dietetic	BLD-02328	Long Term Beds Addition
Support Services		
Storage	BLD-02332	Pharmacy and 12 Bed Addition
Morgue	n/a, less than 50 beds	n/a, less than 50 beds
Administrative Space	BLD-02327	Original Hospital & Admin Building
Central Sterile Supply	BLD-02329	Surgery/O.B. Addition
Employee Dressing Rooms & Lockers	BLD-05334	Emergency Department Expansion
Laundry/Clean & Soiled Linen Holding	BLD-02328	Long Term Beds Addition
Supplemental Services	HCAI Building #	Building Name
Emergency - Standby	BLD-05334	Emergency Department Expansion
Intensive/Critical Care	n/a	n/a
Perinatal Services	n/a	n/a
Therapy Services/Cardiac Rehabilitation	BLD-02328	Long Term Beds Addition
Dialysis	n/a	n/a
Outpatient Services		
IV Infusion	BLD-02327	Original Hospital
Phlebotomy	BLD-05334	Emergency Department Expansion
Rural Health Center		OSHPD-3 Building in Burney
Surgery	BLD-02329	Surgery/O.B. Addition
Wound Care	BLD-02327	Original Hospital
Others:	HCAI Building #	Building Name
Physical Therapy		Clinic Building on FR Campus
Skilled Nursing Care Services	BLD-02328 & BLD-05268	Long Term Beds Addition & Skilled Nursing Building Burney Campus
Respiratory Care Services	BLD-02329	Surgery/O.B. Addition

5.0 Proposed Masterplan Program/Goals

Through the masterplan process, as a result of the multiple meetings with the administrative team, and with input from the individual departments, the following were the overarching masterplan program goals for each service line:

List of Services	Masterplan Program
Basic Services (code req'd)	
Med/Surgical Units	currently 16 licensed general acute care beds. Goal is 5 private, 5 semi-private, for 10 beds but surge to 15 if needed
Surgical Services	ASC in Burney, 1 OR/1 procedure
Anesthesia/Recovery	ASC in Burney, 6 open bay pre/post op room
Clinical Laboratory	as is - currently in recently constructed OSHPD-1 building
Radiological	add small suite - mammo, ultra, dexa. Hook up for MRI trailer by ED
Pharmaceutical	expanded space - with private office and increased storage
Dietetic	new kitchen/dining - w/ public dining option in FR. New kitchen in Burney
Support Services	
Storage	expanded space needed, receiving, loading dock
Administrative Space	need space/presence in hospital, rest can stay in Admin building
Central Sterile Supply	ASC in Burney
Employee Dressing Rooms & Lockers	as is - currently in recently constructed OSHPD-1 building
Laundry	out of house. Minor residential for SNF. Holding rooms only in hospital
Supplemental Services (in code)	
Emergency - Standby	as is - currently in recently constructed OSHPD-1 building
Intensive/Critical Care	n/a
Perinatal Services	n/a
Therapy Services/Cardiac Rehabilitation	co-locate with PT, more public facing
Outpatient Services	
IV Infusion	stay w/ OPM, relocate to clinic space in Burney
Phlebotomy	as is - currently in recently constructed OSHPD-1 building (Lab)
Rural Health Center	outgrown space in Burney, relocate to new building in Burney. Provide presence in Fall River also
Surgery	ASC in Burney
Wound Care	w/ OPM, relocate to clinic space in Burney
Others: (licensed services)	
Physical Therapy	co-locate with Cardiac Rehab, more public facing
Skilled Nursing Care Services	TBD. Initial option to add addition in Burney (to at minimum recoup the 12-beds at Fall River that are not being used. Long term options discussed, include relocating all memory care to FR (19 - all single), expand Burney with remainder of licensed beds (80, addition of 30 beds)
Respiratory Care Services	workspace by ED/Acute, also within Cardiac/PT for SNF use
Others Departments	
Hospice	office space in town, public access - 2 offices, workroom 5 desk, conference room
Admitting	as is - currently in recently constructed OSHPD-1 building
Business	relocate to clinic building to be with Finance
Finance	co-locate with Business
HR	co-locate with Business and Finance
Purchasing	locate with storage/receiving - larger space needs, with loading dock
Environmental Services	needs - better organized storage, break room
Information Technology (IT)	if new building added, include IDF. Locate offices with admin
Maintenance	existing location ok, need outdoor storage
Activities	space in SNF
Lodge	potential accessibility upgrades
Public Relations	in Admin Building ok, need office space in Burney
Foundation	1 office, 1 workroom - location? Utilizes Board room

6.0 Site Concept Development

A few overarching decisions are the basis of the initial direction of the master plan.

- Decision was made to relocate Surgical Services to Burney, where the majority of the district population resided, and do that in an outpatient setting, since the vast majority of surgeries provided have been and will be outpatient.
- Decision was made that the existing Med-Surg Unit has major deficiencies being that it is a thoroughfare for traffic within the hospital connecting the two sides (not a distinct enclosed unit), and that it is too far from the ED for staff efficiencies.
- Decision was made that the Kitchen/Dietary was deficient and needed to be replaced.
- Decision was made that the *Extended Care Addition* would be best suited to be converted to a SNF (OSHPD-2) building to alleviate the current OSHPD-1 requirements when upgrading/remodeling.
- Decision was made that there is value in the older building on campus and reuse would be advised, whether as acute or supporting/outpatient (OSHPD-3 or -1R) status.

6.1 Fall River Narrative and Notes

The thoughts on the reuse of the other acute-care buildings, beyond the *Extended Care Addition*, were that the *12-Bed/Pharmacy Addition* and the *Surgery/O.B. Addition* are currently SPC-4 buildings, which are seismically good or compliant. These would only require the NPC upgrades, which would be a by-product of any major remodel needed for change of use. Each of these buildings was evaluated as far as housing acute-care services, such as Dietary (for the kitchen relocation), as well as other services such as Pharmacy (to be expanded) and the Med-Surg – Acute Unit (to be relocated for privacy). The *Original Hospital Building*, since it is SPC-2 and would require an extensive and disruptive structural upgrade to SPC-4D in order to maintain OSHPD-1/acute-care status was determined cost prohibitive, and the focus was on non-acute functions for this building.

Initial site concepts centered on possible re-use of the *12-Bed/Pharmacy Addition* and the *Surgery/O.B. Addition* for acute services, and if needed, a minimal sized new building for required acute-care services that need to be relocated.

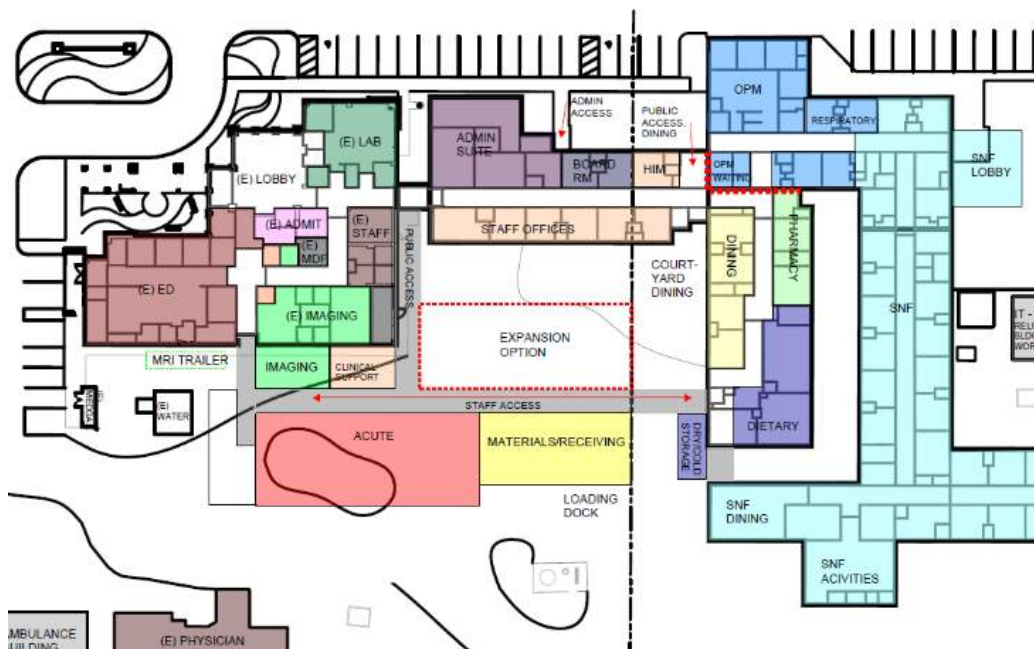


Figure 1 illustrates Option A, a departmental massing with a minimal footprint new building to house the Acute Unit and Materials Storage/Receiving area, with Dietary moving to the *Surgery/O.B. Building*.

Figure 1 - Initial Option A

Figure 2 illustrates Option B, the option to relocate the Acute Wing to the Surgery/O.B. Addition and Dietary to the 12-Bed/Pharmacy Addition. A challenge with this concept is circulation through the central building, so a staff corridor was added on the outside of the 12-Bed/ Pharmacy Addition to separate public and staff use.

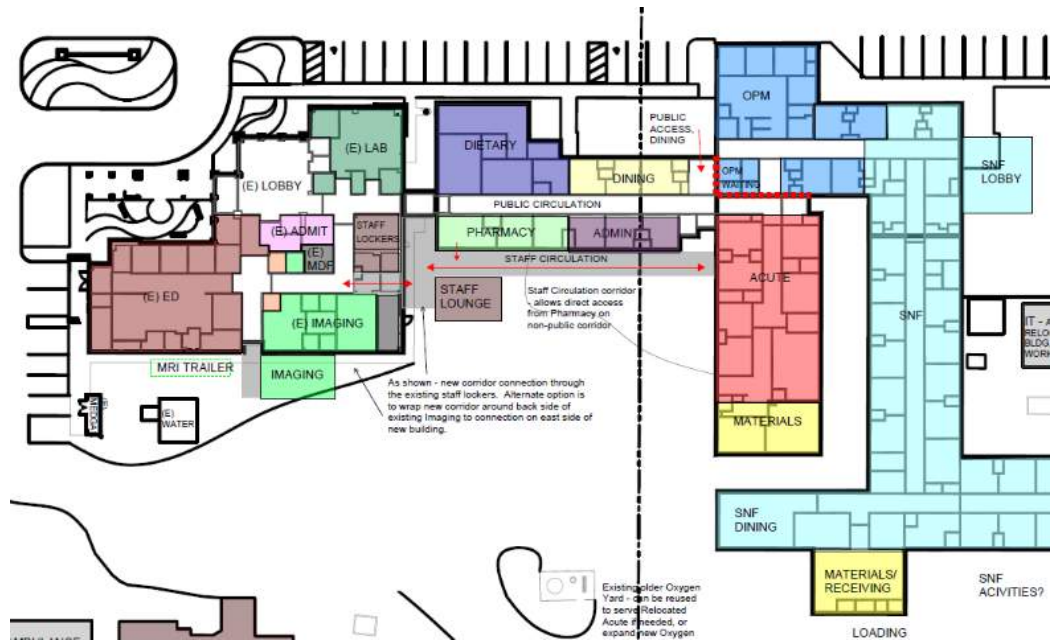
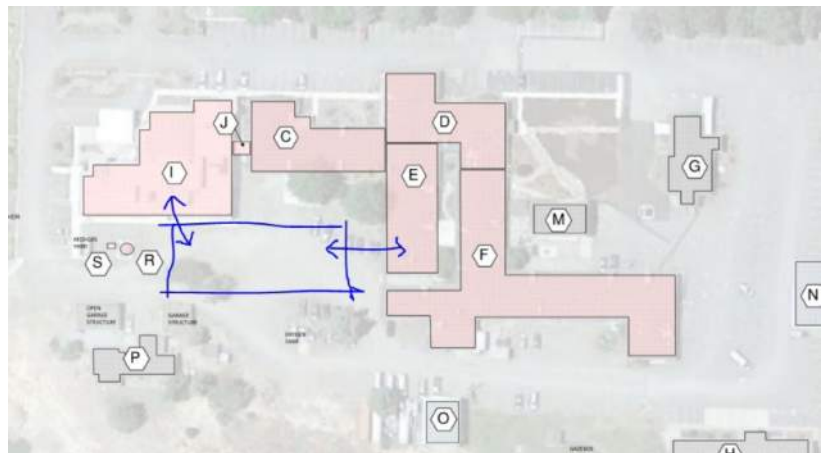


Figure 2 - Initial Option B

The Option A approach was determined more favorable, due to the Acute Unit’s proximity to the existing ED in a new building.

In the end the Surgery Building, being central to the campus, with simpler connections to both the new acute-care building, the skilled nursing, and the existing hospital buildings, was determined ideal for relocation of Dietary to it. Other factors, such as the large overhead space for ease of installation of new systems and HVAC, were important in this decision.

The decision to relocate the Acute Unit to a new building connected to the Emergency Department Addition, and tied back to the relocated Dietary in the previous Surgery/O.B. Addition building was a concept that has materialized in previous planning studies, such as the one produced by NM&R (Jan 1, 2021 masterplan presentation). The new acute-care building would be minimal square footage necessary to house acute-care services only, due to the high cost of new OSHPD-1 construction. It would also allow for future growth/expansion.



In this option, further refinement had a goal to reclassify the 12 Bed/Pharmacy Addition and Original Hospital Building to OSHPD-3 or -1R. OSHPD-3 being selected to alleviate complications with OSHPD permitting on future projects/remodels. OSHPD-3 buildings can house outpatient services of the hospital, but fall under the local jurisdiction for plan review/permitting of any changes.

Refined concepts from here looked at the composition of the proposed New Acute Building Addition, and the disposition of the existing building spaces to accommodate the program developed by staff and administration.

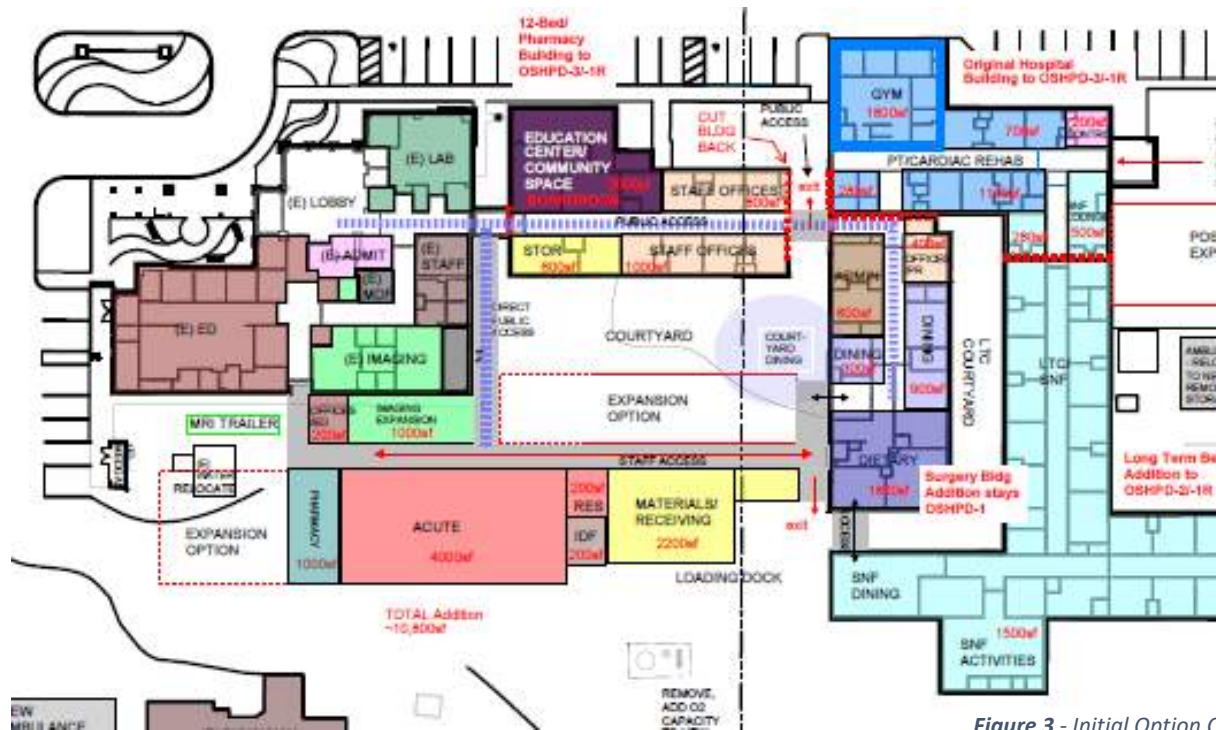


Figure 3 - Initial Option C

The new acute addition options considered spaces for increased Imaging capabilities (mammo, ultra-sound, dexascan bne density), the larger Pharmacy space and Materials/ Receiving. These are all services that are required to be in OSHPD-1 space, and with the reclassification of the 12-Bed/Pharmacy Addition to a non-OSHPD-1 building type required Pharmacy and Materials Storage to move.

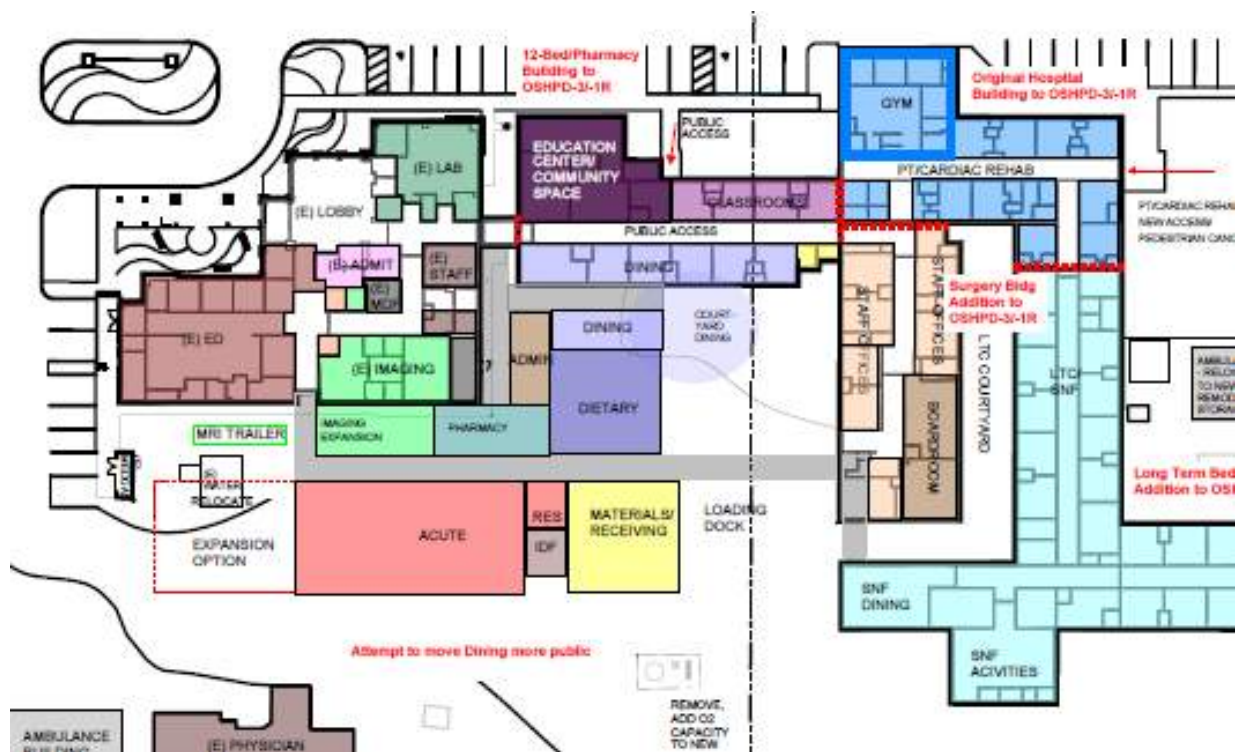


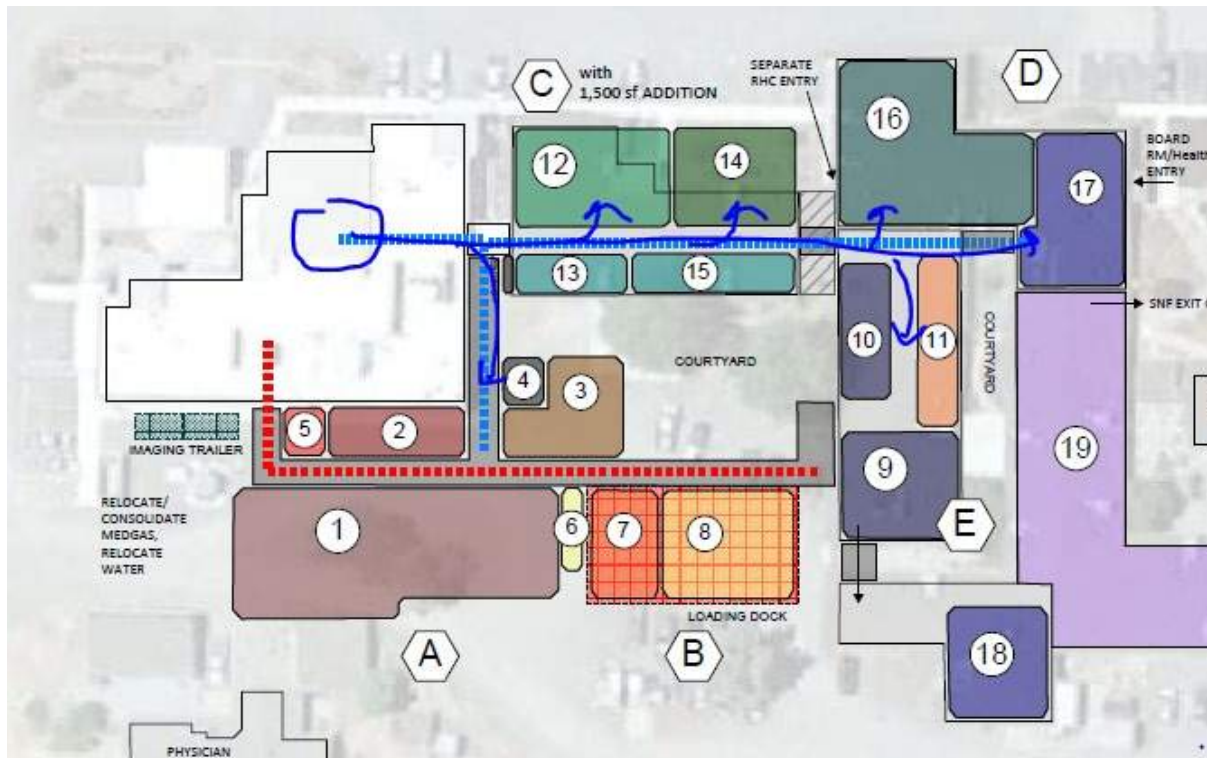
Figure 4 - Initial Option D

Concepts for Dietary final location were considered beyond locating within the *Surgery/O.B. Addition*. Such as part of the *New Acute Building Addition*. These resulted in higher construction costs due to added square footage.

