



---

**NATIVIDAD MEDICAL CENTER  
CONTRACTS/PURCHASING  
1441 CONSTITUTION BLVD, BLDG 860  
SALINAS, CA 93906  
(831) 755-4111**

**REQUEST FOR QUALIFICATIONS  
# 9600-85  
FOR A MASTER FACILITIES PLAN AT  
NATIVIDAD MEDICAL CENTER**

**Proposals are due on April 8, 2022**

## Table of Contents

1.0 INTENT .....	4
2.0 CONSULTANT QUALIFICATIONS .....	4
3.0 ABOUT NATIVIDAD MEDICAL CENTER .....	4
4.0 CALENDAR OF EVENTS .....	5
5.0 NMC POINTS OF CONTACT .....	6
6.0 SCOPE OF SERVICES .....	6
7.0 REQUIRED CONTENT/FORMAT FOR QUALIFICATIONS PACKAGE .....	8
8.0 SUBMITTAL INSTRUCTIONS & CONDITIONS .....	11
9.0 SELECTION CRITERIA .....	13
10.0 PREFERENCE FOR LOCAL CONSULTANTS .....	13
11.0 CONTRACT AWARDS .....	14
12.0 SEQUENTIAL CONTRACT NEGOTIATION .....	15
13.0 AGREEMENT TO TERMS AND CONDITIONS .....	15
14.0 COLLUSION .....	15
15.0 CONFIDENTIAL, PROPRIETARY, TRADE SECRET INFORMATION .....	15
16.0 DEBARMENT/SUSPENSION POLICY .....	16
17.0 PIGGYBACK CLAUSE .....	17
18.0 EMERGENCY SITUATIONS .....	17
SAMPLE AGREEMENT BETWEEN NMC AND CONSULTANT .....	19
SAMPLE AGREEMENT: 1.0 PERFORMANCE OF THE AGREEMENT .....	19
SAMPLE AGREEMENT: 2.0 SCOPE OF SERVICE .....	20
SAMPLE AGREEMENT: 3.0 TERM OF AGREEMENT .....	20
SAMPLE AGREEMENT: 4.0 COMPENSATION AND PAYMENTS .....	21
SAMPLE AGREEMENT: 5.0 INVOICES AND PURCHASE ORDERS .....	21
SAMPLE AGREEMENT: 6.0 DESIGN PROFESSIONAL INDEMNIFICATION .....	22
SAMPLE AGREEMENT: 7.0 INSURANCE REQUIREMENTS .....	23
SAMPLE AGREEMENT: 8.0 RECORDS AND CONFIDENTIALITY .....	25
SAMPLE AGREEMENT: 9.0 NON-DISCRIMINATION .....	26
SAMPLE AGREEMENT: 10.0 OVERRIDING CONSULTANT PERFORMANCE REQUIREMENTS .....	26
SAMPLE AGREEMENT: 11.0 CONFLICT OF INTEREST .....	27
SAMPLE AGREEMENT: 12.0 COMPLIANCE WITH APPLICABLE LAWS .....	27
SAMPLE AGREEMENT: 13.0 PREVAILING WAGE .....	28
SAMPLE AGREEMENT: 14.0 DRUG FREE WORKPLACE .....	28
SAMPLE AGREEMENT: 15.0 TIME OF ESSENCE .....	28
SAMPLE AGREEMENT: 16.0 PERFORMANCE ASSURANCE .....	28
SAMPLE AGREEMENT: 17.0 TRAVEL REIMBURSEMENT .....	29
SAMPLE AGREEMENT: 18.0 EMERGENCY SITUATIONS .....	29
SAMPLE AGREEMENT: 19.0 NON-APPROPRIATIONS CLAUSE .....	29
SAMPLE AGREEMENT: 20.0 FORCE MAJEURE .....	30
SAMPLE AGREEMENT: 21.0 NOTICES .....	30
SAMPLE AGREEMENT: 22.0 LEGAL DISPUTES .....	31
SAMPLE AGREEMENT: 23.0 GENERAL PROVISIONS .....	31
RFQ SIGNATURE PAGE .....	34
EXHIBIT B .....	35
EXHIBIT A: .....	37



## **1.0 INTENT**

- 1.1** Natividad Medical Center (NMC), a general acute care teaching hospital owned and operated by the County of Monterey (COUNTY), is requesting proposals from qualified CONSULTANT firms to assist with preparing a Facility Master Plan (2022-2027) to address one or more of the following; expansion of inpatient and outpatient service capacity, enhancement of operational efficiency, and seismic safety mandates for 2030.
- 1.2** This Request for Qualifications (RFQ) is not intended to create an exclusive service AGREEMENT and multiple agreement awards may be made. COUNTY retains the ability, at its sole discretion, to add qualified CONSULTANTS at any time.

## **2.0 CONSULTANT QUALIFICATIONS**

- 2.1** CONSULTANTS interested in responding to this RFQ should meet all of the following qualification requirements in order to be considered by NMC:
- 2.1.1 CONSULTANT shall be licensed in the State of California; and
  - 2.1.2 CONSULTANT shall have a minimum of five (5) years' experience creating Master Facility Plans, preferably under HCAI (formerly OSHPD) jurisdiction.
  - 2.1.3 CONSULTANT shall have experience providing a facility master plan for healthcare facilities.

## **3.0 ABOUT NATIVIDAD MEDICAL CENTER**

- 3.1** Natividad is general acute care teaching hospital and Level II Trauma Center dedicated to improving and inspiring healthy lives. As a public health care system, Natividad provides compassionate high-quality health care to everyone in Monterey County, regardless of their ability to pay or immigration status. Located in Salinas, California, and founded in 1886, Natividad offers a wide range of inpatient, outpatient, emergency, diagnostic and specialty medical care for adults and children.



Home to the area's only Level II Trauma Center, the hospital's specialized personnel, equipment and services provide a vital local community service that treats the most severe and critical injuries — saving lives and keeping patients close to home.