The non-acute program uses included co-location of Physical Therapy (PT) and Cardiac Rehab (Cardio), and discussion of potential wellness center for public and staff use. The *12-Bed/Pharmacy Addition*, with conversion to OSHPD-3 expected, would create a public face for these departments from the main road, with direct access options. The idea of a small addition to this building, squaring off the front, would give an option to add ceiling height in this area for benefit of a gym related to the PT use.

Also, a relocation of the the Board Room and provision of an Education Center, was selected to be provided with the *Original Hospital Building*, after conversion to non-acute and OSHPD-3. This could also have a direct public access option, with the possibility of improvements to the exterior to highlight the entrance and tie materials in to the new *Emergency Department Addition* palette. The rest of this converted building would be used for the RHC presence in Fall River. And as required, the RHC would utilize the existing exterior door access the space has now, along with its own required waiting and support spaces.

This adaptive reuse of the older buildings allowed for a natural public spine connecting all to the main lobby in the *Emergency Department Addition* building, with spurs to various access points into adjacent departments (such as Dietary and the Acute Wing).



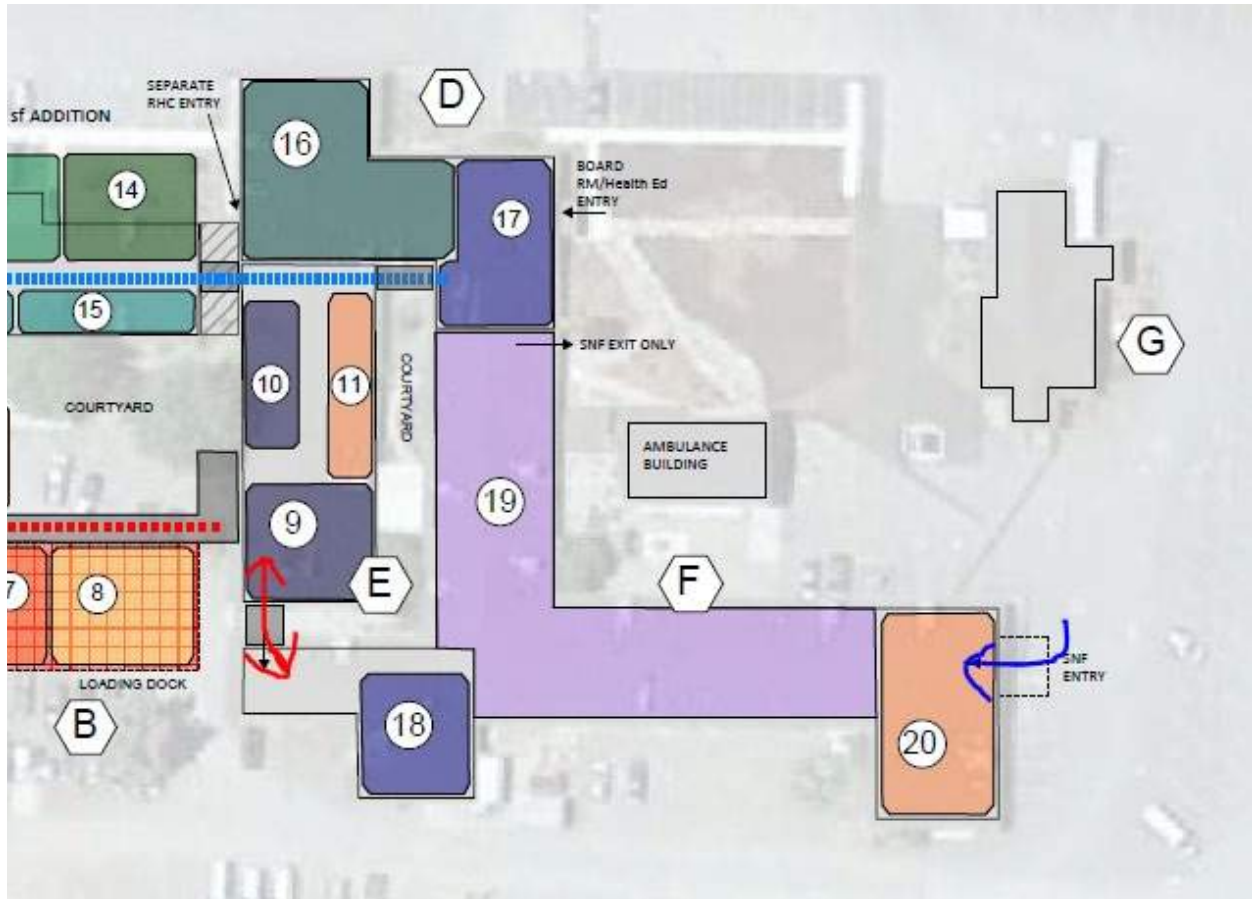
Final Departmental Layout - circulation

In all planning, estimated square footages for departmental sizes was used, based on required spaces and circulation within each department.

As for Skilled Nursing in Fall River, the concept was to remain flexible, as far as bed use and numbers. The building itself could be reclassified appropriately as OSHPD-2 (Skilled Nursing) so that the seismic upgrade requirements would no longer be needed. With Dietary relocating as required in to a building remaining OSHPD-1 (Surgery/O.B.

Addition), the existing kitchen space could be reutilized for added activity area. SNF dining would remain where it currently is, and a new connection corridor would be constructed to allow circulation (mostly for meals and staff) to flow from the new kitchen to the SNF dining.

Something that the current SNF is missing is a welcoming, independent entry. A concept included in the masterplan now is to create a new public face for the SNF to the community with a covered entry on the north side of the building. This area which was previously the Board Room and Cardiac Rehabilitation would be remodeled to create a reception and main lobby/lounge for guest visitation and resident use. This also has the opportunity to use materials reflective of the newer construction on campus to tie the campus together and create more aesthetically pleasing appearances and spaces.



SNF - access and connections

Out-Buildings

Out-buildings were considered as well. There was a desire to co-locate Business offices with Finance offices and HR in the Fall River old *Clinic Building*, when space opened up as PT would move. The existing *Administration Building* was evaluated for multiple uses, but in the end the idea to keep Administration presence in here, along with Public Relations, but room for Information Technology (IT), since IT desired to move from 2nd floor of Maintenance Building, as well as Foundation office space.

The *Ambulance Building*, although not currently ideal was a low priority as it is proposed to continue to be outsourced – and the current space is adequate. Proximity to the ED could be improved, and long-range plan could include a new Ambulance Building on the south side of the property by the ED. But again, this was considered low priority.

The *Shop/Maintenance Building* required no changes, other than IT potential leaving the 2nd floor for a new home in the *Administration Building*. Additional outdoor storage was noted as needed by the maintenance department and should be considered in future planning, non-OSHPD type storage facilities. The existing *Storage Building* on the Fall River campus was discussed as well, and the potential need for power and conditioning in future, but placed as a low priority.

No changes were discussed for the *Physician Sleep House*, other than the fact that the garages would require demolition and/or adjustment depending on final configuration of the *New Acute Building* placement.

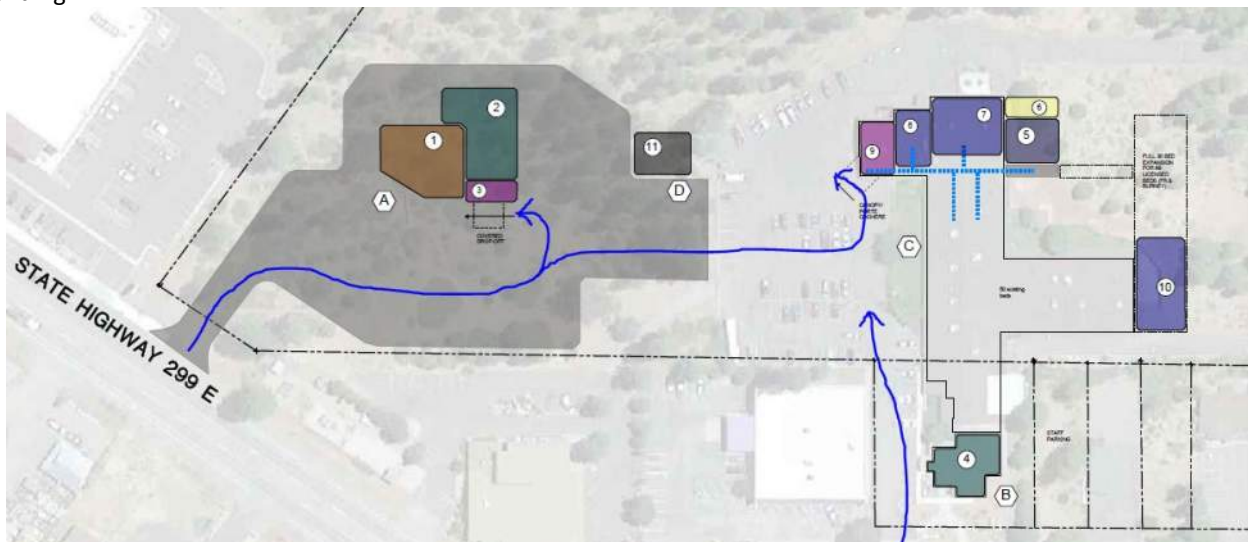
The *Thrift Store and Arts Building* was considered for various remodel opportunities. A proposed relocation of Hospice offices from the rented downtown location to a new storefront remodel of the *Arts Building*, with room for storage, was logical. The remainder of the *Arts Building* to be used for storage requirements. Other possibilities may exist whereas the proximity to the hospital campus, and open space could be ideal for remodel opportunities at low cost.

No proposed changes at this time to the *Retail Pharmacy* building in Fall River were considered, or the *Lodge* building and grounds. The *Lodge* has accessibility barriers for the cabins that should be considered over time.

6.2 Burney Narrative and Notes

At Burney, the main drivers were the new Ambulatory Surgery Center (ASC), the fact that the Rural Health Center (RHC) had outgrown its existing location, the existing condition of the kitchen, and condition of the current SNF entry.

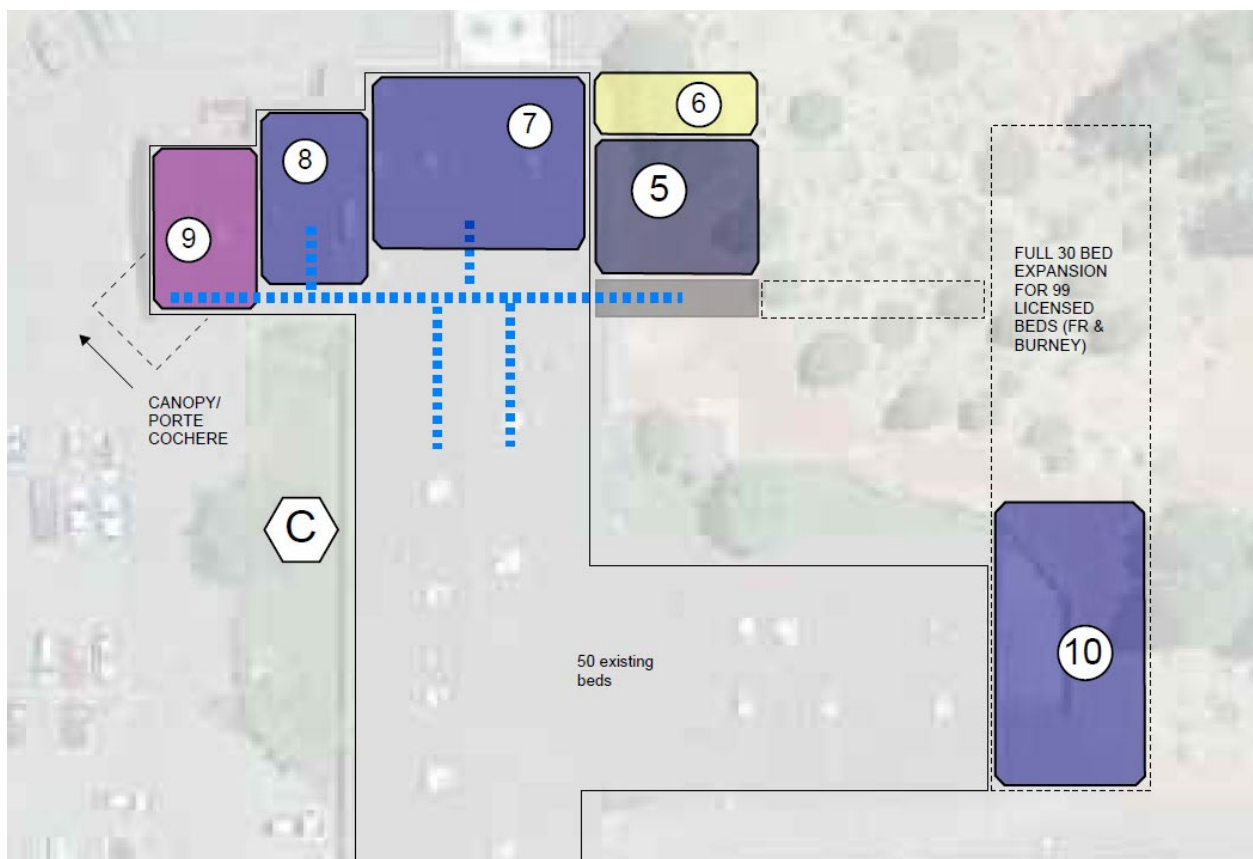
A new ASC is proposed, with the inclusion of a larger RHC. These would be grouped into a single OSHPD-3 building. The ASC would contain 1 operating room and 1 procedure with adequate pre- and post-surgical beds, and support space. The RHC would be sized to accommodate the current and anticipated needs. A new access/encroachment directly off Highway 299 is also proposed to increase visibility and ease of access to the *ASC/RHC Building*. Meanwhile the existing RHC space – the original Clinic Building on the campus could be reutilized for OPM and specialty clinical services. These would not necessarily require full-time use, therefore could be used for both. And it is currently OSHPD-3 already. The adjacent lot to the south could be utilized for staff parking also, to alleviate staff taking prime parking on the guest side nearest the entry, with a staff entrance on that side of the building.



Burney - site and building access

The entry of the SNF was discussed as far as being deficient in providing a welcoming, residential feel. The parking is also constrained in the entry location, impaired as well by the entry of the existing clinic in this location, making guest parking in proximity to both entries difficult. The concept of creating a new SNF entry towards the rear of the building, visible from either the entry drive off Highway 299 or the existing drive access off Commerce Way. A new porte cochere and lobby is proposed. This would be a minimal addition (canopy only) and the lobby with a lodge type feel would be created within the existing building space. This would tie directly into the activity/dining side of the facility for ease of guest visits and create a social hub for the facility and residents.

Functionally, the kitchen being replaced would require an addition, so that the existing kitchen would continue to function during construction. Once the kitchen addition is complete, the existing kitchen area could be converted to additional activity space, and make that connection to the new lobby space. Storage and maintenance areas would be sacrificed for this, which would be accommodated in a new *Maintenance Building* on the campus to serve not just the SNF, but the *ASC/RHC Building* as well. The added activity and dining within the footprint of the existing building is needed also to accommodate any bed addition, as being proposed as well. The long-range plan shows a modest expansion of an 18-bed wing at the end of the memory care wing. Additional beds could be added as needed, space is plenty on site, and options to create inner courtyards/etc are available.



SNF - remodel areas and additions

It is also noted that Burney as a stand-alone SNF is subject to PIN-74, the Alternate Source of Power requirements for maintaining safe temperatures, and availability of life-saving equipment and oxygen-generating devices. This would require some cooling to be transferred to emergency power circuits. An analysis of this is required and the facility is currently investigating.

Mayers Memorial Healthcare District Masterplan 2023 6.3 Departmental Option Matrix

List of Services	Existing Building Location - 2023		Dept Area (SF)	Location Options	Proposed Area (SF)	Notes - benefits	Notes - obstacles
Basic							
Med/Surgical Units	BLD-02327	Original Hospital	2,814	remain existing location			SPC-2 building requires structural upgrade, NPC-2 building requires NPC upgrades, distance to ED, public thoroughfare through department, existing room size constraints
				New addition	5,000	Would be new SPC/NPC compliant building, align with proximity to ED, allows provision for expansion	new OSHPD-1 building construction costs
				Surgery/O.B. Addition		existing OSHPD-1 building/SPC-4 compliant	NPC-2 building requires NPC upgrade, future expansion limited, not adjacent to ED (same as now), (maybe corridor connection to ED)
				Pharmacy and 12 Bed Addition		existing OSHPD-1 building/SPC-4 compliant	NPC-2 building requires NPC upgrade, future expansion limited, closer to ED but not adjacent, public thoroughfare - maybe small addition to divert traffic
Surgical Services - includes Anesthesia/Recovery, Central Sterile Supply, Outpatient Surgery							
	BLD-02329	Surgery/O.B. Addition	3,867	remain existing location		existing OSHPD-1 building/SPC-4 compliant	NPC-2 building requires NPC upgrade, District needs assessment diverted to outpatient surgery, outpatient client base proximity to Burney
				New ASC in Burney	5,000	New building, to be OSHPD-3 compliant	new OSHPD-3 building construction costs
Clinical Laboratory - includes Phlebotomy							
	BLD-05334	Emergency Department Expansion	1,310	remain existing location	1,310	newly constructed building 2020	
Radiological							
	BLD-05334	Emergency Department Expansion	1,492	remain existing location	1,492	newly constructed building 2020	access to control room to both RF and CT is through imaging rooms - could be addressed in remodel
				New addition	1,000	expansion of additional radiological services - mammo, ultra, bones density, etc in proximity to existing Radiology	
Pharmaceutical							
	BLD-02332	Pharmacy and 12 Bed Addition	809	remain existing location			NPC-2 building requires NPC upgrades, room size constraints, limited operational and storage space, utility support is old (HVAC)
				New Addition	1,000	Would be new SPC/NPC compliant building, align with proximity to other departments, allows provision for expansion	new OSHPD-1 building construction costs
				Surgery/O.B. Addition		existing OSHPD-1 building/SPC-4 compliant	connections to other departments
				Pharmacy and 12 Bed Addition		existing OSHPD-1 building/SPC-4 compliant	along main thoroughfare, limited expansion possibilities
Dietetic							
	BLD-02328	Long Term Beds Addition	1,747	remain existing location			NPC-2 building requires NPC upgrades, room size constraints, failing utility support (HVAC, etc), within SNF area of hospital - access by other departments
				Surgery/O.B. Addition	2,000	existing OSHPD-1 building/SPC-4 compliant, space appears adequate, utilities upgrades to be concurrent with required NPC work	NPC-2 building requires NPC upgrade, future expansion may be limited, proximity to public entry/waiting
				Pharmacy and 12 Bed Addition		existing OSHPD-1 building/SPC-4 compliant, proximity to public entry/waiting, utilities upgrades to be concurrent with required NPC work	NPC-2 building requires NPC upgrade, future expansion limited, delivery access
				New Addition		Would be new SPC/NPC compliant building, align with proximity to other departments, allows provision for expansion	new OSHPD-1 building construction costs
Support Services							
Storage							
	BLD-02332	Pharmacy and 12 Bed Addition	967	remain existing location		existing OSHPD-1 building/SPC-4 compliant, space appears adequate, utilities upgrades to be concurrent with required NPC work	along main public thoroughfare, limited expansion
				New Addition	300	Would be new SPC/NPC compliant building, align with proximity/access to staff circulation, allows provision for expansion. Minimal needed for code requirement in OSHPD-1 space	new OSHPD-1 building construction costs
				new Non-OSHPD Support Building	2,000	no seismic requirements, affordable construction costs	
				Long Term Beds Addition/Old Dietary		Has existing loading dock.	would require separate storage space for code requirement in the OSHPD-1 buildings. Physical connection to circulation is along SNF corridors only.

LEGEND

	Top Choice
	Alternate Choice
	Not Desirable Choice

Mayers Memorial Healthcare District Masterplan 2023 6.3 Departmental Option Matrix

Administrative Space	BLD-02327	Original Hospital & local jurisdiction building (Admin Building)	120	remain existing location			
				Pharmacy and 12 Bed Addition		existing OSHPD-1 building/SPC-4 compliant, proximity to public entry/waiting, utilities upgrades to be concurrent with required NPC work	NPC-2 building requires NPC upgrade, future expansion limited, delivery access, UNLESS RECLASSIFY AS NON- ACUTE
				New Addition	1,000	Would be new SPC/NPC compliant building- REQUIRED FOR ADMIN ACUTE-CARE CODE REQUIREMENT	new OSHPD-1 building construction costs
Employee Dressing Rooms & Lockers							
	BLD-05334	Emergency Department Expansion	938	remain existing location	938	newly constructed building 2020	
Laundry	BLD-02328	Long Term Beds Addition	413	remain existing location		not required in the OSHPD-1 building. Laundry service to be by "outside" service. This room laundry machine can remain as may be desired.	
Supplemental							
Emergency - Standby	BLD-05334	Emergency Department Expansion	3,361	remain existing location	3,361	newly constructed building 2020	
Therapy Services/Cardiac Rehabilitation	BLD-02328	Long Term Beds Addition	1,200	remain existing location		space not required to be in compliant SPC/NPC building (this building is planned to be reclassified as OSHPD-2) so no seismic work needed, proximity to SNF for their use after hours, has convenient exterior entry.	Proximity to ED Physician, proximity and connection through hospital
				New Addition		Would be new SPC/NPC compliant building, would be close to ED physician for coverage	is this needed in acute-care space, additional space equals additional high priced construction.
				New RHC in Burney		Would be OSHPD-3 compliant building, could have RHC doctor filling physician requirement (?)	Separation from FR campus. New building space/costs.
				New Wellness/PT Building		ideally seems to make sense if a new wellness/PT building is built.	upfront new construction costs
				Pharmacy and 12-Bed Addition	1,900	existing OSHPD-1 building/SPC-4 compliant, proximity to public entry/waiting, utilities upgrades to be concurrent with required NPC work	
Outpatient Services							
IV Infusion & Wound Care	BLD-02327	Original Hospital	1,829	remain existing location		potential reclassification to other OSHPD building type, eliminate SPC/NPC requirements, set up for clinical use, proximity to hospital departments, access from public registration	distance from public registration, expansion is limited
				Burney site (with ASC/RHC)			
Rural Health Center							
		OSHPD-3 Building in Burney	3,200	remain existing location		existing OSHPD-3 certified building, remodeled 2021	existing space constraints, public parking limitation (close)
				New ASC/RHC Building Burney	5,000	New compliant building, allows provision for expansion, in population center	new OSHPD-3 building construction costs
				Original Hospital Building		Presence in Fall River, existing public entry/separate from hospital, space for requirements	
Surgery							
	BLD-02329	Surgery/O.B. Addition	w/in Surgical Services numbers	remain existing location		existing OSHPD-1 building/SPC-4 compliant	inpatient surgery not a District priority
				New ASC in Burney		New compliant building, allows provision for expansion, in population center	new OSHPD-3 building construction costs
Others:							
Physical Therapy		Local jurisdiction building (Clinic Building)	~1,600	remain existing location			location on campus, non-compliant OSHPD-3 building, existing room size constraints
				Arts Building Fall River		Open canvas for remodel, visibility from highway	OSHPD-3 building construction costs, location/distance to hospital
				New PT/Wellness Building FR		New compliant building, allows provision for expansion, visibility from highway	new OSHPD-3 building construction costs
				Original Hospital Building	2,300	Would be new SPC/NPC compliant building, proximity to Cardio/RT/OPM. Expansion option and higher ceiling option. Public entrance option.	expansion has OSHPD-1 costs
Skilled Nursing Care Services	BLD-02328	Long Term Beds Addition	10,017	remain existing location		potential for reclassification as OSHPD-2 or -1R, eliminate SPC/NPC requirements, set up for existing use, potential relocation of memory care patients and creation of memory care only in FR	utilities (HVAC) replacement needs

Mayers Memorial Healthcare District Masterplan 2023 6.3 Departmental Option Matrix

Skilled Nursing Care Services	BLD-05268	Skilled Nursing Building Burney Campus	29,600	remain existing location		current OSHPD-2 building, set up for existing use	dietary remodel needs
				expansion of beds		relocation of FR SNF beds possibilities - site allows expansion opportunities, phasing of construction for remodeled support services	new OSHPD-2 building construction costs
Respiratory Care Services	BLD-02329	Surgery/O.B. Addition	323	remain existing location			if Acute moves it is fairly separated, other pending uses for this building
				New Addition		Would be new SPC/NPC compliant building, align with proximity to related departments, allows provision for expansion. Provide only limited needed space in new build	new OSHPD-1 building construction costs
				Pharmacy and 12 Bed Addition	700	Would be new SPC/NPC compliant building, proximity to PT/Cardio/OPM	along main thoroughfare, some expansion possibilities
Others Departments							
Hospice		leased storefront in Fall River		remain existing location		location downtown Fall River	quality of building. Don't own it.
				Thrift Shop and Storage Building (off-site)		available space, street front	
Admitting	BLD-05334	Emergency Department Expansion	3822	remain existing location	3,822		
Business		Administrative Building		remain existing location			
				Clinic Building		co-location with Finance	
Finance		Clinic Building		remain existing location			
HR		Administrative Building		remain existing location			
				Clinic Building		co-location with Business and Finance	
Purchasing	BLD-02332	Pharmacy and 12 Bed Addition	w/ Storage numbers	remain existing location			could become landlocked if new addition built. Space limited
				New Non-OSHPD Support Building	200	no seismic requirements, proximity to receiving/storage potential	
				Long Term Beds Addition/Old Dietary		Has existing loading dock.	would require separate storage space for code requirement in the OSHPD-1 buildings. Physical connection to circulation is along SNF corridors only.
Environmental Services	BLD-02328	Long Term Beds Addition		remain existing locations (as far as closets). New main home TBD	1,000	storage/supplies distributed throughout campus, AND EXPAND	
Information Technology (IT)		Maintenance & Engineering/IT Office Building		remain existing location			disconnected from hospital
				New Addition		Would be new SPC/NPC compliant building	additional space equals additional high priced construction.
				Pharmacy and 12 Bed Addition		existing OSHPD-1 building/SPC-4 compliant, proximity to admin and other departments, utilities upgrades to be concurrent with required NPC work	NPC-2 building requires NPC upgrade, future expansion limited
				Ambulance Building		if this building stays and ambulance moves out - could be remodeled for additional storage	
				Admin Building		co-located with portion of admin	space limitations?
Maintenance		Maintenance & Engineering/IT Office Building		remain existing location			
Activities		Long Term Beds Addition		remain existing location		dispersed in SNF spaces, addition of old dietary area in Fall River	
Lodge		Lodge & Site (off-site)		remain existing location			
Public Relations		Administrative Building		remain existing location			
Foundation		leased office space Burney		remain existing location			
				Arts Building			
				Admin Building		co-located with portion of admin	



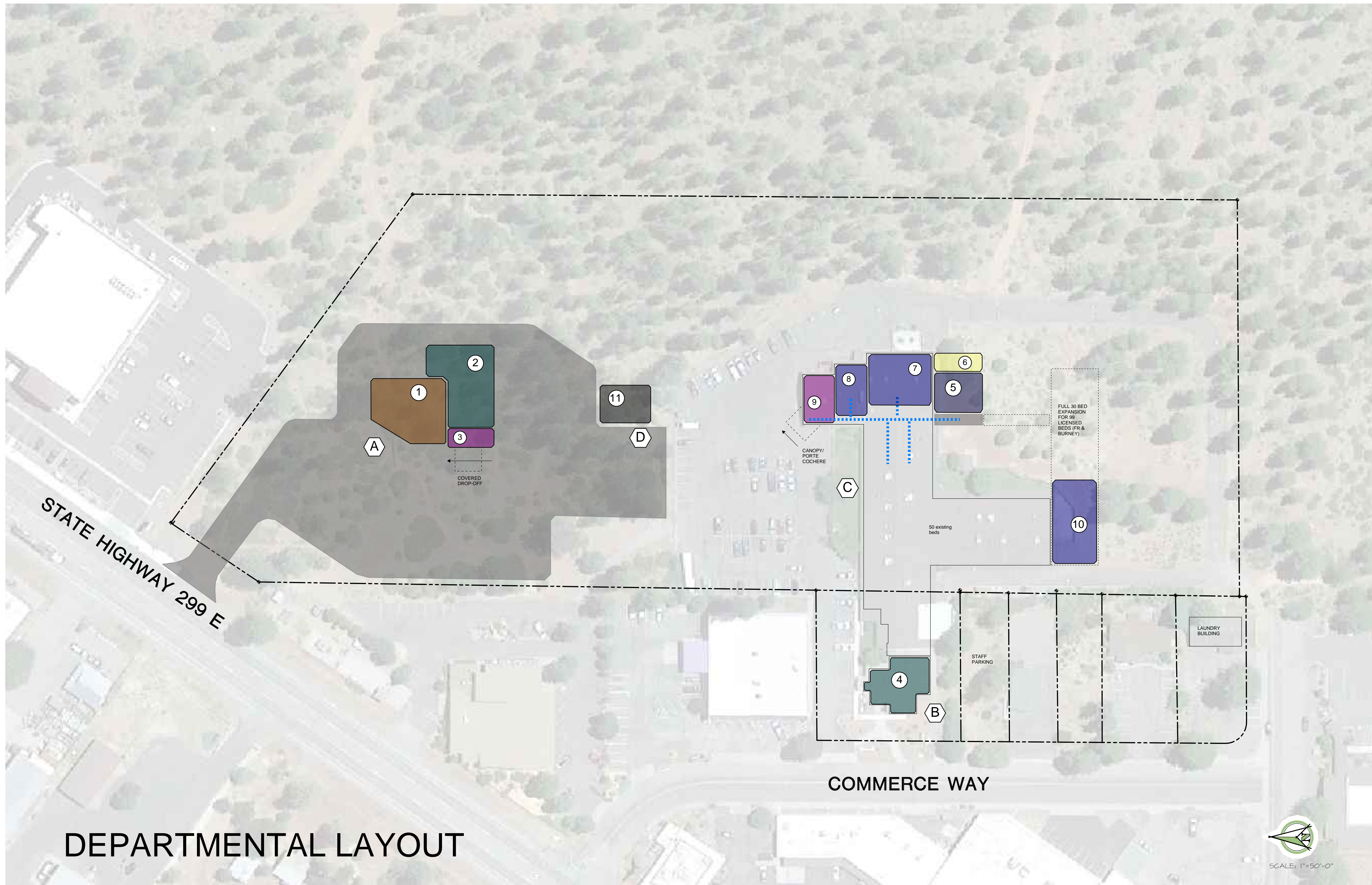
DEPARTMENTAL LAYOUT

- A** NEW ACUTE WING (OSHPD-1)
~12,800SF
 - ① NEW ACUTE (MED-SURG) DEPARTMENT
Approx. 6,000sf
10 patient rooms (5 private, 5 semi-private)
 - ② IMAGING DEPARTMENT ADDITION
Approx. 1,000sf
Suite for Ultra/Mammo/Bone Density
 - ③ PHARMACY DEPARTMENT
Approx. 1,400sf
w/ Office and Storage
 - ④ IT - IDF
Approx. 200sf
 - ⑤ EMERGENCY DEPARTMENT OFFICE / STORAGE
Approx. 300sf
 - ⑥ GENERAL STORAGE (code required)
Approx. 300sf
- B** NEW SUPPORT BUILDING (NON-OSHPD)
~3,200SF
 - ⑦ ADMIN EXPANSION
Approx. 1,000sf
 - ⑧ PURCHASING/MATERIALS
Approx. 2,200sf
w/ Office & Loading Dock
- C** 12-BED/PHARMACY BUILDING
- RECLASSIFY AS OSHPD-3/or -1R, ~5,300SF
 - ⑫ PHYSICAL THERAPY
Approx. 2,300sf
 - ⑬ RESPIRATORY THERAPY
Approx. 700sf
Exam Room/Lab, Office, Storage
 - ⑭ CARDIAC REHABILITATION
Approx. 1,900sf
 - ⑮ OUTPATIENT MEDICAL
Approx. 700sf
- D** ORIGINAL HOSPITAL BUILDING
- RECLASSIFY AS OSHPD-3/or -1R
 - ⑯ RURAL HEALTH CLINIC
Approx. 4,000sf
w/ Separate Entry/Waiting
 - ⑰ BOARD ROOM & HEALTH ED
Approx. 2,200sf
w/ new Public Entry
- E** SURGERY/OB BUILDING
- REUSE AS OSHPD-1, ACUTE-CARE
 - ⑨ DIETARY - KITCHEN
Approx. 1,800sf
 - ⑩ DIETARY - DINING
Approx. 1,100sf
w/ Courtyard Dining
 - ⑪ STAFF OFFICES
Approx. 1,200sf
- F** LONG TERM CARE BUILDING
- RECLASSIFY AS OSHPD-2
 - ⑱ SNF ACTIVITIES
Approx. 1,600sf
 - ⑲ REMODEL - FOR MEMORY CARE - 19 BEDS
 - ⑳ NEW SNF ENTRY, RECEPTION, FAMILY RM
Approx. 2,600sf
- G** ADMIN BUILDING - REUSE
- H** PREVIOUS CLINIC BUILDING
 - ㉑ CONSOLIDATE SERVICES - FINANCE & IT w/
BUSINESS
- Q** THIFT & ARTS BUILDING
 - ㉒ FOUNDATION & THIFT RELOCATION w/ STORAGE
 - ㉓ HOSPICE



MAYERS MEMORIAL
HEALTHCARE DISTRICT
FALL RIVER MILLS CAMPUS - MASTER PLAN





- A** NEW AMBULATORY SURGERY CENTER/RURAL HEALTH CLINIC BUILDING (OSHDP-3) ~11,000SF
 - ① AMBULATORY SURGERY CENTER
Approx. 5,000sf
1 Operating Room, 1 Procedure Room
6 Pre/Post Beds
 - ② RURAL HEALTH CENTER
Approx. 5,000sf
 - ③ PUBLIC ENTRY/CORE
Porte Cochere
- B** EXISTING CLINIC BUILDING (OSHDP-3) ~3,200SF
 - ④ OUTPATIENT MEDICAL/SPECIALTY CLINIC
Existing space, minor remodel
- C** EXISTING SKILLED NURSING FACILITY/ LONG TERM CARE (OSHDP-2) ~29,600SF
 - ⑤ REPLACEMENT KITCHEN ADDITION
Approx. 2,000sf
 - ⑥ NEW PURCHASING/STORAGE
Approx. 1,000sf
 - ⑦ REMODEL EXISTING DINING & ACTIVITY
 - ⑧ REMODEL PREVIOUS KITCHEN TO ACTIVITY
 - ⑨ REMODEL/NEW ENTRY, LOBBY
Includes Porte Cochere
 - ⑩ NEW SNF ADDITION
Approx. 4,500sf for 18-bed
Expansion possibilities
- D** NEW MAINTENANCE BUILDING (NON-OSHDP) ~2,000SF
 - ⑪ NEW BUILDING
Approx. 2,000sf
Pre-manufactured Metal Building

DEPARTMENTAL LAYOUT

MAYERS MEMORIAL HEALTHCARE DISTRICT BURNEY CAMPUS - MASTER PLAN



7.0 Phasing and Budgetary Considerations

Refer to the included Phased Plans for both campuses, Fall River and Burney, at the end of this section, along with the Phasing Chart that depicts the proposed timelines. In the Phasing Chart, each project is defined by a block roughly the length of what the construction period would take. Those projects with design and approval periods are shown with a diagonal hatched block preceding the project. These projects are broken into three phases for planning purposes.

Phase 1 – this is the period from current day to approximately 2028 when the initial planned projects should be completed to allow the mandatory moves to be made prior to the SB-1953 2030 deadline.

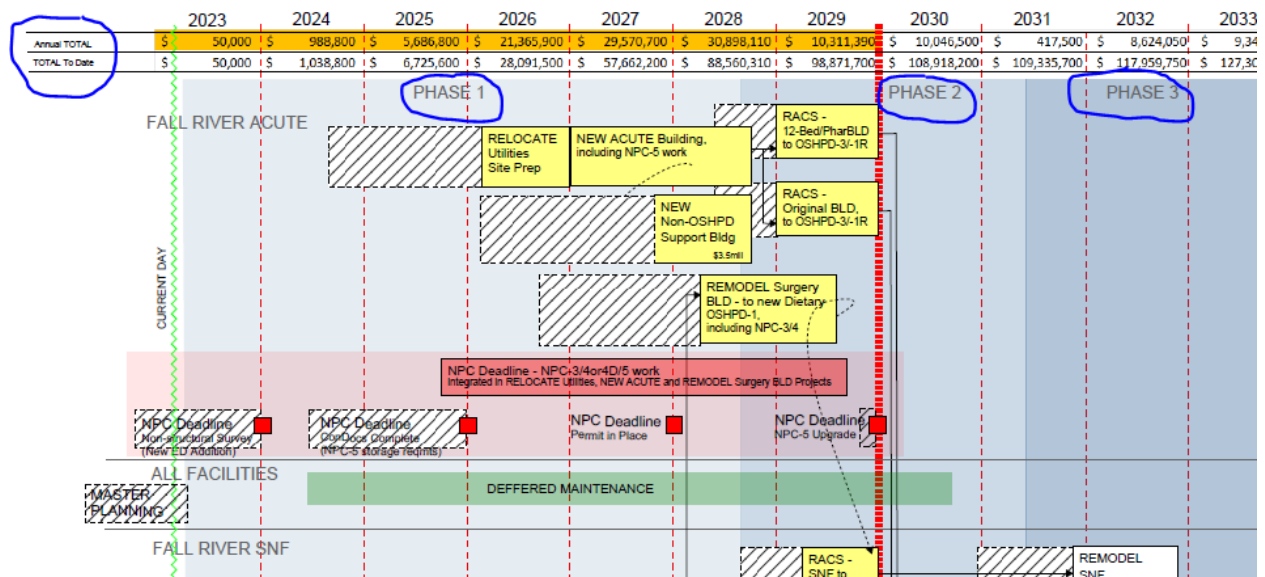
Phase 2 – this is the 2028 to 2031 time frame, where the initial projects have been completed and building resolution is finally made prior to 2030 deadline, and then the remodel of the existing buildings for alternate uses.

Phase 3 – this is the longer range planning (2030 plus) timeframe. Those projects that are not necessary to be completed by 2030, but still a priority as they are part of the long term planning.

Note: Projects in yellow are required for seismic compliance. And dependency arrows are shown where relevant.

The Phasing Chart also includes a few other relevant items:

1. The deadlines for SB-1953 compliance
 - a. Major 2030 deadline indicated for completion
 - b. Milestone deadlines for NPC work
 - i. 1/1/24 completion of the nonstructural survey
 - ii. 1/1/26 completion of construction documents related to NPC
 - iii. 1/1/28 deadline for receipt of building permits related to NPC work
2. Inclusion of Deferred Maintenance block. This is an annual expense for needed maintenance type expenses necessary for continued use of the older buildings until their use is changed, such as HVAC equipment replacement or reroofing.
3. A rolling budgetary estimate is provided at the top, not including annual inflation.
 - a. Top line is the estimated costs for design and construction activities related to the projects/tasking identified for that specific year
 - b. Bottom line is the cumulative summary



7.1 Specific Fall River Projects by Phase

Fall River Phase 1

- Design and construction of the Site Work and New Acute Building
- Design and construction of the New Non-OSHPD Support Building
- Design and construction of the remodel of Surgery/O.B. Addition for Dietary
- NPC deadline completion – nonstructural survey, related construction documents and permitting
- Ongoing Deferred Maintenance
- Remodel of the Arts Building for Hospice and Storage

Fall River Phase 2

- RACS design and construction for 12-Bed/Pharmacy Addition
- RACS design and construction for the Original Hospital Building
- RACS design and construction for the Extended Care Addition (SNF)
- Design and construction of the 12-Bed/Pharmacy Addition for PT/Cardio
- Design and construction of the Original Hospital Building for RHC/Boardroom

Fall River Phase 3

- Design and construction for the remodel of SNF spaces
- Relocate/Remodel old Clinic Building for co-located Business, Finance, HR
- New Ambulance Building

7.2 Specific Burney Projects by Phase

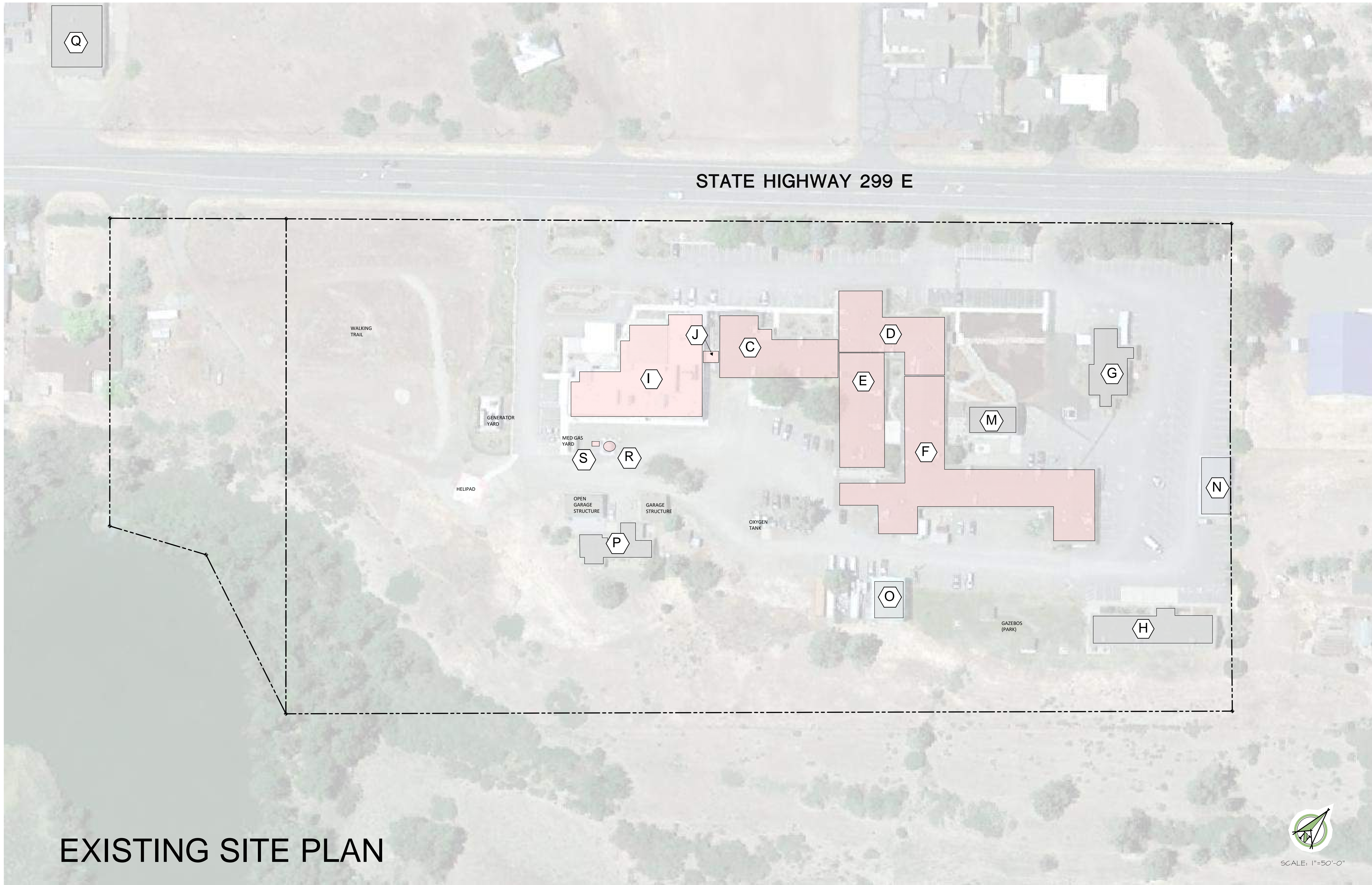
Burney Phase 1

- Design and construction of the ASC/RHC Building and associated site work
- Remodel of the Clinic Building for OPM/Specialty