Through its affiliation with the University of California, San Francisco (UCSF), Natividad is the only teaching hospital on the Central Coast. Recognized nationally and internationally as a model program, Natividad's Family Medicine Residency Program is postgraduate training for physicians specializing in family medicine. About half of its graduates remain on the Central Coast to practice medicine.

Natividad is fully accredited by The Joint Commission. Owned and operated by Monterey County, the 172-bed hospital is governed by the Monterey County Board of Supervisors, under the guidance of a Board of Trustees. Monterey County Health Department operates several outpatient care clinics on the medical center campus.

## 4.0 CALENDAR OF EVENTS

4.1	Release RFQ	Wed Feb. 23, 2022
4.2	<u>Mandatory</u> Site Tour	Mon March 14, 2022
4.3	Deadline for Written Questions	Wed March 23, 2022
4.3	Proposal Submittal Deadline	Friday April 8, 2022
4.4	Estimated Notification of Selection	May 2022
4.5	Estimated AGREEMENT Date	June 2022

*This schedule is subject to change as necessary.*

- 4.6 **FUTURE ADDENDA:** CONSULTANTS who received notification of this solicitation by means other than through a Natividad Medical Center mailing, shall contact the person designated in the NATIVIDAD POINTS OF CONTACT herein to request to be added to the mailing list. Inclusion on the mailing list is the only way to ensure timely notification of any addenda and/or information that may be issued prior to the solicitation submittal date. **IT IS THE CONSULTANTS' SOLE RESPONSIBILITY TO ENSURE THAT THEY RECEIVE ANY AND ALL ADDENDA FOR THIS RFQ** by either informing the Natividad Medical Center of their mailing information or by regularly checking Natividad's web page at <http://www.natividad.com/about-us/vendors>. Addenda will be posted on the website the day they are released.

- 4.7 A MANDATORY SITE TOUR: Site Tour will be held on MONDAY March 14, 2022 at 10:00 AM at Natividad Medical Center located at 1441 Constitution Blvd, Salinas, CA 93906.** Those interested in submitting a proposal are **required** to attend this meeting. The purpose of this meeting is to tour the facility. No presentations by interested bidders are required or permitted at this meeting/tour. Please indicate your intent to attend this meeting by sending a response to NMC's Primary Contact person designated in the section below.

## 5.0 NMC POINTS OF CONTACT

- 5.1** Questions and correspondence regarding this solicitation shall be directed to:

Primary Contact for this RFQ	<b>Emieline Elias</b> Management Analyst Natividad Medical Center 1441 Constitution Blvd. Salinas, CA 93906 Email: <b>EliasEE@natividad.com</b>
------------------------------	--

- 5.2 All questions regarding this solicitation shall be submitted in writing via E-mail only.** The questions will be researched and the answers will be communicated to all known interested CONSULTANT after the deadline for receipt of questions.
- 5.3** The deadline for submitting written questions regarding this solicitation is indicated in the CALENDAR OF EVENTS herein. Questions submitted after the deadline will not be answered.
- 5.4** Only answers to questions communicated by formal written addenda will be binding.
- 5.5** Prospective CONSULTANT shall not contact Natividad Medical Center or County officers or employees with questions or suggestions regarding this solicitation except through the primary contact person listed above. **Any unauthorized contact may be considered undue pressure and cause for disqualification of the CONSULTANT.**

## 6.0 SCOPE OF SERVICES

- 6.1** Natividad is requesting proposals from qualified consultant teams to assist with preparing a Facility Master Plan (2022-2027) for inpatient and outpatient services. The scope of the Facility Master Plan will focus on the 60-acre main campus, which includes old abandoned hospital buildings and an adjacent 20-acre property (the Corral parking lot). This effort will provide direction on:

Addressing California seismic safety requirements for inpatient hospitals for 2030 (Natividad has been working with a design professional team to better understand the work that needs to complete. Most of Natividad's buildings currently meet the 2030 requirements. See attached Exhibit B Seismic Feasibility Study for Natividad.

- a. Expanding inpatient and outpatient capacity to support marketplace needs and the hospital's vision and goals. The current Emergency Department is grossly undersized for the volume of patients served (more than 50,000 patients per year). Natividad has previously performed some future space planning of the Emergency Department that will be provided as part of the RFQ.
  - b. Enhancing operational efficiency and improve financial performance through highly efficient workflow, sustainable design and technological advances.
  - c. The demolition of the old hospital and proposed best use of that space to best meet Natividad's needs.
- 6.2 The team should include strategic planning experts and individuals that have substantial experience in hospital (OSHPD 1), outpatient (OSHPD 3) facilities planning, and design. Team members should be keenly familiar with current trends and emerging technology that will influence the delivery of healthcare in the future.
- 6.3 The master plan will minimally include the following deliverables:
- a. An exhaustive review and analysis of our current buildings/ grounds (Campus) and services provided in the different locations; make recommendations on how to maximize efficiency and flow with the existing space we have as well make recommendations on build out of new space
  - b. Recommendations on number of inpatient beds by service, operating rooms, and inpatient support services (clinical ancillary departments, warehouse, billing, information technology, training space, etc.) to achieve the hospital's vision and goals
  - c. Recommendations on central plant if facility is expanded
  - d. Recommendations on parking
  - e. A high level schematic design (conceptual space program) of the future Natividad campus
  - f. A rough cost estimation of the future schematic design
  - g. Five hard copies unbound of the final report and two (2) electronic copies on a flash memory drive
- 6.4 Multiple facility plan options may be requested.
- 6.5 The scope of work will include high-level assessment of program requirements, facility needs, and costs. It will not include detailed engineering studies typically prepared by HVAC, civil, or electrical engineers. Natividad has not yet established a budget for the future facility changes at this time.
- 6.6 **Key Stakeholders:** The hospital's Assistant Administrator of Operations and Support Services in conjunction with the Facility Project Manager will be lead on the project. The awarded CONSULTANT team will work with hospital senior management, hospital board members, physician leaders, and department managers. For estimating purposes,

CONSULTANT should assume that the engagements will require multiple meetings throughout the course of the planning effort.

- 6.7 Relevant attachments pertaining to the Scope included within this RFQ include:
- a. Attachment A: Campus Plan to include old abandoned hospital
  - b. Attachment B: Current seismic evaluation from HGA Architects
  - c. Attachment C: Natividad Department Directories
  - d. Attachment D: ED Schematic Design developed by Huddy
- 6.8 The finalization of all plans, design documents, and construction documents required to successfully implement and complete the project, including construction, commissioning, transition planning and move-in, are **NOT** part of this Scope.

## 7.0 REQUIRED CONTENT/FORMAT FOR QUALIFICATIONS PACKAGE

### 7.1 **CONTENT AND LAYOUT:**

- 7.1.1 CONSULTANT should provide the information as requested and as applicable to the proposed services. The Qualifications Package submitted in response to this RFQ shall be organized as per the table below; headings and section numbering utilized in the proposal package shall be the same as those identified in the table. Qualifications packages shall include at a minimum, but not limited to, the following information in the format indicated:

<b><u>Proposal Package Layout;</u></b> <b>Organize and Number Sections as Follows:</b>	
Section 1	COVER LETTER (INCLUDING CONTACT INFO)
	RECEIPT OF SIGNED ADDENDA(s) (IF ANY)
	SIGNATURE PAGE
	TABLE OF CONTENTS
Section 2	PRE-QUALIFICATIONS
Section 3	PROJECT EXPERIENCE AND REFERENCES
Section 4	TECHNICAL ASPECTS OF PROPOSAL
Section 5	ENVIRONMENTALLY FRIENDLY PRACTICES
Section 6	PRICING & WARRANTY
Section 7	EXCEPTIONS
Section 8	APPENDIX

### **Section 1 Requirements:**

**Cover Letter:** All proposals must be accompanied by a cover letter not exceeding the equivalent of two (2) single-sided pages and should provide as follows:

**Contact Info:** The name, address, telephone number, and fax number of CONSULTANT's primary contact person during the solicitation process through to potential contract award.

**Firm Info:** Description of the type of organization (e.g. corporation, partnership, including joint venture teams and subcontractors and how many years it's been in existence.

**Litigation History** Description of litigation to which your organization has been a party in the last five (5) years. Please include:

- (1) Name of Case;
- (2) Date Filed;
- (3) Court in which Filed;
- (4) Judgment or other Result

**Signed Signature Page and Signed Addenda** (if any addenda's were released for this solicitation). Qualifications packages submitted without this page will be deemed non-responsive. All signatures must be manual and in BLUE ink. All prices and notations must be typed or written in BLUE ink. Errors may be crossed out and corrections printed in ink or typed adjacent, and must be initialed in BLUE ink by the person signing the proposal.

## **Table of Contents**

### **Section 2, Pre-Qualifications/Licensing Requirements necessary to fulfill the "Scope of Work" Section 5:**

**Pre-Qualifications/Licensing:** CONSULTANT must acknowledge in writing that it meets all of the pre-qualifications and licensing requirements as set forth in this RFQ Section 2.0 Pre-Qualifications herein.

### **Section 3, Project Experience & References:**

**Key Staff Persons:** Provide resume(s) for each key employee on the proposed team. County will be looking for confirmation that your firm has at least one full-time LEED Accredited professional available on staff (not a subcontractors) for projects for NMC. County will be looking at proposed team member's relevant work experience to ensure each is able to provide tasks as listed in this RFQ Scope of Work. County may request written verification that key staff listed do have appropriate licenses and certifications.

**Projects:** Describe your firm's area of expertise and prior experience with similar projects in healthcare within the past five (5) years. Demonstrate that your team has experience working with other hospitals within the United States, preferably in California. Identify any expertise or special skills your firm and/or employees may possess that make you qualified to perform this work. If applicable describe previous

work experience in California acute care hospitals under Department of Health Care Access and Information (HCAI) jurisdiction, formerly the Office of Statewide Health Planning and Development (OSHPD). Include the following details:

***Project Name***

***Brief Project Description***

Please include information about scope, schedule and record of performance. Indicate if the project was completed on time and within budget.

***Client Name***

***Client Contact Information*** (*Natividad may use this information for reference checks*)

Please include telephone number and e-mail address if possible.

***Size of Project***

Please include square footage and total cost

***Specify the Specialty Area***

Specify which of the following specialty areas this project falls under. Examples: Healthcare, Commercial; Office; Warehouse/Storage; Information Technology; Maintenance; Court Facilities, Schools, or Other (Specify).

**Section 4, Proposed Work Plan:**

- Qualification packages submitted in response to this RFQ should include a detailed work plan that describes the approach to the project as defined in the Scope of Services Section 6 herein.
- Provide a detailed description of deliverables, including plans for reporting results and discussions with NMC throughout the project.
- Provide a proposed timetable for completion of tasks related to the project.
- Describe the overall project approach to completing the work in the RFQ. Describe means and methods, processes and strategies that the Firm has used in the past to generate the types of information and plans that are requested. Describe the phases of the work, how each phase supports the next phase, and the hospitals role and responsibilities in supporting the Professional Consultants in the completion of the work. Make recommendations and provide examples of how the above strategies and processes have been successful at other healthcare facilities. Since this is visionary work, please explain how the Professional Services team will co-lead the Natividad Medical Center in the Facilities Master Plan and how this might be done most effectively.

**Section 5, Environmentally Friendly Practices:**

CONSULTANT shall summarize all environmentally friendly practices it adheres to in the course of doing business. CONSULTANT may reference the County of Monterey's Climate-Friendly Purchasing Policy located online at: <https://www.co.monterey.ca.us/government/departments-a-h/administrative-office/contracts-purchasing/procurement-related-policies>

CONSULTANT shall indicate whether or not it is a 'Green Certified' Business and state which governing authority administered the certification.