Burney Phase 2 (not applicable)

Burney Phase 3

- Design and construction new Kitchen/Storage Addition
- Design and construction new Maintenance Building
- Design and construction of the existing Kitchen area and new Entry
- Design and construction of SNF Addition



EXISTING SITE PLAN

BUILDING TYPE

- OSHPD-1 ACUTE-CARE
- OSHPD-2 SKILLED NURSING
- OSHPD-3 CLINIC/OUTPATIENT DEPARTMENT
- NON-OSHPD

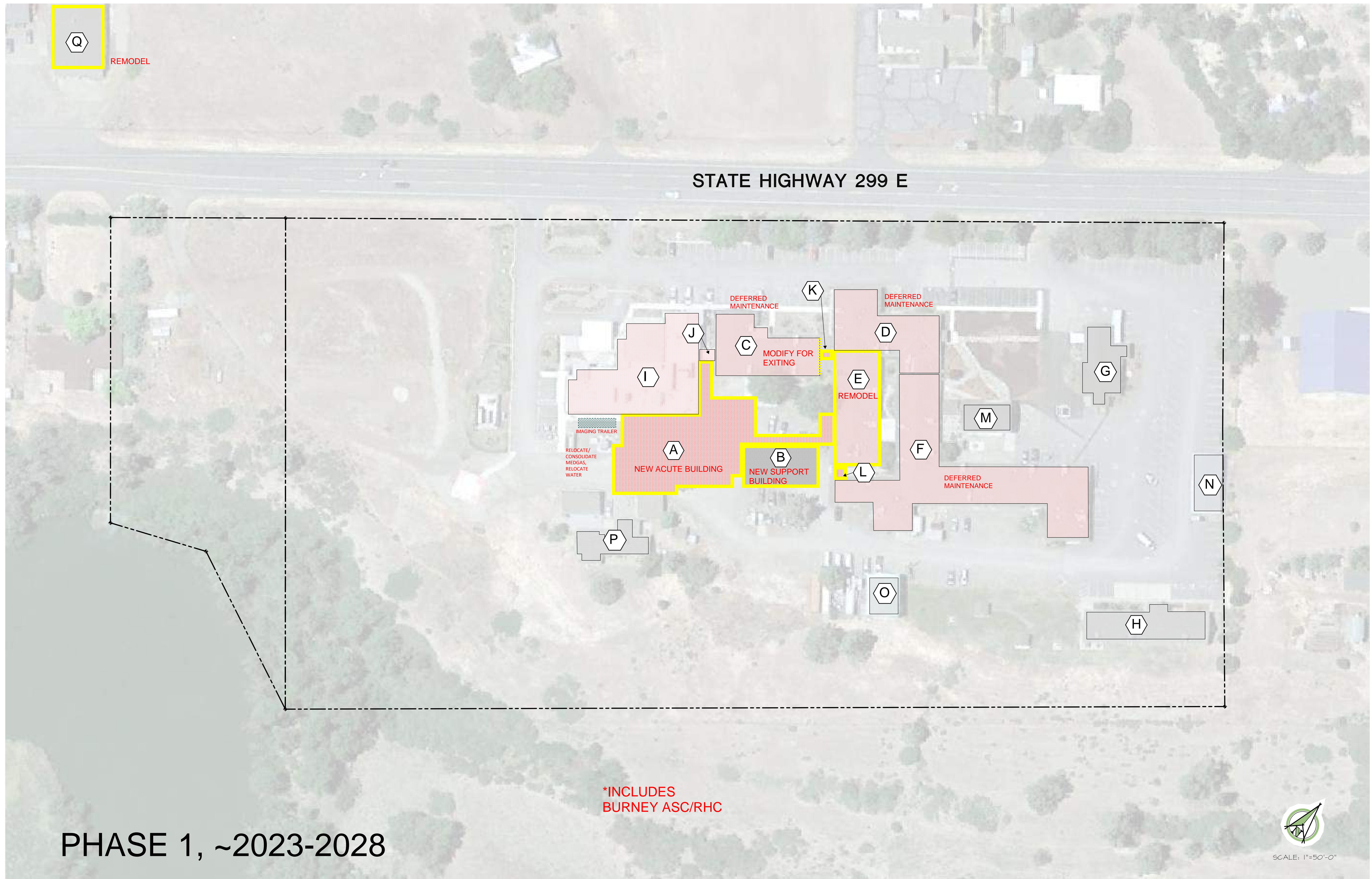
BUILDING INVENTORY

- A PLACEHOLDER
- B PLACEHOLDER
- C PHARMACY & 12-BED ADDITION
- D ORIGINAL BUILDING
- E SURGERY/O.B. BUILDING
- F EXTENDED CARE ADDITION
- G ADMIN BUILDING
- H PREVIOUS CLINIC BUILDING
- I EMERGENCY DEPARTMENT EXPANSION
- J CONNECTING CORRIDOR
- K PLACEHOLDER
- L PLACEHOLDER
- M AMBULANCE BUILDING
- N STORAGE BUILDING
- O MAINTENANCE BUILDING
- P DOCTOR SLEEP BUILDING
- Q ARTS BUILDING & ADJACENT THRIFT STORE
- R WATER TANK BUILDING
- S WATER TANK PUMP ENCLOSURE



MAYERS MEMORIAL HEALTHCARE DISTRICT FALL RIVER MILLS CAMPUS - MASTER PLAN





BUILDING TYPE

EXISTING	NEW	OSHPD-1 ACUTE-CARE
RECLASSIFIED		OSHPD-2 SKILLED NURSING
EXISTING RECLASS.	NEW ADDITION	OSHPD-3 CLINIC/OUTPATIENT DEPARTMENT
EXISTING	NEW	NON-OSHPD

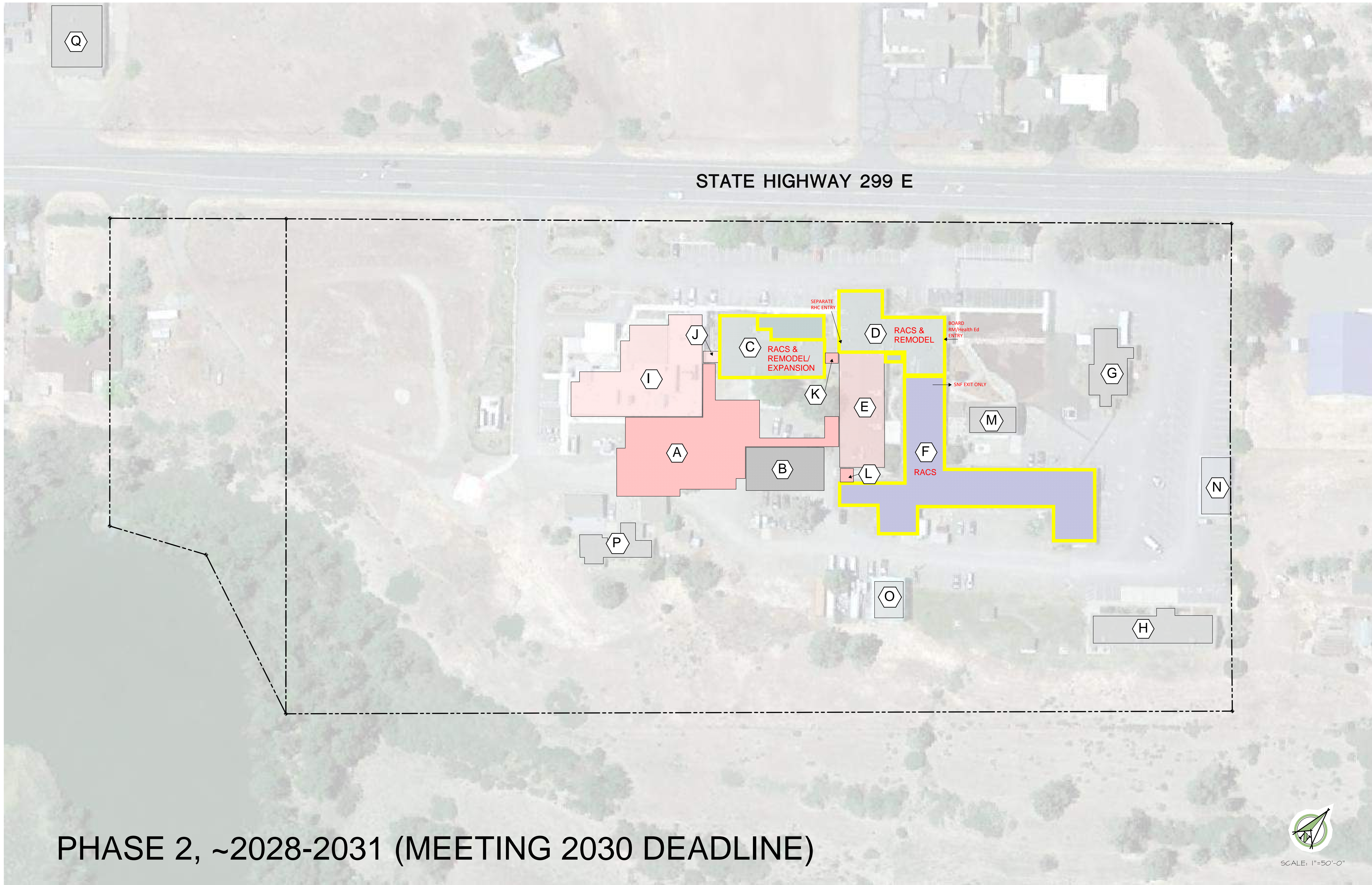
BUILDING INVENTORY

- A NEW ACUTE ADDITION
- B NEW SUPPORT BUILDING
- C REMODELED 12-BED BUILDING, with ADDITION
- D REMODELED ORIGINAL BUILDING, with CORRIDOR ADDITION
- E PREVIOUS SURGERY BUILDING
- F SKILLED NURSING FACILITY
- G ADMIN BUILDING
- H PREVIOUS CLINIC BUILDING
- I HOSPITAL BUILDING
- J CONNECTING CORRIDOR
- K NEW CONNECTING CORRIDOR
- L NEW CONNECTING CORRIDOR
- M AMBULANCE BUILDING
- N STORAGE BUILDING
- O MAINTENANCE BUILDING
- P DOCTOR SLEEP BUILDING
- Q ARTS BUILDING & ADJACENT THRIFT STORE

PHASE 1, ~2023-2028

MAYERS MEMORIAL HEALTHCARE DISTRICT FALL RIVER MILLS CAMPUS - MASTER PLAN





PHASE 2, ~2028-2031 (MEETING 2030 DEADLINE)

BUILDING TYPE

EXISTING	NEW	OSHPD-1 ACUTE-CARE
RECLASSIFIED		OSHPD-2 SKILLED NURSING
EXISTING RECLASS.	NEW ADDITION	OSHPD-3 CLINIC/OUTPATIENT DEPARTMENT
EXISTING	NEW	NON-OSHPD

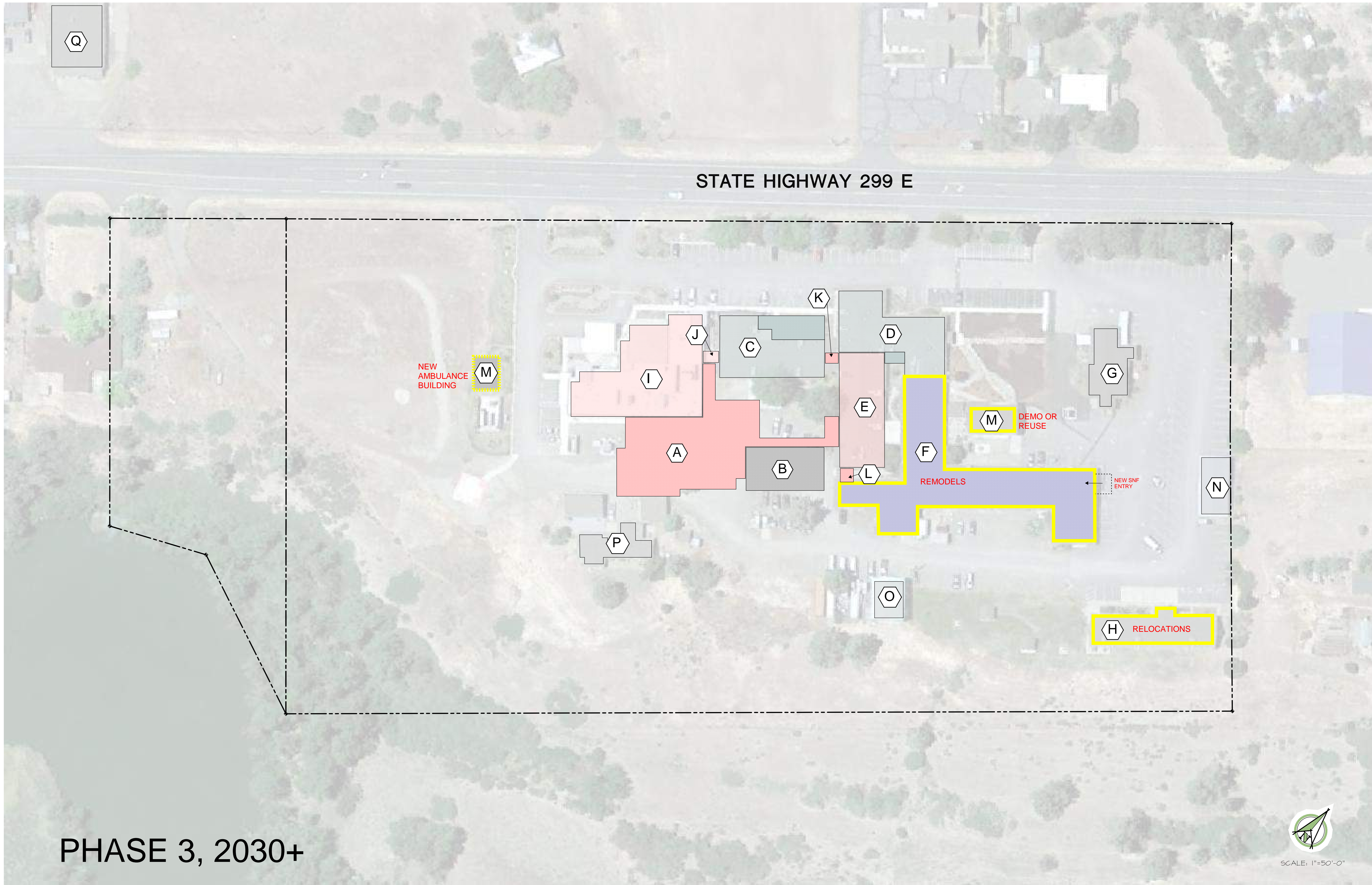
BUILDING INVENTORY

- NEW ACUTE ADDITION
- NEW SUPPORT BUILDING
- REMODELED 12-BED BUILDING, with ADDITION
- REMODELED ORIGINAL BUILDING, with CORRIDOR ADDITION
- PREVIOUS SURGERY BUILDING
- SKILLED NURSING FACILITY
- ADMIN BUILDING
- PREVIOUS CLINIC BUILDING
- HOSPITAL BUILDING
- CONNECTING CORRIDOR
- NEW CONNECTING CORRIDOR
- NEW CONNECTING CORRIDOR
- AMBULANCE BUILDING
- STORAGE BUILDING
- MAINTENANCE BUILDING
- DOCTOR SLEEP BUILDING
- ARTS BUILDING & ADJACENT THRIFT STORE

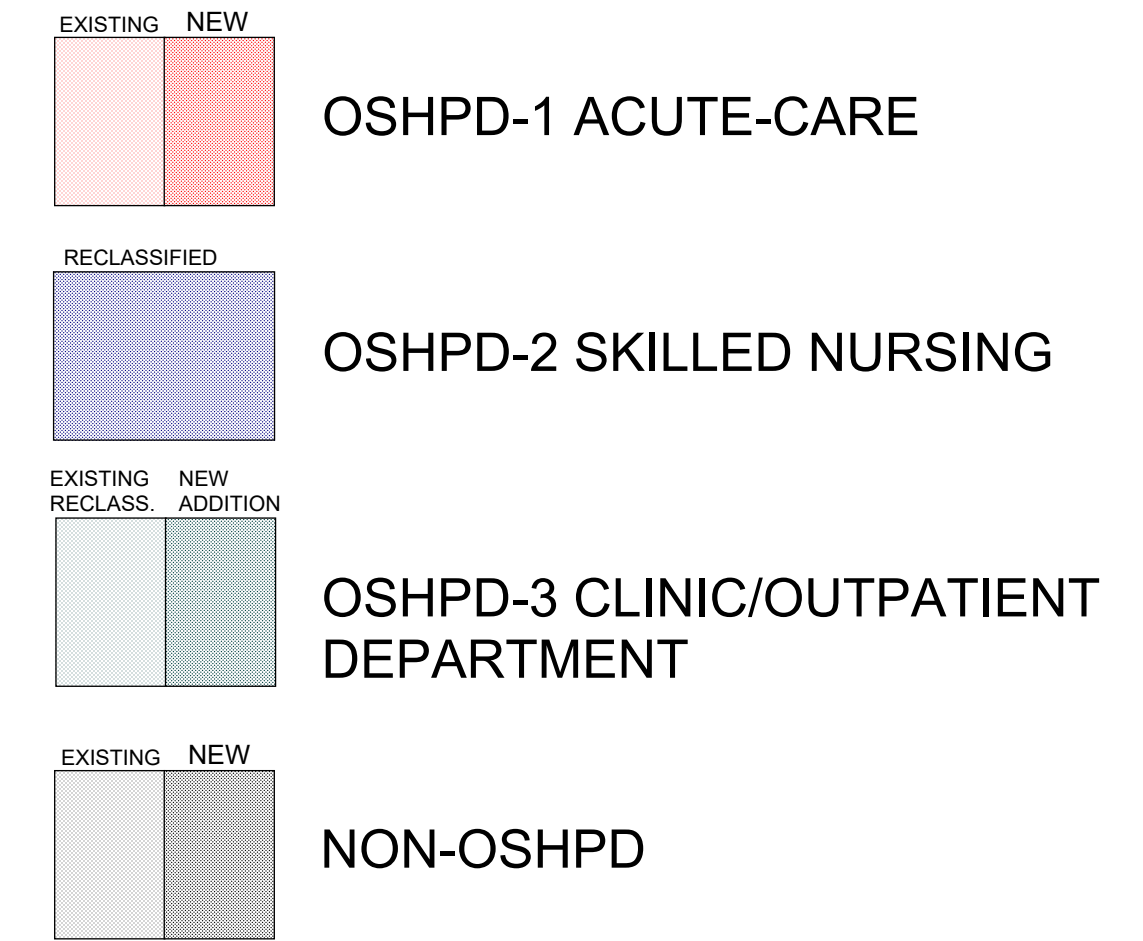


**MAYERS MEMORIAL
HEALTHCARE DISTRICT
FALL RIVER MILLS CAMPUS - MASTER PLAN**





BUILDING TYPE



BUILDING INVENTORY

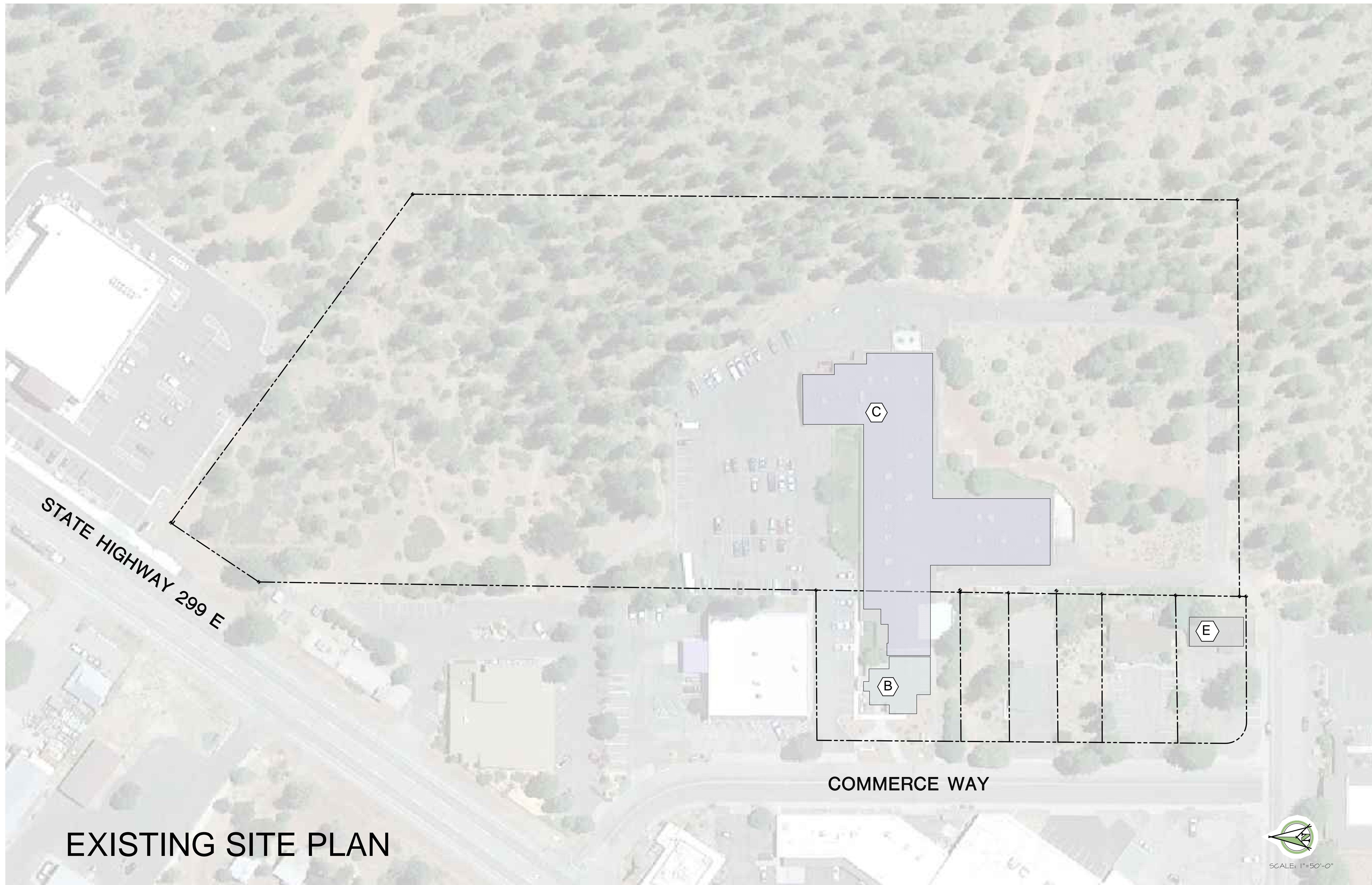
- A NEW ACUTE ADDITION
- B NEW SUPPORT BUILDING
- C REMODELED 12-BED BUILDING, with ADDITION
- D REMODELED ORIGINAL BUILDING, with CORRIDOR ADDITION
- E PREVIOUS SURGERY BUILDING
- F SKILLED NURSING FACILITY
- G ADMIN BUILDING
- H PREVIOUS CLINIC BUILDING
- I HOSPITAL BUILDING
- J CONNECTING CORRIDOR
- K NEW CONNECTING CORRIDOR
- L NEW CONNECTING CORRIDOR
- M AMBULANCE BUILDING
- N STORAGE BUILDING
- O MAINTENANCE BUILDING
- P DOCTOR SLEEP BUILDING
- Q ARTS BUILDING & ADJACENT THRIFT STORE