### **Section 6, SEALED Pricing:**

**Sealed Pricing:** CONSULTANT shall utilize EXHIBIT A attached to this RFQ to submit fees associated with this Scope. Specific expenses that are common across this industry and scope should also be included, however, travel reimbursement is not permitted for a scope of this nature. **FEES/EXHIBIT A MUST BE SUBMITTED IN A SEALED ENVELOPE ATTACHED TO THE ORIGINAL PROPOSAL COPY OR THE QUALIFICATIONS PROPOSAL MAY BE DEEMED NONRESPONSIVE.**

Selection of CONSULTANT shall be based on qualifications per the Selection Criteria listed herein. Fees may be negotiated after the tentative award announcement is made for this solicitation. If fee negotiations with the firm determined most qualified are not successful, and/or the fees discussed are outside the budgetary constraints for the Project, County reserves the right to suspend negotiations with the most qualified firm, and proceed to second most qualified firm, and so on.

### **Section 7, Exceptions:**

Submit any and all exceptions to this solicitation on separate pages, and clearly identify the top of each page with "EXCEPTION TO NATIVIDAD RFQ #9600-85". Each Exception shall reference the RFQ page number and section number, as appropriate. CONSULTANT should note that the submittal of an Exception does not obligate County to revise the terms of the RFQ or AGREEMENT.

### **Section 8, Appendix:**

**Appendices:** CONSULTANT may provide any additional information that it believes to be applicable to this proposal package and include such information in an Appendix section.

## **8.0 SUBMITTAL INSTRUCTIONS & CONDITIONS**

- 8.1** Submittal Identification Requirements: ALL QUALIFICATIONS PACKAGES SUBMITTED IN RESPONSE TO THIS RFQ SHALL BE SUBMITTED AS HARDCOPY DOCUMENTS, MAILED OR HAND DELIVERED, CONTAINING QUALIFICATIONS DETAILS AND THE PRICING/FEES WITHIN THE QUALIFICATIONS PACKAGE MUST BE SEALED IN A SEPARATE ENVELOPE. ALL QUALIFICATIONS PACKAGES SUBMITTED SHALL STATE IN WRITING ON THE OUTSIDE OF THE BOX PROMINENTLY DISPLAYED IN THE LOWER LEFT CORNER: **"RESPONSE TO RFQ #9600-85" and CONSULTANTS COMPANY NAME.**

- 8.2 Notification of Submittal:** For all Qualifications Packages submitted, firms are to provide the routing or tracking number to the Point of Contact stated in the RFQ in Section 5.1 via email as notification of submittal. This helps ensure that Natividad is aware of your submittal in the event it is accidentally delivered to a different hospital or county department. Qualifications Packages that are delivered whereby there is no routing or tracking number should be delivered ONLY with a sign-off from the person receiving the package that includes the signature, the printed name and the phone number of the receiving person. That information should also be forwarded via email to the Point of Contact stated in Section 5.1 of this RFQ.
- 8.3 Due Date:** Qualifications packages must be received by Natividad ON OR BEFORE the time and date specified, at the location and to the person specified on the **Signature Page** of this solicitation. It is the sole responsibility of the CONSULTANT to ensure that the proposal or qualifications package is received at or before the specified time. Postmarks and facsimiles are not acceptable. Proposals received after the deadline shall be rejected and returned unopened. If a CONSULTANT does not wish to submit a qualifications package but wishes to acknowledge the receipt of the request, the reply envelope shall be marked "No Bid".
- 8.4 Shipping Costs:** Unless stated otherwise, the F.O.B. for receivables shall be destination. Charges for transportation, containers, packaging and other related shipping costs shall be borne by the shipper.
- 8.5 Mailing Address:** Qualifications packages shall be mailed/delivered to Natividad at the mailing address indicated on the **Signature Page** of this solicitation.
- 8.6 Ownership:** All submittals in response to this solicitation become the property Natividad. If a CONSULTANT does not wish to submit a Proposal but wishes to acknowledge the receipt of the request, the reply envelope shall be marked "No Bid".
- 8.7 Compliance:** Qualifications packages that do not follow the format, content and submittal requirements as described herein, or fail to provide the required documentation, may receive lower evaluation scores or be deemed non-responsive.
- 8.8 CAL-OSHA:** The items proposed shall conform to all applicable requirements of the California Occupational Safety and Health Administration Act of 1973 (CAL-OSHA).
- 8.9 Acceptance:** Qualifications packages are subject to acceptance at any time within ninety (90) days after opening. COUNTY reserves the right to reject any and all qualifications packages, or part of any qualifications package, to postpone the scheduled deadline date(s), to make an award in its own best interest, and to waive any informalities or technicalities that do not significantly affect or alter the substance of an otherwise responsible qualifications package and that would not affect a CONSULTANT'S ability to perform the work adequately as specified.



## 9.0 SELECTION CRITERIA

- 9.1** CONSULTANT(S) should submit information sufficient for Natividad to easily evaluate qualifications with respect to the Scope of Services described herein. Please note that the absence of required information may cause the Qualifications Package received to be deemed non-responsive and may be cause for rejection. County may opt to conduct interviews and utilize references during selection process as well.
- 9.2** County may conduct interviews and utilize references during the selection process if they deem it necessary after reviewing the qualifications packages received in response to this RFQ.
- 9.3** The selection criteria includes;
- 9.2.1 Relevant project experience
  - 9.2.2 Qualified key staff
  - 9.2.3 Quality of proposed work plan
  - 9.2.4 Reference checks
  - 9.2.5 Interviews (if applicable)
- 9.4** County reserves the right to act as its own reference if the proposer has provided services to NMC previously.

## 10.0 PREFERENCE FOR LOCAL CONSULTANTS

- 10.1 Local Preference Policy:** The COUNTY desires, whenever possible, to contract with qualified Local Vendors to provide goods and services to the COUNTY. As per the Local Preference Policy (posted online at <http://www.natividad.com/about-us/vendors>) this solicitation utilizes a “qualifications” method of selection as opposed to a cost based selection only, therefore a *five percent (5%) preference* will be applied to the scoring evaluation for an organization which qualifies as a Local Vendor. Local Vendor is defined as:
- 10.1.1 Vendor either owns, leases, rents or otherwise occupies a fixed office or other commercial building, or portion thereof, having a street address within Monterey County, Santa Cruz County, or San Benito County (the “Area”). Vendor possesses a valid and verifiable business license, if required, issued by a city within the Area or by one of the three counties within the Area when the address is located in an unincorporated area within one of the three counties; and
  - 10.1.2 Vendor employs at least one full time employee within the Area, or if the business has no employees, the business must be at least fifty percent (50%) owned by one or more persons whose primary residence(s) is located within the Area; and

- 10.1.3 Vendor's business must have been in existence, in Vendor's name, within the Area for at least two (2) years immediately prior to the issuance of either a request for competitive bids or request for proposals for the County; and
- 10.1.4 Newly established businesses which are owned by an individual(s) formerly employed by a Local Vendor for at least two (2) years also qualifies for the preference; and
- 10.1.5 If applicable vendor must possess a valid resale license from the State Franchise Tax Board showing vendor's local address within the Area and evidencing that payment of the local share of the sales tax goes to either a city within the Area or to one of the three counties within the defined Area.
- 10.2 An organization which believes it meets the definition of a Local Vendor is advised to read the entire policy (link to policy posted in Section 10.1 above) AND for purposes of this procurement must register as a local vendor with the County via the Vendor Registration Link: Vendor Self Service (VSS) located online at:

<http://www.co.monterey.ca.us/admin/vendorinfo.htm>

**AND firms should submit the *Local Business Declaration Form* with their proposal attached hereto as EXHIBIT B – Local Business Declaration Form.**

## 11.0 CONTRACT AWARDS

- 11.1 No Guaranteed Value: County does not guarantee a minimum or maximum dollar value for any AGREEMENT or AGREEMENTS resulting from this solicitation.
- 11.2 Board of Supervisors: The award(s) made from this solicitation may be subject to approval by the Monterey County Board of Supervisors.
- 11.3 Interview: COUNTY reserves the right to interview selected CONSULTANT(S) before a contract is awarded. The cost of attending any interview is CONSULTANT'S responsibility.
- 11.4 Incurred Costs: COUNTY is not liable for any cost incurred by CONSULTANT in response to this solicitation.
- 11.5 Notification: All CONSULTANTS who have submitted a Proposal or Qualifications Package will be notified of the final decision as soon as it has been determined.
- 11.6 In County's Best Interest: The award(s) resulting from this solicitation will be made to the CONSULTANT(S) that submit(s) a response that, in the sole opinion of COUNTY, best serves the overall interest of COUNTY.

## 12.0 SEQUENTIAL CONTRACT NEGOTIATION

- 12.1 COUNTY will pursue contract negotiations with the CONSULTANT(S) who submit(s) the best Qualifications Package or is deemed the most qualified in the sole opinion of COUNTY, and which is in accordance with the criteria as described within this solicitation. If the contract negotiations are unsuccessful, in the opinion of either COUNTY or CONSULTANT, COUNTY may pursue contract negotiations with the entity that submitted a Proposal which County deems to be the next best qualified to provide the services, or COUNTY may issue a new solicitation or take any other action which it deems to be in its best interest.

## 13.0 AGREEMENT TO TERMS AND CONDITIONS

- 13.1 The term of the AGREEMENT(s) will be for a period of five (5) years.
- 13.2 NMC reserves the right to cancel any AGREEMENT(S), or any extension of any AGREEMENT(S), without cause, with a thirty day (30) written notice, or immediately with cause.
- 13.4 CONSULTANT selected through the solicitation process will be expected to execute a formal AGREEMENT. The AGREEMENT shall be written by COUNTY in a standard format approved by County Counsel, similar or exact to the “**SAMPLE AGREEMENT**” attached hereto this RFQ. Submission of a signed Qualifications Package in response to this RFQ, including the signed RFQ SIGNATURE PAGE, will be interpreted to mean CONSULTANT HAS AGREED TO ALL THE TERMS AND CONDITIONS set forth in the pages of this solicitation and the standard Agreement provisions included in the **SAMPLE AGREEMENT** attached hereto. COUNTY may but is not required to consider including language from the CONSULTANT’S proposed AGREEMENT, and any such submission shall be included in the EXCEPTIONS section of CONSULTANT’S Qualifications Package.

## 14.0 COLLUSION

- 14.1 CONSULTANT shall not conspire, attempt to conspire, or commit any other act of collusion with any other interested party for the purpose of secretly, or otherwise, establishing an understanding regarding rates or conditions to the solicitation that would bring about any unfair conditions.

## 15.0 CONFIDENTIAL, PROPRIETARY, TRADE SECRET INFORMATION

- 15.1 **Confidential, Proprietary, or Trade Secret Information: Qualifications Packages submitted in response to this RFQ are not to be marked, in whole or in part, as confidential or proprietary and must not constitute or contain information that is**

**confidential, proprietary, or trade secret, or subject to any other claim that it is not subject to public disclosure under applicable law.** The County may refuse to consider any Qualifications Package so marked. Qualifications Package s submitted in response to this RFQ will become subject to public disclosure per the requirements of applicable law, including but not limited to the California Public Records Act, Government Code Section 6250 *et seq.*, and the Ralph M. Brown Act, Government Code Section 54950 *et seq.* Please be advised that all information and documents submitted to County by CONSULTANT shall become non-confidential, non-proprietary, non-trade secret, public records without exception and subject to public disclosure by the County at any time without prior notice to CONSULTANT, whether pursuant to a request for disclosure or otherwise, including but not limited to disclosure in the course of County's normal procedures to post on the internet or otherwise make available to the general public documents of interest to the public. All interested CONSULTANTS are advised to consider, when deciding what information to include in their submitted Qualifications Package, that such inclusion will result in the information becoming a fully disclosable public record. The County shall not be liable in any way for disclosure of any such records or part thereof related to this RFQ or any Qualifications Package, including, but not limited to, evaluations, proposals, or any other information or records. In submitting the information and documents, the CONSULTANT is agreeing to the County's release of such information and documents under the Public Records Act or the Brown Act, without further notice to the CONSULTANT, and is agreeing to release, indemnify, and hold harmless the County from any harm that may result to the Proposer or any third party for release of such information and documents. This release and promise to defend and indemnify is given regardless of whether any exemption from disclosure may be available or might have been claimed under applicable law, and CONSULTANT's responding to this RFQ acknowledge that the decision whether to assert any such exemption will be made in the COUNTY'S sole discretion. Submission by an interested CONSULTANT constitutes a complete waiver of any claims whatsoever against the COUNTY, and/or its agents, officers, or employees, that the COUNTY has violated a vendor's right to privacy, disclosed trade secrets, or caused any damage by allowing the Proposal to be inspected.