PHASE 3, 2030+




MAYERS MEMORIAL HEALTHCARE DISTRICT

FALL RIVER MILLS CAMPUS - MASTER PLAN










BUILDING TYPE

-  OSHPD-2 SKILLED NURSING
-  OSHPD-3 CLINIC/
OUTPATIENT DEPARTMENT
-  NON-OSHPD

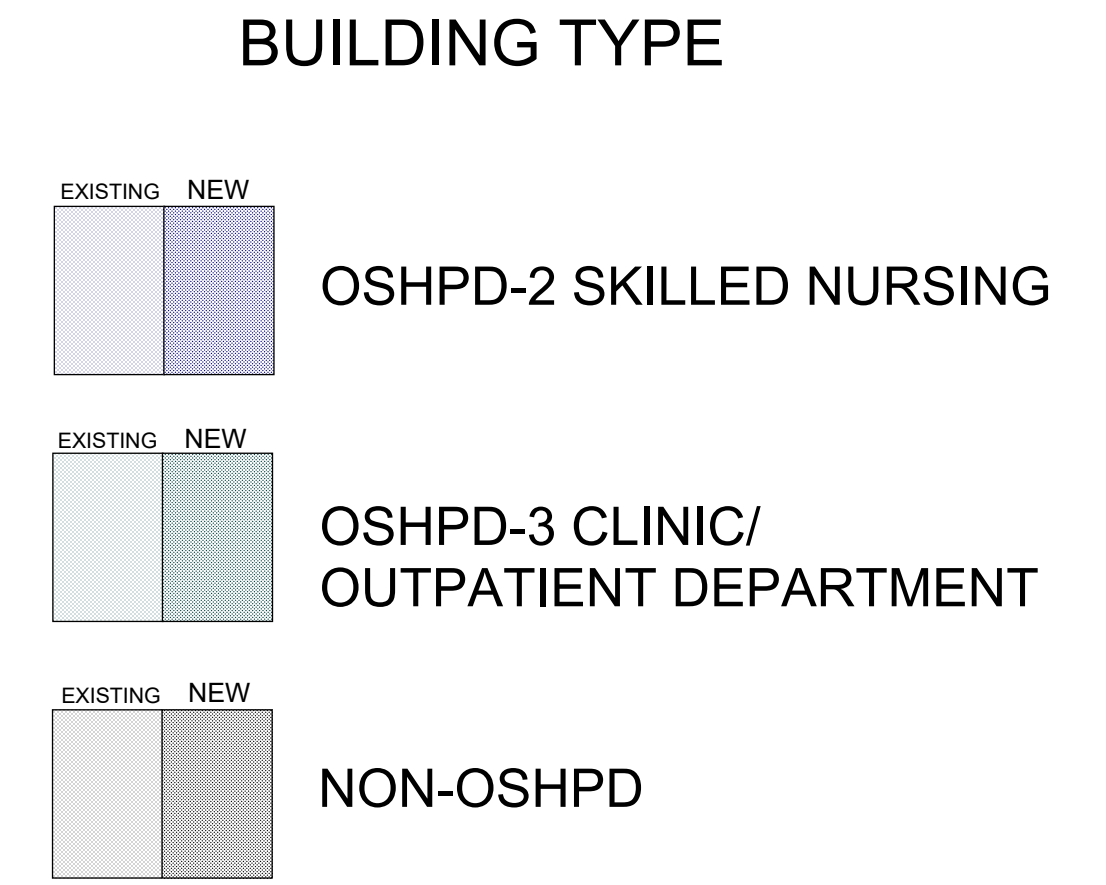
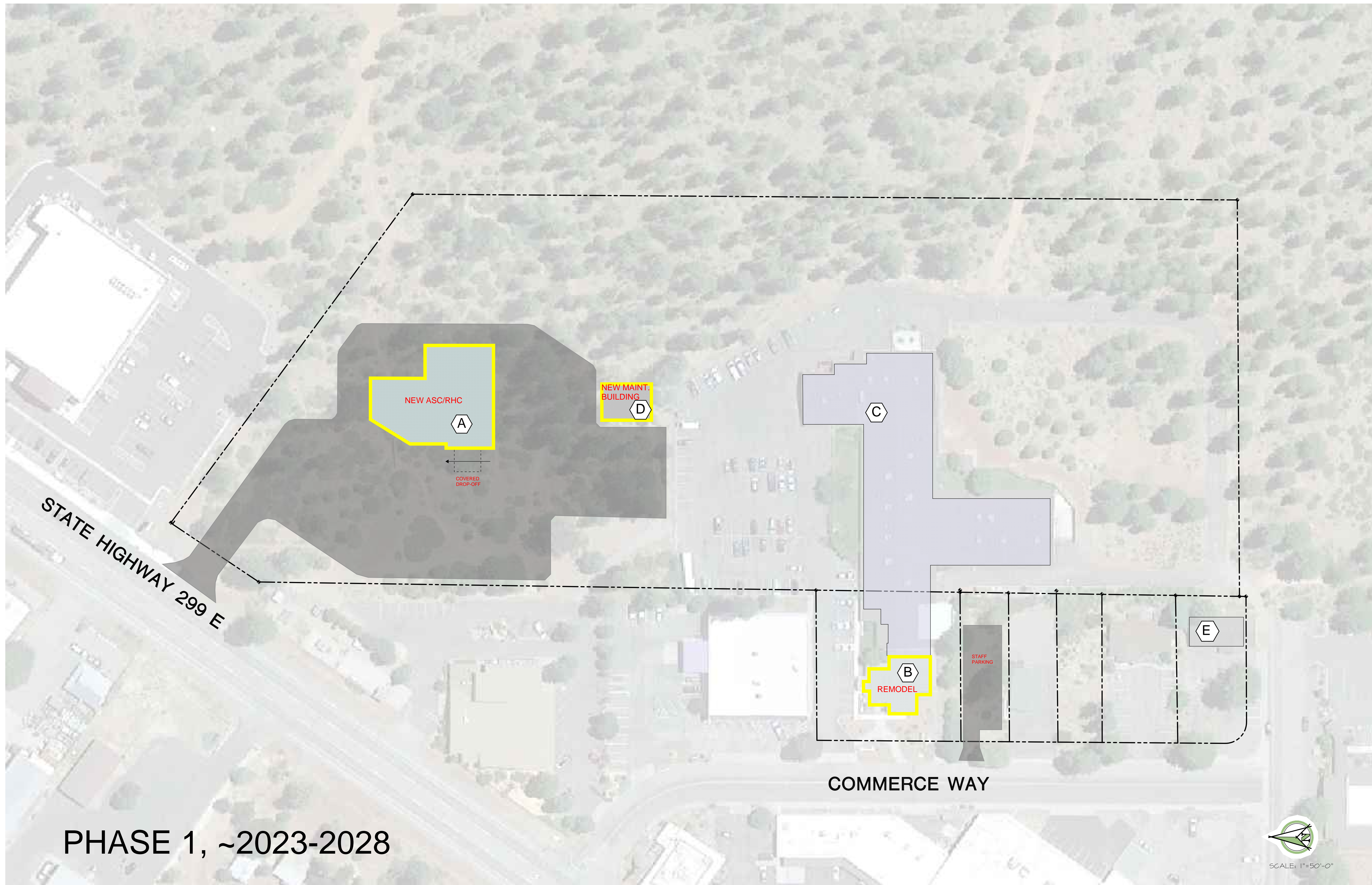
BUILDING INVENTORY

-  PLACEHOLDER
-  CLINIC BUILDING
-  SKILLED NURSING FACILITY
-  PLACEHOLDER
-  LAUNDRY BUILDING

EXISTING SITE PLAN

**MAYERS MEMORIAL
HEALTHCARE DISTRICT
BURNEY CAMPUS - MASTER PLAN**





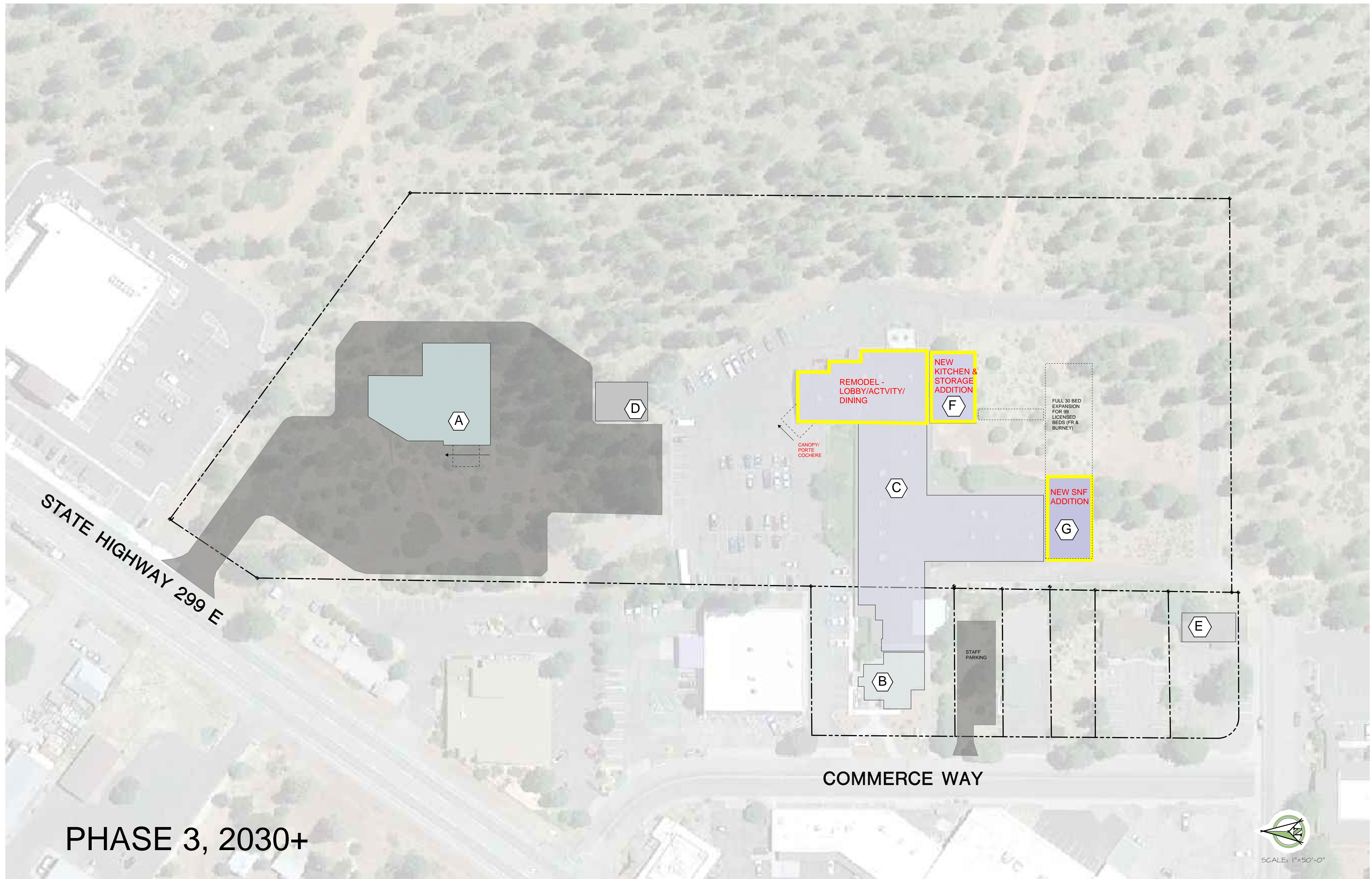
- BUILDING INVENTORY**
- NEW ASC/RHC BUILDING
 - CLINIC BUILDING
 - SKILLED NURSING FACILITY
 - NEW MAINTENANCE BUILDING
 - LAUNDRY BUILDING
 - KITCHEN ADDITION
 - SNF 18-BED ADDITION

PHASE 1, ~2023-2028

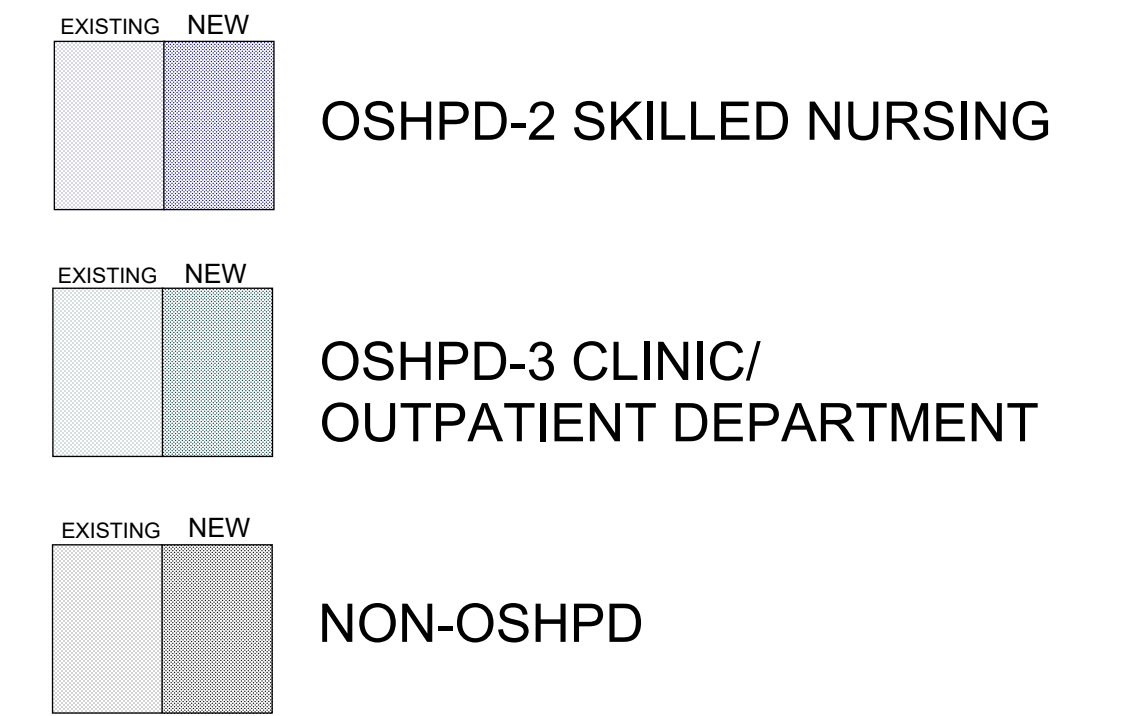


MAYERS MEMORIAL HEALTHCARE DISTRICT BURNEY CAMPUS - MASTER PLAN





BUILDING TYPE



BUILDING INVENTORY

- NEW ASC/RHC BUILDING
- CLINIC BUILDING
- SKILLED NURSING FACILITY
- NEW MAINTENANCE BUILDING
- LAUNDRY BUILDING
- KITCHEN ADDITION
- SNF 18-BED ADDITION

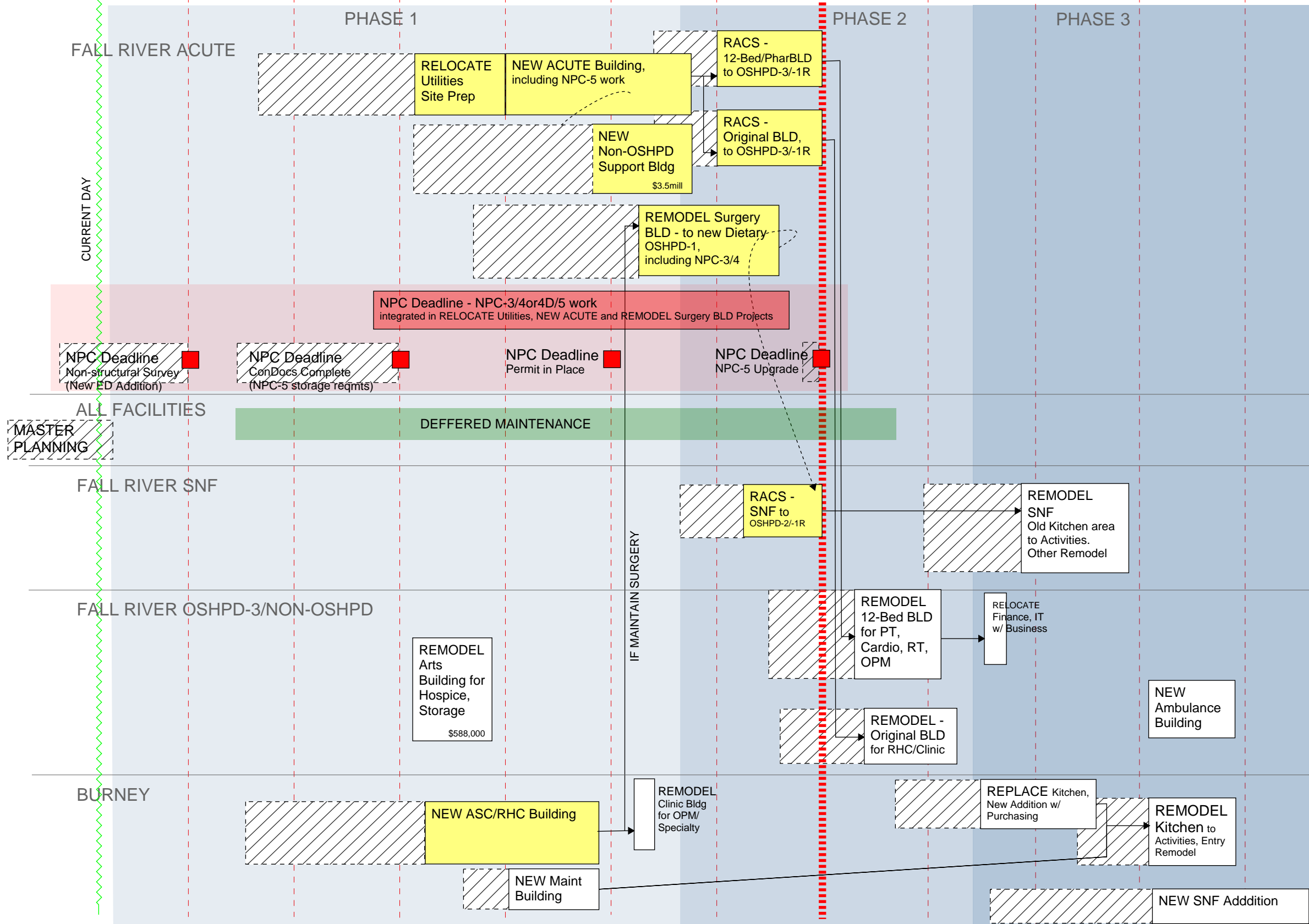
PHASE 3, 2030+

**MAYERS MEMORIAL
HEALTHCARE DISTRICT
BURNEY CAMPUS - MASTER PLAN**



Mayers Memorial Healthcare District Masterplan 2023 7.5 Phasing Chart

	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	2034
Annual TOTAL	\$ 50,000	\$ 988,800	\$ 5,686,800	\$ 21,380,900	\$ 29,996,700	\$ 30,898,110	\$ 10,311,390	\$ 10,046,500	\$ 402,500	\$ 8,198,050	\$ 9,343,500	\$ 3,834,000
TOTAL To Date	\$ 50,000	\$ 1,038,800	\$ 6,725,600	\$ 28,106,500	\$ 58,103,200	\$ 89,001,310	\$ 99,312,700	\$ 109,359,200	\$ 109,761,700	\$ 117,959,750	\$ 127,303,250	\$ 131,137,250



LEGEND			
	Design Time Frame		Construction Time Frame, 2030 critical
	Construction Time Frame		Seismic Mandate Milestone

7.6 Budgetary Discussion

Project budgets were assembled based on dollar per square foot estimates, as well as lump sum estimates in some cases. Comparative and historical project costs were used to develop the \$/sf cost factors used. No inflation was accounted for over years. See the following cost summary – Mayers Masterplanning Estimated Project Costs. A total of 47% additional is factored in at the end for soft costs – composed of contingencies, administrative costs (fees, testing, surveys/reports/studies, legal and project management), design services, and equipment/furniture.