Additionally, all Qualifications Packages received by COUNTY in response to this RFQ shall become the exclusive property of the COUNTY. The COUNTY reserves the right, without limitation, to make use of any information or ideas contained in the Proposals submitted. By submitting information and documents to the COUNTY as part of this RFQ, CONSULTANTS acknowledge and agree to the terms of this Section 15.1.

## 16.0 DEBARMENT/SUSPENSION POLICY

- 16.1 CONTRACTORS submitting a proposal should not be in current debarment status by the State of California. All CONTRACTORS submitting proposals in response to this solicitation will be cross checked against the California Department of Industrial Labor to ensure it is not in DLSE Debarment status. Any proposal submitted from a business entity with debarment status will not be considered for an agreement award.

## 17.0 PIGGYBACK CLAUSE

- 17.1 Certain County of Monterey Departments, in addition to NMC, may have a need for creating Master Facility Plans at any time during the term of the Agreement(s) resulting from this RFQ. If deemed in the best interest of the County of Monterey then County departments may also offer service Agreements to awarded CONTRACTORS of this RFQ. The Agreement terms and conditions, including pricing, would be identical throughout the piggyback Agreements.

## 18.0 EMERGENCY SITUATIONS

CONTRACTOR acknowledges that NMC plans for the continuity of hospital operations during an emergency, especially sustained incidents, and that collaboration with CONTRACTOR is necessary to maintain continuity of operations. Accordingly, CONTRACTOR shall provide the name and contact information of a representative who shall be available 24 hours a day, 7 days a week, in the event of an emergency:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

*(must list a personal cell phone or other number whereby successful contact is ensured)*

During an emergency, contractor shall use its best efforts to provide NMC with all available supplies, materials, equipment and/or services on a priority basis. The Parties agree that time is of the essence. The delivery of CONTRACTOR's supplies, materials, equipment and/or services will be mutually agreed upon by NMC and CONTRACTOR at the time of order and will be determined based on need and existing conditions. It is understood that current conditions, such as power outages, road closures, and damages to CONTRACTOR's facility and/or equipment, will be taken into consideration.

**SAMPLE AGREEMENT SECTION**

## SAMPLE AGREEMENT BETWEEN NMC AND CONSULTANT

This AGREEMENT is made and entered into by and between County of Monterey, on behalf of Natividad Medical Center, a political subdivision of the State of California, (hereinafter referred to as "COUNTY"), and \_\_\_\_\_, hereinafter referred to as "CONSULTANT."

## SAMPLE RECITALS

County of Monterey ("County") owns and operates Natividad, a general acute care teaching hospital facility located in Salinas, California and various outpatient clinics (collectively, the "Clinic") under its acute care hospital license.

WHEREAS, COUNTY has invited proposals through the Request for Qualifications RFQ# 9600-85 for to provide a **MASTER FACILITY PLAN FOR NATIVIDAD MEDICAL CENTER**, in accordance with the specifications set forth in this AGREEMENT; and

WHEREAS, CONSULTANT has submitted a responsive and responsible proposal to perform such services; and

WHEREAS, CONSULTANT has the expertise and capabilities necessary to provide the services requested.

NOW THEREFORE, COUNTY and CONSULTANT, for the consideration hereinafter named, agree as follows:

## SAMPLE AGREEMENT: 1.0 PERFORMANCE OF THE AGREEMENT

- 1.1 After consideration and evaluation of the CONSULTANT'S proposal, COUNTY hereby engages CONSULTANT to provide the services set forth in RFQ #9600-85 and in this AGREEMENT on the terms and conditions contained herein and in RFQ #9600-85. The intent of this AGREEMENT is to summarize the contractual obligations of the parties. The component parts of this AGREEMENT include the following:

This AGREEMENT including all its attachments, Exhibits and Appendix  
 RFQ #9600-85 plus all associated Addenda  
 CONSULTANT'S Qualifications Package \_\_\_\_\_  
 Certificate of Insurance  
 Additional Insured Endorsements

- 1.2 All of the above-referenced contract documents are intended to be complementary. Work

required by one of the above-referenced contract documents and not by others shall be done as if required by all. In the event of a conflict between or among component parts of the contract, the contract documents shall be construed in the following order: plus, RFQ Addenda #\_\_\_, CONSULTANT's Qualifications Package, Certificate of Insurance and Additional Insured Endorsements.

- 1.3 CONSULTANT warrants that CONSULTANT and CONSULTANT's agents, employees, and subcontractors performing services under this AGREEMENT are specially trained, experienced, competent, and appropriately licensed to perform the work and deliver the services required under this AGREEMENT and are not employees of the County, or immediate family of an employee of the County.
- 1.4 CONSULTANT, its agents, employees, and subcontractors shall perform all work in a safe and skillful manner and in compliance with all applicable laws and regulations. All work performed under this AGREEMENT that is required by law to be performed or supervised by licensed personnel shall be performed in accordance with such licensing requirements.
  - 1.4.1 CONSULTANT must maintain all licenses throughout the term of the AGREEMENT.
- 1.5 CONSULTANT shall furnish, at its own expense, all materials, equipment, and personnel necessary to carry out the terms of this AGREEMENT, except as otherwise specified in this AGREEMENT. CONSULTANT shall not use COUNTY premises, property (including equipment, instruments, or supplies) or personnel for any purpose other than in the performance of its obligations under this AGREEMENT.