Mayers Masterplanning Estimated Project Costs			sf	\$/sf	total	notes	only Seismic Required work
Construction							
New Acute Construction	New Addition	OSHPD-1	12,800	\$ 2,000	\$ 25,600,000		\$ 25,600,000
	New Addition Site	OSHPD-1		lump sum	\$ 5,000,000		\$ 5,000,000
	Connector Pieces	OSHPD-1	320	\$ 1,000	\$ 320,000		\$ 320,000
New Non-OSHPD	New Addition	non-OSHPD	3,200	\$ 750	\$ 2,400,000		\$ 2,400,000
RACS	12-Bed/Pharmacy BLD	OSHPD-1	6,000	\$ 150	\$ 900,000		\$ 900,000
	Original Hospital BLD	OSHPD-1	6,000	\$ 150	\$ 900,000		\$ 900,000
	SNF BLD	OSHPD-1	10,000	\$ 100	\$ 1,000,000		\$ 1,000,000
Remodel Existing Buildings	Remodel 12-Bed	OSHPD-3	5,300	\$ 750	\$ 3,975,000	includes cutting back building	
	Remodel Original	OSHPD-3	6,200	\$ 500	\$ 3,100,000		
	Remodel Surgery	OSHPD-1	5,250	\$ 1,200	\$ 6,300,000		\$ 6,300,000
SNF Remodel	FR SNF Remodel - Activities	OSHPD-2	1,500	\$ 500	\$ 750,000		
	FR SNF Remodel - misc	OSHPD-2	10,000	lump sum	\$ 1,000,000		
FR Out-Buildings	New Ambulance Building	non-OSHPD	2,000	\$ 200	\$ 750,000		
	Ambulance building remodel - or demo	non-OSHPD	2,000	\$ 50	\$ 100,000		
	Arts Building - remodel for Hospice, Storage, Meeting	non-OSHPD	4,000	\$ 100	\$ 400,000		
	FR Clinic Building Remodel - combine Finance/Business	non-OSHPD	4,300	\$ 50	\$ 215,000		
Burney Site	Burney ASC/RHC	OSHPD-3	11,000	\$ 1,000	\$ 11,000,000		\$ 11,000,000
	Burney site work	OSHPD-3		lump sum	\$ 3,000,000		\$ 3,000,000
	Burney clinic remodel - OPM/specialty	OSHPD-3	3,300	\$ 50	\$ 165,000		
	Burney SNF - kitchen/storage addition	OSHPD-2	3,000	\$ 1,200	\$ 3,600,000		
	Burney SNF - entry remodel/existing kitchen area remodel	OSHPD-2	3,000	\$ 1,000	\$ 3,000,000		
	Burney Maint Building	non-OSHPD	2,000	\$ 150	\$ 300,000	metal building	
	Burney SNF Addition - 16 bed	OSHPD-2	4,500	\$ 1,200	\$ 5,400,000		
Deferred Maintenance	Placeholder - HVAC upgrades, Generator requirements, etc	varies		lump sum	\$ 10,000,000		\$ 10,000,000
Construction SubTOTAL					\$ 89,175,000		\$ 66,420,000
Construction Contingency					15%	\$ 13,376,250	\$ 9,963,000
Admin Costs (Permit/Utility Fees, T&I, Site Survey/Reports/Studies, Legal, PM)					5%	\$ 4,458,750	\$ 3,321,000
Design Services					7%	\$ 6,242,250	\$ 4,649,400
Equipment (Med, Kitchen, FF&E, Communications)					15%	\$ 13,376,250	\$ 9,963,000
Owner Contingency					5%	\$ 4,458,750	\$ 3,321,000
subTOTAL						\$ 131,087,250	\$ 97,637,400
NPC Milestones	Non-structural eval	OSHPD-1		lump sum	\$ 50,000		
TOTAL						\$ 131,137,250	\$ 97,637,400

Appendices

Mayers Memorial Healthcare District Masterplan 2023 APPENDIX A

updated 6/22/2023	notes	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	2034
Annual TOTALS	using 47% as the soft cost total	\$ 50,000	\$ 988,800	\$ 5,686,800	\$ 21,380,900	\$ 29,996,700	\$ 30,898,110	\$ 10,311,390	\$ 10,046,500	\$ 402,500	\$ 8,198,050	\$ 9,343,500	\$ 3,834,000
Total Spent to date		\$ 50,000	\$ 1,038,800	\$ 6,725,600	\$ 28,106,500	\$ 58,103,200	\$ 89,001,310	\$ 99,312,700	\$ 109,359,200	\$ 109,761,700	\$ 117,959,750	\$ 127,303,250	\$ 131,137,250
Fall River - required													
Planning/Design & Construction - New Acute Building	5% design over 3 years, construction over 2 years		\$ 388,800	\$ 388,800	\$ 518,400	\$ 18,403,200	\$ 18,403,200						
Planning/Design & Construction Site, Utilities	design year 1, partial site year 2, remainder year 3		\$ 250,000	\$ 1,420,000	\$ 5,680,000								
Planning/Design & Construction Non-OSHPD Building						\$ 120,000	\$ 3,408,000						
Planning/Design & Construction RACS 12-Bed						\$ 45,000		\$ 1,278,000					
Planning/Design & Construction RACS Original						\$ 45,000		\$ 1,278,000					
Planning/Design & Construction RACS SNF						\$ 50,000		\$ 1,420,000					
Planning/Design & Construction Remodel of Surgery	design over 2 years, construction over 1.5 years				\$ 157,500	\$ 157,500	\$ 5,904,360	\$ 3,041,640					
NPC Deadline items		\$ 50,000											
Burney ASC/RHC Building													
Planning/Design & Construction Burney Site work			\$ 75,000	\$ 75,000	\$ 4,260,000								
Planning/Design & Construction New ASC/RHC Burney	design over 2 years, construction over 2 years		\$ 275,000	\$ 275,000	\$ 7,810,000	\$ 7,810,000							
Fall River - other													
Design/Construction - Remodel of 12-Bed	5% for design costs 1st year, rest soft costs next year							\$ 198,750	\$ 5,644,500				
Design/Construction - Remodel of Original Building	5% for design costs 1st year, rest soft costs next year							\$ 155,000	\$ 4,402,000				
Design/Construction - Remodel of SNF	5% for design costs 1st year, rest soft costs next year									\$ 87,500	\$ 2,485,000		
Relocate Finance and IT to old Clinic Building											\$ 316,050		
Remodel Arts Building				\$ 588,000									
New Ambulance Building, and remodel existing												\$ 1,249,500	
Burney - other													
Design/Construction - Remodel of Clinic for OPM/Specialty							\$ 242,550						
Design/Construction - Kitchen Addition, Replacement Burney SNF	5% for design costs 1st year, rest soft costs next year									\$ 180,000	\$ 5,112,000		
Design/Construction - new Maintenance Building	5% for design costs 1st year, rest soft costs next year				\$ 15,000	\$ 426,000							
Design/Construction - Remodel Kitchen, Entry Addition	5% for design costs 1st year, rest soft costs next year									\$ 150,000	\$ 4,260,000		
Design/Construction - SNF Addition 18-bed	design over 2 years, construction over 1.5 years									\$ 135,000	\$ 135,000	\$ 3,834,000	\$ 3,834,000
All - deferred maintenance													
HVAC Upgrades - FR 12-Bed, Original Building, SNF			\$ 2,940,000	\$ 2,940,000	\$ 2,940,000	\$ 2,940,000	\$ 2,940,000	\$ 2,940,000					

Note: No annual infaltion included in numbers - all costs areestimated at 2023 numbers

Appendix B

Facility Condition Assessment Reports

- Structural
- Civil
- Mechanical/Plumbing
- Electrical



Mayers Memorial Hospital District, Master Planning – Structural Narrative

The Mayers Memorial Hospital District consists of the Mayers Memorial Hospital (Hospital) campus located at 43563 Highway 299E in Fall River Mills, a skilled nursing facility (SNF) located at 20647 Commerce Way in Burney, and the Mayers Rural Health Center (Clinic) located at 20641 Commerce Way in Burney, as well as several other off-site buildings for commercial pharmacy, storage, and laundry. The information outlined in this narrative is based on available drawings and a site walk conducted on Tuesday, December 6, 2022. This report will focus on the Hospital, SNF and Clinic buildings. All other buildings are governed by the local jurisdiction.

Mayers Memorial Hospital, Fall River Mills

The Hospital consists of approximately 40,000 square feet of OSHPD 1 space. All buildings are single story without basement with construction spanning from 1953 to 2021:

- The original hospital building (BLD-02327) was constructed in 1953. Drawings are not available for this construction. This portion of the campus was recently demolished.
- An unnamed addition was constructed onto the original hospital building in the early 1970's without a seismic joint. Architectural drawings for this construction are available but no structural drawings were available. This Additions portion of BLD-02327 has not been demolished. The building consists of exterior masonry shearwalls with ½" plywood roof sheathing supported by 2x10 roof joists and 4" concrete slab-on-ground floor. Interior wood bearing walls are present along the corridors with full height 5/8" gypsum board sheathing on the corridor side.
- The Middle Wing addition (initial part of BLD-02328) was constructed in 1976 with a 2" seismic joint to BLD-02327. Architectural and structural drawings for this construction are available. The building is framed similar to BLD-02327 and consists of exterior masonry shearwalls with ½" plywood roof sheathing supported by 2x10 roof joists and 4" concrete slab-on-ground floor. Interior wood bearing walls are present along the corridors, but the gypsum board sheathing only extends to the ceiling on both sides of the walls. A few interior transverse plywood sheathed walls are present and include holdowns.
- The Long Term Beds addition (extension of BLD-02328) along with the kitchen and dining area was constructed in 1981 without a seismic joint. Architectural and structural drawings for this construction are available. The building is framed similar to BLD-02327 and consists of exterior masonry shearwalls with ½" plywood roof sheathing supported by 2x10 roof joists and 4" concrete slab-on-ground floor. Interior wood bearing walls are present along the corridors, but the gypsum board sheathing only extends to the ceiling on both sides of the walls. Interior transverse plywood sheathed walls are present and include holdowns.

- The Surgery/O.B. Additions (BLD-02329) was constructed in 1981 with a 2” seismic joint to BLD-02327. Architectural and structural drawings for this construction are available. The building consists of exterior masonry shearwalls with ½” plywood roof sheathing supported by 2x10 roof joists. However, unlike previous construction, the roof joists are supported by glulam beams spanning between wood posts along the length of the building. The floor consists of a 4” concrete slab-on-ground. Interior transverse plywood sheathed walls are present and include holdowns.
- The Pharmacy at 12 Bed Addition (BLD-02332) was constructed in 1987 with a seismic joint to BLD-02327. Architectural and structural drawings for this construction are available. The building is framed similar to BLD-02327 and consists of exterior masonry shearwalls with ½” plywood roof sheathing supported by 2x10 roof joists and 4” concrete slab-on-ground floor. Interior wood bearing walls are present along the corridors with gypsum board sheathing appearing to extend to the roof on both sides of the walls. Interior transverse plywood sheathed walls are present and include holdowns.
- The Emergency Department Expansion (BLD-05334) and Connector (BLD-06253) were constructed in 2020 with a seismic joint to BLD-02332. Full construction documents are available. The building is framed with steel beams and columns with buckling restrained braced frames to resist seismic forces.

Seismic Compliance Considerations @ Fall River Mills Hospital

All buildings except the Original Hospital are structurally compliant with the provisions of the Alquist Hospital Facilities Seismic Safety Act. The Original Hospital is rated Structural Performance Category (SPC) 2 and will require a seismic evaluation and structural strengthening to be completed by January 1st 2030, or the building should be removed from acute care service.

All buildings except the Emergency Department Expansion and Connector are rated Nonstructural Performance Category (NPC) 2. As such, the nonstructural components (medical, mechanical, electrical equipment, distribution systems, etc.) must be evaluated and seismically anchored by January 1, 2030, or the buildings should be removed from acute care service. If any of the NPC-2 buildings are anticipated to be used for acute care service beyond 2030, there are intermediate deadlines for these NPC-2 buildings:

- A Nonstructural Evaluation Report must be submitted by January 1, 2024
- Construction Documents must be submitted to HCAI by January 1, 2026
- A building permit must be obtained to begin construction by January 1, 2028

Additionally, the campus must achieve an NPC-5 rating by January 1, 2030. This requirement will enable the hospital facility to support 72 hours of emergency operations during widespread damage caused by a major earthquake. This means the campus will need to be able to provide water and store wastewater and fuel. While the Emergency Department building currently meets the NPC-5 requirements, any portion of the older campus that is intended to remain beyond 2030 will need to have water, wastewater and fuel storage needs met. Additionally, an intermediate deadline to identify the water, wastewater and fuel storage needs must be submitted to HCAI by January 1, 2024.

Skilled Nursing Facility, Burney

The SNF (BLD-05268) consists of approximately 30,000 square feet of OSHPD 2 space. The building is a single-story without basement. Architectural and structural drawings for this construction are available. The structure consists of exterior 2x6 wood framed bearing shearwalls, interior wood bearing walls along with wood and steel posts supporting glulam beams. Roof framing consists of 5/8" plywood sheathing supported by TJI roof joists.

Seismic Compliance Considerations @ SNF in Burney

The SNF does not have any structural seismic compliance requirements.

The SNF does have a requirement to provide an alternative source of power. This requirement is a recent requirement mandated by Assembly Bill (AB) 2511 passed in 2022. AB 2511 requires that SNFs have an alternative source of power to protect resident health and safety for no fewer than 96 hours for power outages that may result from a public safety power shutoff, an emergency, a natural disaster, or other cause. An alternative source of power is defined as a source of electricity that is not received through an electric utility, but is generated or stored onsite, which may include, but is not limited to emergency generators using fuel, large capacity batteries, and renewable electrical generation facilities. The Centers for Medicare & Medicaid Services (CMS) may have additional certification requirements that will still need to be met by a SNF. These requirements are enforceable by the California Department of Public Health (CDPH) by January 1, 2024.

Mayers Rural Health Clinic, Burney

The Clinic consists of approximately 3,000 square feet of OSHPD 3 space. The building is a single-story without basement. Architectural and structural drawings for this construction are available. The structure consists of exterior 2x6 wood framed bearing shearwalls, interior wood bearing walls along with wood and steel posts supporting glulam beams. Roof framing consists of 5/8" plywood sheathing supported by 2x12 and LVL roof joists.

Seismic Compliance Considerations @ SNF in Burney

The Clinic does not have any structural or nonstructural seismic compliance requirements.



JN 19746

June 5, 2023

Nate Morgan
Aspen Street Architects, Inc.
PO Box 370
Angels Camp, CA 95222

Project Title: Mayers Memorial Hospital District
Properties Site Assessment – Shasta County

Dear Nate:

On December 6, 2022, the AEC team of Aspen Street Architects, Inc. visited various sites owned by the Mayers Memorial Hospital District in Shasta County for the purpose of assessing their facilities for future master planning. RICK Engineering's task is to provide site evaluation of the properties, particularly the hospital at Fall River Mills, CA and the skilled nursing facility at Burney, CA. Our evaluation included determination of zoning designation, stormwater quality requirements and utility service providers.

The following is the site assessment of the District's properties.

Mayers Memorial Hospital – 43563 CA-299 (NB), Fall River Mills, CA:

Hospital

- APN 018-200-048
- Area = 11.2± acres
- Zoning Designation – PF: Public facilities district

Vacant lot

- APN 018-200-047
- Area = 1.5± acres
- Zoning – PF: Public facilities district
- FEMA map - Portions of property in flood zone F-2 (Zone A)
 - FIRM 06089C0500G (eff 3/17/2011)

Hospital

The property is situated northwest of the Pit River, southeast of highway 299 and across the street from Fall River Mills Seventh Day Adventist church. Within the property, there are various buildings in addition to the hospital. The grounds surrounding the hospital is mostly paved. The access road at the rear of the hospital, from the doctor's sleep house to the physical therapy building, is unpaved. Along the rear of the hospital, just behind the physical therapy building, the maintenance building and the doctor's sleep house, is a valley that leads to the Pit River. Along the highway frontage, there is a well-defined roadside ditch.

Vacant lot

Southwest of the hospital is a vacant lot, also owned by the District. This property appears to be currently being used as a walking path exercise loop when weather conditions permits.

Utility Services Background:

The engineering department of the hospital has provided us with all the available record drawings. We have also acquired sewer and water plans from Fall River Valley Community Services District (FRVCSD), along with gas and electric maps from Pacific Gas & Electric. We have reviewed all available records and compiled a composite schematic layout of all existing utilities within the site and along the project frontage in AutoCAD format. A schematic plan of the existing utilities is attached with this report.

The city's 8" watermain runs along the south side of highway 299. Record shows that fire and domestic water service connections are located across from the administration building on the north side of the property. There is also an existing city watermain located in a 10' water easement between the hospital property and the vacant lot. This city watermain is primarily used for fire service for the recent building expansion.

The city's 8" sewer main is also located along the south side of highway 299, just south of the watermain. There are three (3) sewer connection points on the sewer main for Mayers Hospital – the north connection services the physical therapy building, the ambulance building, and possibly the administration building (there are no records showing where the sewer connection for this building); the middle connection services the main hospital building; and the southern connection services the recent building expansion.

There are 2 independent drainage system in the property. The north drainage system collects stormwater runoff from the parking lot between the administration building and the physical therapy building. This system drains into the valley of the Pit River. The south drainage system is a collection of drainage swales, curb and gutters and a small bioretention that accepts stormwater runoff from some of the pavement area at the recent building expansion. Most of the south drainage system discharges into the roadside ditch along highway 299 via underground drainage pipes or concrete swales (curb and gutter). The remainder of the property appears to be simply sheet flowing to discharge either to the roadside ditch or into the Pit River.

The record drawings provided by the hospital appear to be incomplete. There are standalone buildings that do not show any sewer and/or water connections. The physical therapy building, and the ambulance building do not have record drawings that show a water connection, and there are no record drawings for the administration building and the maintenance building that show sewer or water connections.

Utility Services Recommendations:

The site master plan for the Mayers Memorial campus at Fall River Mills is a combination of building expansion and reclassification of existing facilities. The building expansions will be located to the rear of the existing building. A new acute facility and new support building are planned. To service these buildings with water and fire water, it is recommended that a water loop (one for domestic; one for fire; or one for both) be constructed around the buildings. It will be connected to the city's watermain at two points. This will ensure stable pressure throughout the system. This will also allow separate services for each building.

Although the city's sewer main runs along the frontage of the property, it appears to be shallow to service the rear of the buildings. A lift station maybe required for the new builings.

Similar to the building expansion in 2020, the construction of the new buildings will need to comply with the city's and county's stormwater quality requirements. Depending on what the approving agencies will allow, this can be accomplished by above ground bioretention or underground infiltration chambers. The above ground bioretention can be placed in the open space area between the maintenance building and the

physical therapy building. The underground infiltration chambers can be placed in the open space area or under the pavement.

Burney Skilled Nursing Facility – 20641 Commerce Way, Burney, CA:

Clinic

- APN 028-340-046
- Area = 0.5± acres
- Zoning – C-O: Office Commercial District

Skilled nursing facility

- APN 028-370-022
- Area = 9.2± acres
- Zoning – TL: Timberland District

Vacant lot

- APN 028-340-025
- Area = 0.2± acres
- Zoning – C-O: Office Commercial District

Clinic

This property is situated on the east side of Commerce Way, south of the United State Postal Service. North of the building is the access driveway to the facility with patient parking; to the east is the connected skilled nursing facility; and immediately to the south is the access driveway for the skilled nursing facility.

Skilled nursing facility

This property is situated to the east side of the recently remodeled clinic. North of the building is the facility's parking lot and an open space the extends to highway 299; to the east is a vacant open space; to the south is an access driveway with its main function appearing to be a fire access.

Vacant lot

This property is a vacant lot south of the recently remodeled clinic.

Utility Services Background:

Similar to the Mayers Memorial Hospital at Fall River Mills, the engineering department of the hospital provided us with all the available record drawings. We also acquired gas and electric maps from Pacific Gas & Electric. We also reached out to Burney Water District to request their facilities map in the vicinity of the project, but they never returned our inquiry and our follow up inquiries. We have reviewed all available records and compiled a composite schematic layout of all existing utilities within the site and along the project frontage in AutoCAD format. A schematic plan of the existing utilities is attached with this report.

There is an existing city watermain and sewer main along Commerce Way. We are not certain if the watermain and sewer exist along highway 299. The drainage system on the property appears to be a system of shallow drainage pipes and swales that discharge into the open space to the north.

Site Recommendations:

The site master plan for the Skilled Nursing Facility campus at Burney will extend the developed property to the open space area to the north of the Skilled Nursing Facility, together with an expansion of the existing Skilled Nursing Facility building southward. The extension to the north will have a driveway access through highway 299 and a secondary access through the existing parking area. Driveway connection on highway 299 may require CalTrans approval.

Utility service connections, if they exist, will be through highway 299. If they do not exist, then utility services will be from Commerce Way through the existing parking area.

The drainage system will be similar to the recommendations for campus in Fall River Mills. It will need to comply with the city's and county's stormwater quality requirements. Above ground bioretention or underground infiltration chambers will be needed. The existing drainage system will need to be reconfigured to modify its discharge point.

The other properties visited are summarized below:

Storage Building & Gift Shop – 43514 CA-299 & 43504 CA-99 (SB), Fall River Mills, CA:

Storage building

- APN 018-200-014
- Area = 0.5± acres
- Zoning – C-M-DR: Commercial-Light Industrial District (Design Review District)

Gift shop

- APN 018200-044
- Area = 0.6± acres
- Zoning – C-M-DR: Commercial-Light Industrial District (Design Review District)

Storage Building

The property is situated approximately 500 feet southwest of the hospital and northwest of highway 299. The site is flat and appears to be at-grade with, if not lower than, the highway. The ground surrounding the building appears to be unpaved and no observable drainage system. The highway frontage is all driveway, and there are no signs of a roadside ditch. The building's finish floor is at-grade with the site.

Gift Shop

The property is situated southwest of the storage building in the adjoining lot and northwest of highway 299. The site is similar in characteristics as the storage building site – flat, lower than the highway, unpaved and no observable drainage system. There are two buildings within the property – the gift shop and a storage shed in the rear. Unlike the storage building, the gift shop's finish floor is set higher than the surrounding grade and the storage shed's finish floor is at-grade with the site.

Pharmacy – 43471 CA-299 (NB), Fall River Mills, CA:

- APN 018-290-041
- Area = 0.6± acres
- Zoning – C-2: Community Commercial District

The property is situated approximately 700 feet southwest of the gift shop and southeast of highway 299. The site is flat and mostly paved. There is a well-defined roadside ditch along the highway frontage. The building's finish floor is at-grade with the site.