### **SAMPLE AGREEMENT: 2.0 SCOPE OF SERVICE**

*(Shall be consistent with Scope of Work defined in this Solicitation and shall include description of goods and/or services provided including timelines and deliverables. Shall also include itemized pricing (including tax), a total price, and all associated payment provisions. Additional conditions may be stated such as details regarding training, meetings, any "Acceptance Testing" or "Notice to Proceed" clauses and project management requirements if applicable.*

### **SAMPLE AGREEMENT: 3.0 TERM OF AGREEMENT**

- 3.1 The initial term shall commence with the signing of this AGREEMENT for a period of 1 year.
- 3.2 CONSULTANT shall commence negotiations for any desired fee changes a minimum of sixty days (90) prior to the expiration of this AGREEMENT in order to be considered.
  - 3.2.1 Both parties shall agree upon changes to fees or to term extension in writing.



- 3.3 COUNTY reserves the right to cancel this AGREEMENT, or any extension of this AGREEMENT, without cause, with a thirty day (30) written notice, or immediately with cause.

#### **SAMPLE AGREEMENT: 4.0 COMPENSATION AND PAYMENTS**

- 4.1 There is no specific dollar amount associated with the Agreement(s) awarded per RFQ #9600-85. Services are on an as-needed basis and shall be authorized by NMC only upon mutual agreement of CONSULTANTS project proposal. Project proposals will be requested as needed and are subject to negotiations.
- 4.2 CONSULTANT billing rates attached to the Agreement shall remain firm for the initial term of this AGREEMENT. Any proposed rate adjustments shall adhere to Section 3.2 and 3.2.1 herein.
- 4.3 Any discount offered by the CONSULTANT must allow for payment after receipt and acceptance of services, material or equipment and correct invoice, whichever is later. In no case will a discount be considered that requires payment in less than 30 days.
- 4.4 CONSULTANT shall levy no additional fees or surcharges of any kind during the term of this AGREEMENT without first obtaining approval from COUNTY in writing.
- 4.5 Tax:  
 4.5.1 Pricing as per this AGREEMENT is inclusive of all applicable taxes.  
 4.5.2 County is registered with the Internal Revenue Service, San Francisco office, and registration number 94-6000524. The County is exempt from Federal Transportation Tax; an exemption certificate is not required where shipping documents show Monterey County as consignee.
- 4.6 COUNTY does not guarantee any minimum or maximum amount of dollars to be spent under this AGREEMENT.

#### **SAMPLE AGREEMENT: 5.0 INVOICES AND PURCHASE ORDERS**

- 5.1 Invoices for all services rendered per this AGREEMENT shall be billed directly Natividad Medical Center at the following address:
- Natividad Medical Center  
 Attn: Accounts Payable  
 PO Box 81611  
 Salinas, CA 93912
- 5.2 CONTACTOR shall reference RFQ #9600-85 on all invoices submitted to Natividad Medical Center. CONSULTANT shall submit such invoices periodically or at the

completion of services, but in any event, not later than 30 days after completion of services. The invoice shall set forth the amounts claimed by CONSULTANT for the previous period, together with an itemized basis for the amounts claimed, and such other information pertinent to the invoice. Natividad shall certify the invoice, either in the requested amount or in such other amount as Natividad approves in conformity with this AGREEMENT, and shall promptly submit such invoice to County Auditor-Controller for payment. County Auditor- Controller shall pay the amount certified within 30 days of receiving the certified invoice.

- 5.3 All Natividad Purchase Orders issued for the AGREEMENT are valid only during the fiscal year in which they are issued (the fiscal year is defined as July 1 through June 30).
- 5.4 Unauthorized Surcharges or Fees: Invoices containing unauthorized surcharges or unauthorized fees of any kind shall be rejected by NMC. Surcharges and additional fees not included the AGREEMENT must be approved by NMC in writing via an Amendment.

## **SAMPLE AGREEMENT: 6.0 DESIGN PROFESSIONAL INDEMNIFICATION**

- 6.1 For purposes of the following indemnification provisions (“Indemnification Agreement”), “design professional” has the same meaning as set forth in California Civil Code section 2782.8. If any term, provision or application of this Indemnification Agreement is found to be invalid, in violation of public policy or unenforceable to any extent, such finding shall not invalidate any other term or provision of this Indemnification Agreement and such other terms and provisions shall continue in full force and effect. If there is any conflict between the terms, provisions or application of this Indemnification Agreement and the provisions of California Civil Code Sections 2782 or 2782.8, the broadest indemnity protection for COUNTY under this Indemnity Agreement that is permitted by law shall be provided by CONSULTANT.
- 6.2 Indemnification for Design Professional Services Claims:  
CONSULTANT shall indemnify, defend and hold harmless COUNTY, its governing board, directors, officers, employees, and agents against any claims that arise out of, or pertain to, or relate to the negligence, recklessness, or willful misconduct of CONSULTANT, its employees, subcontractors, and agents in the performance of design professional services under this Agreement, excepting only liability arising from the sole negligence, active negligence or willful misconduct of COUNTY, or defect in a design furnished by COUNTY, but in no event shall the amount of such CONSULTANT’s liability exceed such CONSULTANT’s proportionate percentage of fault as determined by a court, arbitrator or mediator, or as set out in a settlement agreement. In the event one (1) or more defendants to any action involving such claim or claims against COUNTY is unable to pay its share of defense costs due to bankruptcy or dissolution of the business, such CONSULTANT shall meet and confer with the other parties to such action regarding unpaid defense costs.
- 6.3 Indemnification for All Other Claims or Loss:  
For any claim, loss, injury, damage, expense or liability other than claims arising out of CONSULTANT’s performance of design professional services under this Agreement, CONSULTANT shall indemnify, defend and hold harmless COUNTY, its governing board,

directors, officers, employees, and agents against any claim for loss, injury, damage, expense or liability resulting from or alleging injury to or death of any person or loss of use of or damage to property, arising from or related to the performance of services under this Agreement by COUNTY, its employees, subcontractors or agents, excepting only liability arising from the sole negligence, active negligence or willful misconduct of COUNTY, or defect in a design furnished by COUNTY.