The Lodge – 24500 Pit One Powerhouse Road, Fall River Mills, CA:

The lodge

- APN 023-340-029
- Area = 2.0± acres
- Zoning – C-R: Commercial Recreation District

Private access road

- APN 023-340-026
- Area = 0.5± acres
- Zoning – C-R: Commercial Recreation District

Faculty housing

- APN 023-210-062
- Area = 6.6± acres
- Zoning – C-R: Commercial Recreation District

Maintenance building

- APN 023-340-028
- Area = 35.4± acres
- Zoning – C-R: Commercial Recreation District
- Portion of property in flood zone F-2 (Zone A)
 - FIRM 06089C0775G (eff 3/17/2011)

The lodge

The property is situated at the end of Pit No. 1 Powerhouse Road off highway 299. The site is situated on a foothill with grades ranging from mildly sloping to flat terrain. The site is mostly open space with well-maintained landscaping. Pavement is on drive aisles and the parking lot only.

Private access road

The property is the private access road to the lodge at end of Pit No. 1 Powerhouse Road.

Faculty housing

The property is on the northwest area of the private access road. All site characteristics is the same as the lodge property.

Maintenance building

This property is on the southwest area of the private access road. All site characteristics is the same as the lodge and the faculty housing properties.

There are no signs of organized parking facilities in the properties. At the lodge, there are no accessible parking however, there is a ramp to the lodge with a sign intended for accessible path of travel.

Laundromat – 20597 Commerce Way, Burney, CA

- APN 028-340-022
- Area = 0.3± acres
- Zoning – C-O: Office Commercial District

This property is situated at the northeast corner of Commerce Way and Enterprise Drive. The site has a noticeable slope from northeast to southwest. The building is located on the east side of the property (high side) and the paved parking lot covers most of the site. The building's finish floor is set higher than the parking lot.

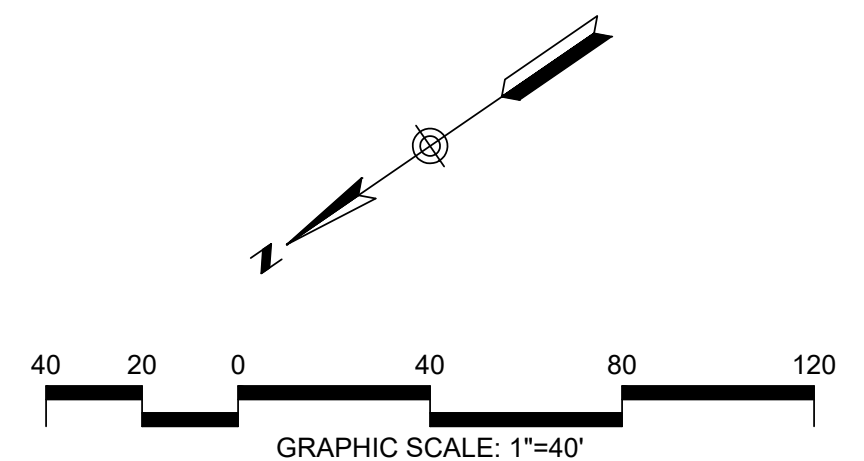
Entrance to the building is through steps and ramps in the front (south side) and east side of the building. Just by observation, without physical measurement, the ramps appear to be ADA compliant. However, the east entrance steps and ramp does not have railings. Finally, the accessible parking space does not appear to be in compliance with the ADA requirements.

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LEGEND

BOUNDARY	—
BUILDING	—
SANITARY SEWER	— S —
WATER	— W —
STORM DRAIN	—
GAS	— G —
UNDERGROUND ELECTRICAL	— E —
OVERHEAD ELECTRICAL	— OHE —
TV	— CATV —
TELEPHONE	— T —
DITCH	—



EXISTING UTILITY SCHEMATIC PLAN

RICK
ENGINEERING COMPANY
2525 EAST BIDWELL ST
FOLSOM, CA 95630
916.638.8200
rickengineering.com

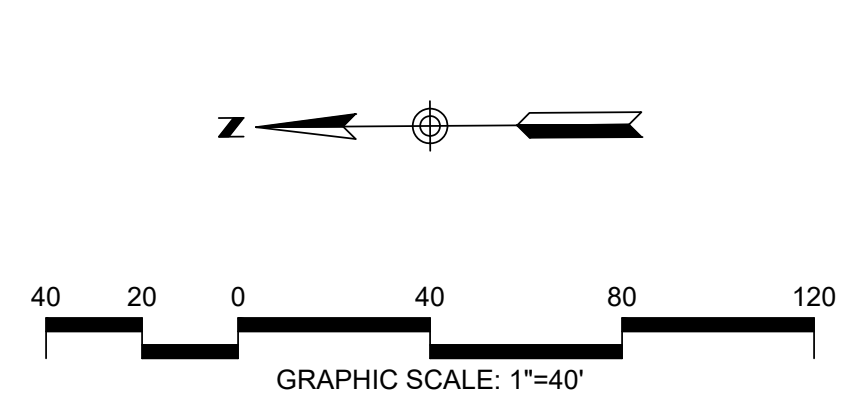
MAYERS MEMORIAL HOSPITAL
43563 CA-299(NB),
FALL RIVER MILLS, CA
PROJECT NO: 19746 SCALE: 1" = 40'
DRAWN BY: JCW DATE: 6/21/2023

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LEGEND

BOUNDARY	———
BUILDING	———
SANITARY SEWER	——— S ——
WATER	——— W ——
STORM DRAIN	——— SD ——
GAS	——— G ——
UNDERGROUND ELECTRICAL	——— E ——
OVERHEAD ELECTRICAL	——— OHE ——
TV	——— CATV ——
TELEPHONE	——— T ——
DITCH	——— D ——



EXISTING UTILITY SCHEMATIC PLAN

	2525 EAST BIDWELL ST FOLSOM, CA 95630 916.638.8200 rickengineering.com	BURNEY SKILLED NURSING FACILITY 20641 COMMERCE WAY, BURNEY, CA
	PROJECT NO: 19746 SCALE: 1" = 40' DRAWN BY: JCW DATE: 6/21/2023	

Mayers Memorial Hospital District Mechanical and Plumbing Systems Assessment Fall River Mills, CA and Burney, CA

Prepared by: Nexus Engineering
For Aspen Street Architects

Introduction

Based on an initial December 2022 walkthrough of the campus sites at Fall River Mills and Burney, as well as available existing plans, the following report describes the existing HVAC and plumbing systems and their observed conditions. The purpose of this report is to gain a general understanding of the HVAC and plumbing systems to inform subsequent master planning recommendations for future expansion, remodeling, and/or change of use of each building.

A. Existing Buildings

See architectural narrative for overview of building locations.

1. Fall River Hospital (and outbuildings/structures/utility services)
 - a. 1972 Addition to Original Hospital Building (part of BLD-02327) current acute-care wing, and ICU addition
 - b. 1976 Addition (Middle Wing/SNF, part of BLD-02328)
 - c. 1980 Additions (Dietary – part of BLD-02328, Surgery BLD-02329, SNF Patient Rooms – part of BLD-02328)
 - d. 1983 Pharmacy & 12-bed Addition (BLD-02332)
 - e. 1987 ICU & PT Additions (ICU – part of BLD-02327, PT – part of BLD-02328)
 - f. 1993 Freezer (part of BLD-02328)?
 - g. 2020 Expansion (BLD-05334 ED Expansion Building, BLD-06254 Drop Off Canopy, BLD-06253 Connector)
 - h. BLD-06969 Water Tank
 - i. BLD-06970 Water Tank Pump Enclosure
 - j. New Med Gas Enclosure
 - k. Oxygen Storage Yard (older)
 - l. Vacuum Pump shed?
2. Fall River Admin Building
3. Fall River Ambulance Building
4. Fall River Clinic Building
5. Fall River Physician Sleep House
6. Fall River Maintenance and Engineering/ IT Office Building
7. Fall River Metal Storage Building
8. Fall River Retail Pharmacy (off-campus)
9. Fall River Thrift Shop and Storage Building (off-campus)
10. Lodge & Site
11. Burney Skilled Nursing Facility Annex (BLD-05268), includes the medgas building/shed in rear
12. Burney Clinic
13. Burney Laundry Building (off-campus)
14. Burney Vacant lots on either side of the SNF

B. HVAC & Plumbing Systems by Building

- I. [OSHPD 1] Original Hospital and Additions through 1993
 - a. Mechanical systems for the original hospital and the subsequent additions in this area followed the same approach of rooftop packaged gas/elec units with final filters and ductwork down into the attic space. There are approximately 26 rooftop units. Due to snow on the sloped rooftops, nameplate data was not gathered, however most of these units appear to be beyond the typical expected life span, and future remodels should expect replacement. There is one fully compliant rooftop unit newly installed under the 2022 Demolition project serving the original Med Surg area.
 - i. Emergency power requirements for HVAC equipment appears to be out of compliance for minimum heat and air balance to patient care spaces (units on normal power), except for the one unit installed in 2022.
 - ii. Filter banks appear to comply with code.
 - iii. Required Fire/Smoke dampers at exit corridor wall penetrations were observed missing in some locations.
 - b. Plumbing systems:
 - i. The sanitary sewer system is an 8" vitrified clay main on existing plans. It is not connected to the emergency sewer storage provided in the ED expansion.
 - ii. The domestic water supply system is a 3" main, and this is a separate building connection from the ED expansion.
 - iii. Multiple water heaters are spaced throughout, and none have compliant redundancy. Equipment is aged, and recirculation is also limited to non-existent.
 - iv. The main natural gas supply is 4" pipe size, independent from ED expansion. The gas meter appears new.
 - c. Medical Gas
 - i. Vacuum system is 40+ years old but functional. It is independent of ED Expansion.
 - ii. Oxygen is fed from an existing bulk liquid source behind the building with a 3/4" underground line. It is independent of the ED Expansion. A Master Alarm Panel replacement project was pending at the time of the site survey and is expected to bring the alarms up to code.
- II. [OSHPD 1] 2020 ED expansion & Associated Utilities
 - a. Mechanical systems for this area are new and generally meet current codes. Rooftop DX air handlers (16 tons each) with gas furnaces feed air with compliant filters to constant air volume terminal boxes with reheat coils served by a heating hot water system. The heating hot water system has two 400 mbh boilers with two primary and two secondary pumps. All air handlers, exhaust fans, and AC units were installed with OSP for seismic approval.
 - b. Medical gas systems include a liquid dewar O2 medical gas system with primary and secondary headers (4 dewars connected and 4 in standby storage) and a high pressure cylinder reserve (4 total M250 size cylinders). Compressors for Medical Air (7 scfm at 50 psi) and Vacuum (16 scfm at 19" Hg) are located in a dedicated room, and all medical gas sources, alarms, valves, and outlets were certified NFPA 99 compliant at time of installation.
 - c. Plumbing systems include a 4" water supply main from the metered campus connection. There are redundant gas water heaters (100 cfh each) with recirculation and compliant mixing with alarm. Sanitary sewer connects to the existing 8" main on campus. Pipe materials are compliant.
 - d. Emergency water storage system: Installed to comply with CPC 615.4

- requirements for 72 hours standby water supply. The system capacity is sufficient for up to 33 licensed beds (5000 gallons).
- e. Emergency sewer storage system: A 500 gallon 72"ø precast manhole system provides emergency standby sewer storage. According to calculations that include offsite transport capability, the system allows for 5,056 gallon capacity over 72 hours for 6 beds. This capacity requires evaluation if future expansion involves more than 6 beds, but may be sufficient for additional beds without modification.
- III. [Non OSHPD] Fall River Admin Building (1986 and 1994 addition)
- a. Mechanical Systems: Two split AC units (ground mount) with gas furnaces provide heating and cooling to the building. Equipment is relatively new and requires no upgrades.
 - b. Plumbing Systems: An electric water heater serves the building without recirculation. Plumbing systems are relatively new and require no upgrades.
- IV. [Non OSHPD] Fall River Ambulance Building
- a. Mechanical Systems: A split AC with gas furnace at the main level provides heating and cooling to the occupied space above. A newer through-wall unit supplements conditioning to the same space. A gas space heater serves the ambulance garage. The equipment appears to be somewhat aged but functional, and the locations are easily accessible for future replacement.
 - b. Plumbing Systems: Plumbing systems appear adequate. A natural gas water heater provides hot water to the space.
- V. [Non OSHPD] Fall River Clinic Building
- a. Mechanical Systems: Rooftop gas/electric units provide heating and cooling to the building through attic ductwork. Based on appearance and date of plans, the equipment appears to be obsolete. Replacement should be considered for any proposed remodel.
 - b. Plumbing Systems: Plumbing systems appear adequate but original to the building. Two natural gas water heaters provide non-recirculated hot water to each half of the building respectively. The water heaters are in exterior-accessible locations and can be easily replaced without disruption to the occupants.
- VI. [Non OSHPD] Fall River Physicians Sleep House
- a. Mechanical Systems: Wall mounted mini-split heat pumps provide conditioning. The HVAC is relatively new and requires no upgrades.
 - b. Plumbing Systems: Water supply appears to be a nearby well. Hot water source was not observed, but systems are relatively new and require no upgrades.
- VII. [Non OSHPD] Fall River Maintenance and Engineering/IT Office Building
- a. Mechanical Systems: A gas space heater serves the main level shop. The upper level is served by a wall mounted mini split heat pump. Systems appear relatively new and require no upgrades, however distribution may be lacking for good temperature control.
 - b. Plumbing Systems: An air compressor provides shop air. A single washup sink is plumbed.
- VIII. [Non OSHPD] Fall River Metal Storage building
- a. No HVAC or Plumbing systems.
- IX. [Non OSHPD] Fall River Retail Pharmacy
- a. Mechanical Systems: A ground mounted split AC with furnace provides heating and cooling to the building. The condition appears adequate without necessary upgrades.
 - b. Plumbing Systems: A gas water heater serves the building and appears relatively new without requiring upgrades.
- X. [Non OSHPD] Fall River Thrift Shop and Storage Building

- a. Mechanical Systems: A roof mounted split AC with furnace provides heating and cooling to the building. Not observed during visit.
 - b. Plumbing Systems: Not observed during visit. Assumed adequate.
- XI. [Non OSHPD] Lodge and Site
- a. Mechanical Systems: A combination of mini split heat pump and central underfloor HVAC provide conditioning to the space. The kitchen has a relatively new grease exhaust fan for the cooking line. No known deficiencies, but any upgrades may present challenges. Modern wall-mount ductless split heat pumps have been added to dwellings throughout the site.
 - b. Plumbing Systems: In the main lodge, a propane tankless water heater and tank type water heater were observed. Pipes are generally surface mounted PEX combined with copper and steel pipe. Health code may require upgrades to the hot water in the kitchen if a remodel was proposed. Dwellings throughout the site have no known deficiencies.
- XII. [OSHPD 2] 1992 Burney Skilled Nursing Facility Annex
- a. Mechanical Systems: Typical AC unit is rooftop packaged gas electric with ducts down to attic with accessible final filters, emergency power, and smoke detector shutdown as required. Roof exhaust fans throughout are also on emergency power as required. The kitchen has exhaust and gas heat makeup with split AC cooling. Equipment is aging, but replacement can generally be done easily at the roof on a case by case basis. Upgrades are not anticipated for OSHPD 2 use.
 - b. Plumbing Systems: Sanitary sewer is a 6" main. A small area of fixtures have a 4" sanitary sewer connection through the adjacent clinic, independent of the main SNF connection. The main domestic water supply is 3" and independent of the adjacent clinic. Water heaters are redundant (400 MBH, 225 gal each) with mixing valve and alarms as required. 140°F water is supplied to the kitchen separate from the 120°F main distribution. Hot water recirculation is compliant. Distribution is compliant. Water heaters are aging and should be expected to be replaced. Natural gas is a 5" main, independent of the adjacent Clinic. Code upgrades are not anticipated for OSHPD use.
 - c. Medical Gas Systems: A medical vacuum compressor appears to be duplex and NFPA 99 compliant. Oxygen appears to be NFPA 99 compliant and is supplied with a liquid dewar primary supply (5 total available) with high pressure M250 cylinder reserve (6 total available). Medical air is shown on plans for future connection but was not observed to be installed at present time. Installed alarm panels and zone valves appear compliant. Code upgrades are not anticipated for OSHPD use.
- XIII. [OSHPD 3] 2019 Burney Clinic (connected to SNF Annex via 2-hour separation)
- a. Mechanical Systems: Existing HVAC was completely replaced with two split AC units with attic mounted gas furnaces, booster fans, and final filter banks serve the remodeled space. The single central exhaust fan is inline type, but not located at the terminal end of the duct system per code. There is about 20 feet of duct between the fan discharge and the wall exhaust louver. No emergency power is required. There is a Honeywell internet-connected building management system for HVAC control and monitoring. Upgrades are not anticipated for OSHPD 3 use.
 - b. Plumbing Systems: The 4" sanitary sewer main also serves a small portion of the SNF upstream, and the pipe section within the Clinic remodel was replaced. The domestic water supply is a 1-1/2" main separate from the SNF. Water heaters are redundant (76 MBH, 50 gal each) with mixing valve and alarms as required. Hot water recirculation is compliant. Distribution is compliant. Natural gas is a 1-1/2" main independent of the adjacent SNF. Code upgrades are not anticipated for OSHPD use.

- c. Medical Gas Systems: None.

XIV. [Non OSHPD] Burney Laundry Building

- a. Existing plumbing and mechanical systems are relatively new and compliant. A natural gas water heater serves the washing machines.

C. Master Plan Design

Based on the latest master plan proposals (4/20/23), the following are proposed modifications for the HVAC and plumbing systems.

I. Fall River:

- a. **Mechanical:** The existing mechanical systems are generally independent and can be isolated from one area to the next, however equipment age & condition is not recommended to remain as existing:

- i. The age of all packaged AC units except the 2020 ED expansion area will continue to be a challenge to maintain. R-22 refrigerant in the units will be an ongoing risk in terms of upkeep cost and potential down-time, and present equipment lead times are making emergency replacements essentially impossible. It is strongly recommended to replace all existing packaged AC units in these areas.

ii. Area E (Old Surgery Wing)

1. Existing rooftop units do not have emergency power, and this will need to be upgraded to remain OSHPD-1.
2. If the operating rooms are used for orthopedic surgery or bone marrow/organ transplants, a second final filter bank with HEPA filters will be required to be added.
3. New AC units will require seismic certification and fan power to suit the filter requirements.

iii. New Area A – Acute Care

1. New equipment recommended to replicate the approach on the 2020 ED project. The ED project boilers & air handlers were not designed for future expansion.

iv. New Area B – Support Building

1. As non OSHPD, would not require seismic certified equipment. Standalone packaged AC units would suffice.

b. **Plumbing:**

- i. Existing domestic water systems can remain with the following exceptions:

1. Area E currently is fed domestic water underground from the adjacent Area F, which is non-compliant. The area will require new cold water & hot water feeds from the new proposed Area A instead.
2. Areas C, D, and F all have non-compliant hot water systems and must be upgraded for any OSHPD use. This will require a new domestic hot water system with dual gas water heaters, a thermostatic mixing valve, alarm, & recirculation. Distribution piping will need to be retrofitted to suit the new single system.
3. Areas A and E will also require a new compliant domestic hot water system, since the 2020 ED expansion was not designed with future capacity. A new site connection from the east will supply cold water, and the on-site storage will be sufficient.
4. Any plumbing uses in Area B should be provided a separate hot

water system or point-of-use hot water.

- ii. Existing natural gas can remain as is with the following exceptions:
 - 1. The new Area A and B will require a new gas line for building heat & domestic hot water. The best candidate is to connect to the ED gas system. It should be assumed a new run from the meter is required.
- iii. Existing sanitary sewer can remain as is with the following exceptions
 - 1. Sanitary sewer storage must be evaluated since licensed beds are being added. The storage capacity may need to be expanded, but this is dependent on how much availability there is for offloading more waste by truck, which was part of the calculated capacity in the 2020 ED design.
 - 2. New areas A and B require new sanitary sewer. This can be connected to the upper cleanout at the south of the ED building, which is 3'-3" below floor per 2020 plans. Assuming this is correct, 1/8" slope should cover Area A, however Area B may need alternate routing or a lift station, depending on the fixture layout.
 - 3. The existing Area E sewer currently routes north to Area D and does not connect to the 72-hour storage system. Since Area D waste must be connected to the 72-hour storage for 2030 compliance, the sewer line must be intercepted and diverted. This will require a lift station, since there is not enough slope available to connect by gravity to the existing storage system.

c. **Medical Gas:**

- i. Existing medical gas can remain with the following exceptions
 - 1. The older bulk oxygen system routes underground to the older areas of the hospital. The pipe must be rerouted so that it is not under the new proposed Area A, OR it can be decommissioned if non-acute uses can be portable cylinders instead.
 - 2. The newer liquid dewar oxygen system serving the ED building must be expanded or additional spares must be planned. The vaporization capacity must be evaluated, as the additional load may require the addition of a passive vaporizer.
 - 3. The medical air compressor serving the ED expansion was not designed with extra capacity, and a new one or larger one must be provided to accommodate new outlets in Area A.
 - 4. The medical vacuum system serving the ED expansion has some extra capacity, and must be evaluated based on actual design of Area A.
 - 5. Other medical gases are assumed portable use as needed.

II. Burney SNF Expansion:

- a. **Mechanical:** Code upgrades to existing HVAC are not anticipated for OSHPD 2 use. Systems are aging and could be replaced, but access on roof is relatively easy to replace on a case by case basis. New rooftop packaged equipment will be added for the new Areas F and G, similar to existing.
- b. **Plumbing:** Code upgrades to existing are not anticipated for OSHPD use, however the existing water heaters should be planned for replacement as they are aging. The system should be sized for the new kitchen and SNF expansions, Areas F and G. The new kitchen will likely require a new grease interceptor as the existing is on the west side of the building.
- c. **Medical Gas:** Code upgrades are not anticipated for OSHPD use. Expansions

will be evaluated for capacity and may require upsizing equipment, however this is unlikely for SNF type uses.

III. Burney ASC:

- a. All new HVAC, plumbing, and medical gas will be provided as needed, independent of the existing SNF & Clinic.



EDGE Electrical Consulting, Inc.

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 1151 Harbor Bay Parkway, Suite 123A, Alameda, CA 94502 | 510.634.7200
 EDGE-eConsulting.com

June 5, 2023

Nathan Morgan
 Aspen Street Architects, Inc.
 494 North Main Street P.O. Box 370
 Angels Camp, CA 95222

Project Title: Mayers Memorial Healthcare District Master Planning
 Proposal # J439

Dear Nathan,

The following is the electrical and low voltage infrastructure facility assessment of the Mayers Memorial Healthcare Hospital, Mayers Rural Health Clinic, and Skilled Nursing facility (SNF), and other non-HCAI/OSHPD buildings located on the Hospital Campus. The assessment includes the review of buildings and its associated systems and the potential future use of the buildings. The information outlined is based on a site walk conducted on Tuesday, December 6, 2022, and available record drawings of the Hospital and non HCAI/OSHPD buildings.

The Mayers Memorial Hospital campus is composed of the following buildings:

- | | |
|--|------|
| 1. Original Hospital, Building 1, BLD-02327 | 1972 |
| 2. Long Term Beds Addition, Building 2, BLD-02328 | 1976 |
| 3. Surgery/O.B. Addition, Building 3, BLD-02329 | 1980 |
| 4. Pharmacy and 12 Bed Addition, Building 4, BLD-02332 | 1983 |
| 5. Generator Building, Building 7, BLD-03566 | |
| 6. Emergency Department Expansion, Building 9, BLD-05334 | 2020 |
| 7. Connect, Building 9A, BLD-06253 | 2020 |
| 8. Drop-Off Canopy, Building 9B, BLD-06254 | 2020 |
| 9. Water Tank, Building 11, BLD-06969 | 2020 |
| 10. Water Tank Pump Enclosure, Building 11A, BLD-06970 | 2020 |
| 11. New Med Gas Enclosure | |
| 12. Oxygen Storage Yard | |
| 13. Vacuum Pump Shed | |
| 14. Administrative Building | |
| 15. Ambulance Building | |
| 16. Clinic Building | 1986 |
| 17. Physician Sleep House | |
| 18. Maintenance and Engineering/IT Office Building | |
| 19. Metal Storage Building | |
| 20. Retail Pharmacy (off-site) | |
| 21. Thrift Shop and Storage Building (off-site) | |
| 22. Lodge & Stie (off-site) | |

The facility at Burney is composed of the following buildings:

- | | |
|---|------|
| 1. Skilled Nursing Building Burney Campus, Building 10, BLD-05268 | |
| 2. Mayer Rural Health Clinic | 2021 |
| 3. Laundry Building | 2021 |
| 4. Vacant lots on either side of the SNF. | |

Acute Care Hospital

Electrical System:

Utility Service (Normal Power)

The main hospital is served by a PG&E pad mounted transformer and fed underground to a 480Y/277V, 1200 Amp, 3-Phase, 4-Wire NEMA 3R, main switchboard 'MSB' located in an equipment yard west of the emergency department (ED). The main switchboard was installed in the ED Expansion project in 2020 and feeds distribution panel 'NDP', panelboard 'HA' and 'HB, and automatic transfer switches (ATS) 'ATS-S', 'ATS-C', 'ATS-E', and 'ATS-1'. During the ED Expansion project, the hospital normal branch power panelboards were re-fed from distribution panel 'NDP' located on the east side of the building.

The rating of each panelboard is listed below:

Normal Power

Panel 'HA': 480Y/277V, 3-Phase, Main Lugs Only (MLO), 150A/3P over-current protection.

Panel 'HB': 480Y/277V, 3-Phase, MLO, 100A/3P over-current protection.

Panel 'C': 208Y/120V, 3-Phase, MLO, 150A/3P over-current protection.

Panel 'D': 208Y/120V, 3-Phase, MLO, 200A/3P over-current protection.

Panel 'E': 208Y/120V, 3-Phase, MLO, 175A/3P over-current protection.

Panel 'F': 208Y/120V, 3-Phase, MLO, 125A/3P over-current protection.

Panel 'G': 208Y/120V, 3-Phase, MLO, 175A/3P over-current protection.

Panel 'H': 208Y/120V, 3-Phase, MLO, 200A/3P over-current protection.

Panel 'J': 208Y/120V, 3-Phase, MLO, 100A/3P over-current protection.

Panel 'L': 208Y/120V, 3-Phase, MLO, 60A/3P over-current protection.

Panel 'PT': 208Y/120V, 3-Phase, Main Circuit Breaker (MCB), 225A/3P, 200A/3P feeder over-current protection.

Panel 'PT-B': 208Y/120V, 3-Phase, MLO, 100A/3P over-current protection.

Panel 'E-LTC': 208Y/120V, 3-Phase, MLO, 200A/3P over-current protection.

Panel 'SHOP': 208Y/120V, 3-Phase, MLO, 100A/3P over-current protection.

Panel 'DP1': 208Y/120V, 3-Phase, MLO, 200A/3P over-current protection.

Emergency Power System

The main hospital emergency power supply system (EPSS) is served by an emergency stand-by diesel generator located in an equipment yard west of the emergency department. The 280kW/350kVA, 480Y/277V, 3-Phase, 4-Wire Kohler generator was installed in 2020 with the emergency department expansion and feeds a 480Y/277V, 600 Amp, 3-Phase, 4-Wire distribution switchboard 'EHD'. Distribution switchboard 'EHD' feeds automatic transfer switches 'ATS-S', 'ATS-C', 'ATS-E', and 'ATS-1'.

The emergency power system for the emergency department consists of a life safety branch 'ATS-S', critical branch 'ATS-C', and equipment branch power 'ATS-E'. The rest of the hospital is fed from a non-segregated emergency branch, 'ATS-1'.

The rating of each panelboard is listed below:

Segregated Emergency Power

Panel 'SHA': 480Y/277V, 3-Phase, MLO, 100A/3P over-current protection.

Panel 'CHA': 480Y/277V, 3-Phase, MLO, 100A/3P over-current protection.

Panel 'EHA': 480Y/277V, 3-Phase, MLO, 225A/3P over-current protection.

Panel 'SLA': 208Y/120V, 3-Phase, MCB 50A/3P over-current protection.

Panel 'CLA': 208Y/120V, 3-Phase, MCB 150A/3P over-current protection.

Panel 'ELA': 208Y/120V, 3-Phase, MCB 150A/3P over-current protection.

Panel 'ELB': 208Y/120V, 3-Phase, MLO, 80A/3P over-current protection.

Panel 'ULB': 208Y/120V, 3-Phase, 50A/3P over-current protection.

Non-Segregated Emergency Power

Panel 'EMA': 208Y/120V, 2-Phase, MLO, 100A/2P over-current protection.

Panel 'EMB': 208Y/120V, 2-Phase, MLO, 125A/2P over-current protection.

Panel 'EMC': 208Y/120V, 2-Phase, MLO, 200A/2P over-current protection.
Panel 'EMD': 208Y/120V, 2-Phase, MLO, 200A/2P over-current protection.
Panel 'EME': 208Y/120V, 3-Phase, MLO, 100A/3P over-current protection.
Panel 'ICU': 208Y/120V, 3-Phase, M.L.O., 150A/3P over-current protection.
Panel 'VACUUM BUILDING': 208Y/120V, 3-Phase, MLO, 100A/3P over-current protection.

Analysis of electrical system:

The California Electric Code (CEC) requires separate automatic transfer for loads greater than 150kVA. The hospital currently has a 280kW/350kVA emergency stand-by diesel generator. The emergency department has a segregated emergency power for life safety, critical, and equipment power, but the rest of the hospital is served by a non-segregated ATS, 'ATS-1'. Future additions to the hospital will require those areas to have a segregate EPSS. The SNF portions of the building will not require the emergency power system to be segregated for NPC/SPC, but will require a new ATS on equipment branch power to comply with PIN 74. The existing loads may remain on the existing non-segregated ATS-1.

Typical Distribution Panel and Panelboards look to be installed as part of the original building. Existing circuit breakers look to be in good condition, but visual inspection cannot determine the condition of the circuit breaker. Each circuit breaker should be tested per manufacture recommendations, typically every 5 years to verify proper operation of the circuit breaker. No testing labels were seen on the existing equipment to validate the circuit breakers are in working condition.

In the ceiling space above, not all conduits are properly supported per CEC 358.30 (B). Horizontal EMT (Electric Metallic Tubing) conduit may be supported by framing member (not securely fasten) in intervals not greater than 10ft and if the EMT conduit is securely fasten with 3ft of termination of EMT. Some EMT conduits in the ceiling space above were not securely fastened with 3ft of EMT termination or could not be determined if EMT conduits were securely fastened within 3ft of termination of the EMT conduit. Electrical conduit supports in the existing hospital will need to be evaluated for proper seismic support.

Mechanical units in the old portion of the hospital are on normal power. New renovations under OSHPD 1 or OSHPD 2 may require mechanical units to be on an equipment branch power depending on what the mechanical unit serves.

Switchboard LEED has 2 pole breakers in 3 pole slots which leads to exposed bussing. Blanking plates should be installed to prevent exposure to live open bus.



The hospital consists of multiple connected buildings. Buildings removed from HCAI jurisdiction cannot have utilities passing through or feeding buildings under HCAI jurisdiction. Electrical services for HCAI buildings that pass through the old 12-Bed addition and original hospital, which is proposed to be OSHPD 3 or 1R, will be required to be removed.

The ED expansion project where a new 1200 Amp utility service and 280kW/350kVA emergency diesel generator was installed cannot support proposed expansion. The 12-month (May 2022-2023) peak demand from Pacific Gas & Electric Company (PG&E) is 236.8kW/296kVA (356.19 Amps). The new additions and remodel will need an estimated 1072kW/1340kVA (1612.52 Amps) service.

A new utility service and EPSS will be required to support the new acute care addition, the expansion project in 2020, and renovation of the existing hospital. The new electrical yard should be placed adjacent to the existing electrical yard. The new service will be a 2000 Amp, 480Y/277V service from PG&E, with provisions for photovoltaic interconnection, and a new EPSS with a 650kW emergency diesel stand by generator and 1600 Amp emergency power paralleling gear. Since the generator is serving the SNF in addition to the hospital, the fuel tank should be sized to meeting HCAI PIN74 and NFPA 110 5.5.3 requirements, which is 96 hours at full load x 133%. The generator size is based on mechanical units remaining on natural gas. The larger generator will allow capacity for mechanical units to be put on emergency power in the SNF for PIN 74 compliance. The existing normal power main switchboard 'MSB' utility feed should be demolished and back-fed from the new utility switchboard.

The new electrical service and EPSS will serve OSHPD 1 buildings. OSHPD 1 buildings' emergency power will be served from a Life Safety, Critical, and Equipment Branch automatic transfer switch (ATS). Electrical feeders to the new Dietary Kitchen and Dining Area can be routed through the new acute care addition.

The OSHPD 2 Building (SNF) will need a new equipment branch ATS to service existing mechanical loads that are not on emergency power. Per PIN 74, patient areas are to have mechanical system to maintain certain room temperatures. The existing ATS-1 that is currently a non-segregated emergency branch power ATS shall be repurposed as a Life Safety ATS for the SNF. Electrical panels on ATS-1 will need to be relocated to new equipment branch panels. Existing fire alarm panels and life safety lights will need to be relocated from existing panels to new life safety panels.

The old 12-Bed/Pharmacy and original hospital building will be reclassified as an OSHPD 3 building. Normal and emergency power will be served from the new electrical yard. A new non-segregated emergency power ATS under 150kW will service the 2 buildings. The electrical service will route from the new electrical yard to the old 12-Bed/Pharmacy building, then the 12-Bed/Pharmacy will serve the original hospital building.

Then new non-HCAI/OSHPD support building electrical service will be fed from new electrical yard. No emergency power will be provided to this building. Egress lighting will need to have battery backup or be put on a lighting inverter.

For all OSHPD 1, 2, and 3 the emergency power system will need to comply with CEC 517.31(G) for coordination of circuit breaker (also known as HCAI Pin 70). The existing circuit breakers appear to be from the original installation. It may be difficult to find time current curves (TCC) for the existing circuit breakers to show coordination per CEC 517.31(G). It is recommended to provide new panels in renovation areas for all emergency power systems.

Where HVAC equipment is replaced on the roof of the hospital, integral disconnects should be provided with the HVAC equipment to avoid additional supports and penetrations to the roof for mounting a separate disconnect.

Telecom System:

The existing telecom system has been updated since the original Hospital construction in 1972. However, there are phone panels with abandoned twisted pair conductors from the old phone system. Telecom cabling above ceiling is laid on top of T-bar ceiling, conduit, trapeze, or mechanical piping and not supported by an appropriate cable management supports such as j-hooks, stiffies, or cable tray. The IT room located in the old part of the hospital may have insufficient cooling since is a portable cooling unit in the IT room and should be review by a mechanical engineer.

Analysis of telecom system:

Coordination with the facility IT group is required to determine the available system capacity for additional station cabling (i.e. tele/data outlets serving workstations, offices, patient rooms, etc). Future telecom

equipment upgrades could require cabling upgrades, additional power requirements, and additional cooling requirements for existing and/or new telecom room spaces. Existing cables in the ceiling should be properly support with j-hooks, stiffies, or cable tray. The abandon cables should be removed from the facility per the CEC.

All telecom cable routing serving OSHPD-1 buildings cannot pass through OSHPD-2 or 3 buildings to serve any portion of an OSHPD-1 building. The telecom cabling from OSHPD-2 and 3 may pass through an OSHPD-1 building but may only serve their own building classification. The telecom cable routing for the Original Hospital building and old 12-Bed/Pharmacy building that will be classified as OSHPD-3 may pass through the OSHPD-1 corridor but may not serve any portion of the OHSPD-1 buildings.

Fire Alarm System:

All fire alarm routing serving OSHPD-1 buildings cannot pass through OSHPD-2 or 3 buildings to serve any portion of an OSHPD-1 building. The fire alarm cable routing from OSHPD-2 and 3 may pass through an OSHPD-1 building but may only serve their own building classification. The fire alarm cable routing for the Original Hospital building and old 12-Bed/Pharmacy building that will be classified as OSHPD-3 may pass through the OSHPD-1 corridor but may not serve any portion of the OHSPD-1 buildings.

Administrative Building

The administrative building is served by 2 PG&E services from 2 separate transformers. There is no emergency power system at the administrative building.

Ambulance Building

The ambulance Building does not have its own utility services and is served from another building. The building will be demolished. Utilities should be surveyed prior to removal of building.

Clinic Building (MOB)

The clinic building is served by 2 PG&E services. Panel 'A' is a 208Y/120V, 150A, 3-Phase, 4-Wire service and Panel 'B' is a 208Y/120V, 200A, 3-Phase, 4-Wire service. There is no emergency power system at the administrative building. Luminaires appear to be from the original installation. Future remodels should consider consolidating the utility services in the clinic building into one service and update the lighting system with new LED luminaires and lighting controls per California Title 24.

Metal Storage Building

The building has no utility services. Owner should consider adding new service to service storage building, administrative building, and clinic building to consolidate multiple meters on campus. New service should include future PV interconnection to utility.

Retail Pharmacy

The retail pharmacy was renovated recently in 2018. The building is served by a PG&E service with a Generac 16kW natural gas generator. The subpanel in the building that is fed from the main breaker serving the retail pharmacy appears to be part of the original building installation and was not replaced during the renovation. Future renovation should consider replacing the circuit breakers in the electrical panel or have the circuit breaker tested.

The IT server/cabinet and security panels are in the break room of the pharmacy. The telecommunication and security system cables routed down the wall and exposed. Future remodel should consider relocating IT server/cabinet and security panels to a room or closet for added security.

Thrift Shop and Storage Building

There is one PG&E electrical service located outside of the Storage Building on the east side that feeds panels in the storage building and Thrift shop. The storage building appears to be unfinished. There are missing downlights, and exposed wiring. Existing luminaires are fluorescent strip lights with no occupancy sensing controls. Future remodel should consider new dimmable LED lights with lighting controls to meet current Title 24 requirements.

The thrift shop lighting consists of 4-foot fluorescent wraparound luminaires. Future remodel should consider new dimmable LED lights with lighting controls to meet current Title 24 requirements.

Lodge & Site

There are multiple buildings located at this site, each with its own electrical utility service from PG&E.

Skilled Nursing Building Burney Campus (Burney)

The Skilled Nursing Building at Burney is served by a single PG&E service with a 208Y/120V, 1600A, 3-Phase, 4-Wire service and a 125kW emergency diesel generator at 208Y/120V. Main switchboard and generator appear to be from the original installation.

Normal Power

Panel 'N1': 208Y/120V, 3-Phase, MLO, 200A/3P over-current protection.

Panel 'N2': 208Y/120V, 3-Phase, MLO, 200A/3P over-current protection.

Panel 'N3': 208Y/120V, 3-Phase, MLO, 200A/3P over-current protection.

Panel 'N4': 208Y/120V, 3-Phase, MLO, 200A/3P over-current protection.

Panel 'N5': 208Y/120V, 3-Phase, MLO, 200A/3P over-current protection.

Panel 'N6': 208Y/120V, 3-Phase, MLO, 200A/3P over-current protection.

Panel 'M': 208Y/120V, 3-Phase, MCB, 200A/3P over-current protection (located in Clinic).

Panel 'P': 208Y/120V, 3-Phase, MLO, 100A/3P over-current protection (located in Clinic).

Non-Segregated Emergency Power

Panel 'C1': 208Y/120V, 3-Phase, MLO, 100A/3P over-current protection.

Panel 'C2': 208Y/120V, 3-Phase, MLO, 100A/3P over-current protection.

Panel 'C3': 208Y/120V, 3-Phase, MLO, 100A/3P over-current protection.

Panel 'C4': 208Y/120V, 3-Phase, MLO, 60A/3P over-current protection.

Analysis of electrical system:

The existing 1600A service has a 12-month (May 2022-2023) peak demand of 124.8kW/156kVA (433 Amps). The existing main electrical service currently has the capacity to service the proposed 7,500 sqft kitchen and 18-Bed expansion. Future 30 bed expansion was not considered in this existing service capacity. New feeder runs will be required to each of the expansion areas through the existing SNF.

HCAI PIN 74 released on December 12, 2022 will require a SNF to maintain a minimum 96 hours of alternative source of power (diesel generator) or have arrangements for fuel delivery in an emergency event. Alternative arrangements must be approved by the California Department of Public Health (CDPH). NFPA 110 will require the fuel tank to be sized 133% larger to accommodate fuel for monthly testing. The requirement is to maintain a minimum of 96 hours of fuel and to allow for monthly testing without the need to refuel after every test. If arrangements for fuel delivery are considered, risk analyzes should consider inclement weather during winter storms for road closures.

The current emergency diesel generator is currently undersized and will need to be replaced to meet PIN 74 and provide emergency power to the expansion areas. A 450kW/562.5kVA emergency diesel generator will be required to service the existing mechanical loads, and new expansion areas. A new life safety ATS

and equipment branch ATS will need to be provided for the expansion areas. The existing non-segregated ATS can remain. Future remodels in the SNF will require segregation of power systems.

Current AC units are served from both normal and non-segregated emergency power. New equipment branch electrical panels should be installed in the existing SNF to migrate over all existing AC loads serving patient areas to comply with PIN 74. The new emergency power system will need to comply with HCAI PIN 70 for coordination of circuit breakers.

There is an existing IT alcove/room with portable cooling. It is recommended to provide a dedicated room with a separate split system for the IT equipment.

Option for Burney SNF and New ASC/Clinic Building

An alternative option for the SNF and new ASC/Clinic building is to provide a new utility service and EPSS with an emergency diesel generator to serve both the SNF and new ASC/Clinic building. This will allow for one utility meter and one emergency diesel generator to service both buildings. Any future photovoltaic can connect to the new utility service that feeds both buildings in lieu of having to separate photovoltaic systems.

With a new utility service for the SNF the existing main service will need to be disconnected from its current service and back fed from the new service. The existing emergency non segregated ATS will need to be back fed from the new EPSS. A new life safety and equipment branch ATSS will be needed to serve the expansion areas and existing HVAC serving patient areas.

Mayer Rural Health Clinic (Burney)

The Mayer Rural Health Clinic was recently renovated in 2021. The clinic is attached to the Burney skilled nursing facility (SNF). The building is served by a 208Y/120V, 200 Amp, 3-Phase, 4-Wire, from the existing 208Y/120V, 1600 Amp, 3-Phase, 4-Wire main switchboard for the SNF. There is sufficient capacity to accommodate future electrical work in this building.

Laundry Building (Burney)

The laundry building was recently renovated in 2021. The building is served by a 200 Amp 120/240V, 1-Phase, 3-Wire main service panel with underground feed from a transformer. The main electrical panel does not look like it was replaced in the renovation in 2021. The main service panel is nearly maxed out based on record drawings. If any future expansion is needed at this facility, a load study should be done on the main service panel prior to adding any load to the main service panel.

Vacant lot on either side of the SNF (Burney)

The vacant lot adjacent to the SNF in Burner is owned by Mayer Memorial Health. A new 11,000 sq ft Ambulatory Surgery (ASC)/Rural Health Clinic building and 2,000 sq ft maintenance building are proposed for the site. A new surgery center and photovoltaic array are proposed to be erected on the property. The new buildings will need one new utility service for power and telecommunications. The new electrical service equipment will have provisions for photovoltaic interconnection. The ASC can provide electrical and telecommunications to the maintenance building.

Emergency power will be required for this facility. Only 5,000 sq ft of the 11,000 sq ft is for the ASC. A 150kVA (120kW) emergency diesel generator with a non-segregated essential electrical system will be required. No emergency power will be provided to the maintenance building. Egress lighting in the maintenance building will need to have battery backup or be put on a lighting inverter.

Coordination of circuit breakers will be required under sections 517, 620, and/or 701. The purpose of circuit breaker coordination is to isolate the fault (short circuit) to the nearest upstream circuit breaker to minimize any electric power disruption to the affect breaker.

California new energy code for 2022 will required commercial buildings to have a solar array and energy storage system. Space for new photovoltaic system should be consider on the roof, parking lot, or undeveloped property next to SNF belonging to Mayer Memorial Health.

Very truly yours,

EDGE Electrical Consulting Inc.