## **SAMPLE AGREEMENT: 7.0 INSURANCE REQUIREMENTS**

### **7.1 Evidence of Coverage:**

7.1.1 Prior to commencement of this AGREEMENT, CONSULTANT shall provide a "Certificate of Insurance" certifying that coverage as required herein has been obtained. Individual endorsements executed by the insurance carrier shall accompany the certificate. In addition, CONSULTANT, upon request, shall provide a certified copy of the policy or policies.

7.1.2 This verification of coverage shall be sent to the County's Contracts/Purchasing Department, unless otherwise directed. CONSULTANT shall not receive a "Notice to Proceed" with the work under this AGREEMENT until it has obtained all insurance required and such, insurance has been approved by COUNTY. This approval of insurance shall neither relieve nor decrease the liability of CONSULTANT.

### **7.2 Qualifying Insurers:** All coverages, except surety, shall be issued by companies which hold a current policy holder's alphabetic and financial size category rating of not less than A- VII, according to the current Best's Key Rating Guide or a company of equal financial stability that is approved by County's Purchasing Officer.

### **7.3 Insurance Coverage Requirements:**

7.3.1 Without limiting CONSULTANT's duty to indemnify, CONSULTANT shall maintain in effect throughout the term of this AGREEMENT a policy or policies of insurance with the following minimum limits of liability:

7.3.1.1 Commercial general liability insurance, including but not limited to premises and operations, including coverage for Bodily Injury and Property Damage, Personal Injury, Contractual Liability, Broadform Property Damage, Independent CONSULTANTS, Products and Completed Operations, with a combined single limit for Bodily Injury and Property Damage of not less than \$1,000,000 per occurrence.

7.3.2 Business automobile liability insurance, covering all motor vehicles, including owned, leased, non-owned, and hired vehicles, used in providing services under this AGREEMENT, with a combined single limit for Bodily Injury and Property Damage of not less than \$1,000,000 per occurrence.

- 7.3.3 Workers' Compensation Insurance, if CONSULTANT employs others in the performance of this AGREEMENT, in accordance with California Labor Code section 3700 and with Employer's Liability limits not less than \$1,000,000 each person, \$1,000,000 each accident and \$1,000,000 each disease.
- 7.3.4 Professional liability insurance, if required for the professional services being provided, (e.g., those persons authorized by a license to engage in a business or profession regulated by the California Business and Professions Code), in the amount of not less than \$1,000,000 per claim and \$2,000,000 in the aggregate, to cover liability for malpractice or errors or omissions made in the course of rendering professional services. If professional liability insurance is written on a "claims-made" basis rather than an occurrence basis, CONSULTANT shall, upon the expiration or earlier termination of this AGREEMENT, obtain extended reporting coverage ("tail coverage") with the same liability limits. Any such tail coverage shall continue for at least three years following the expiration or earlier termination of this AGREEMENT.

#### 7.4 Other Insurance Requirements:

- 7.4.1 All insurance required by this AGREEMENT shall be with a company acceptable to County and issued and executed by an admitted insurer authorized to transact Insurance business in the State of California. Unless otherwise specified by this AGREEMENT, all such insurance shall be written on an occurrence basis, or, if the policy is not written on an occurrence basis, such policy with the coverage required herein shall continue in effect for a period of three years following the date CONSULTANT completes its performance of services under this AGREEMENT.
- 7.4.2 Each liability policy shall provide that COUNTY shall be given notice in writing at least thirty days in advance of any endorsed reduction in coverage or limit, cancellation, or intended non-renewal thereof. Each policy shall provide coverage for CONSULTANT and additional insureds with respect to claims arising from each subcontractor, if any, performing work under this AGREEMENT, or be accompanied by a certificate of insurance from each subcontractor showing each subcontractor has identical insurance coverage to the above requirements.
- 7.4.3 Commercial general liability and automobile liability policies shall provide an endorsement naming the County of Monterey, its officers, agents, and employees as Additional Insureds with respect to liability arising out of the CONSULTANT'S work, including ongoing and completed operations, and shall further provide that such insurance is primary insurance to any insurance or self- insurance maintained by the County and that the insurance of the Additional Insureds shall not be called upon to contribute to a loss covered by the CONSULTANT'S insurance. The required endorsement form for Commercial General Liability Additional Insured is ISO Form CG 20 10 11-85 or CG 20 10

10 01 in tandem with CG 20 37 10 01 (2000). The required endorsement form for Automobile Additional Insured endorsement is ISO Form CA 20 48 02 99.

- 7.4.4 Prior to the execution of this AGREEMENT by COUNTY, CONSULTANT shall file certificates of insurance with County's contract administrator and County's Contracts/Purchasing Division, showing that CONSULTANT has in effect the insurance required by this AGREEMENT. CONSULTANT shall file a new or amended certificate of insurance within five calendar days after any change is made in any insurance policy, which would alter the information on the certificate then on file. Acceptance or approval of insurance shall in no way modify or change the indemnification clause in this AGREEMENT, which shall continue in full force and effect.
- 7.4.5 CONSULTANT shall at all times during the term of this AGREEMENT maintain in force the insurance coverage required under this AGREEMENT and shall send, without demand by COUNTY, annual certificates to County's Contract Administrator and County's Contracts/Purchasing Division. If the certificate is not received by the expiration date, COUNTY shall notify CONSULTANT and CONSULTANT shall have five calendar days to send in the certificate, evidencing no lapse in coverage during the interim. Failure by CONSULTANT to maintain such insurance is a default of this AGREEMENT, which entitles COUNTY, at its sole discretion, to terminate this AGREEMENT immediately.

## **SAMPLE AGREEMENT: 8.0 RECORDS AND CONFIDENTIALITY**

- 8.1 Confidentiality: CONSULTANT and its officers, employees, agents, and subcontractors shall comply with any and all federal, state, and local laws, which provide for the confidentiality of records and other information. CONSULTANT shall not disclose any confidential records or other confidential information received from COUNTY or prepared in connection with the performance of this AGREEMENT, unless COUNTY specifically permits CONSULTANT to disclose such records or information. CONSULTANT shall promptly transmit to COUNTY any and all requests for disclosure of any such confidential records or information. CONSULTANT shall not use any confidential information gained by CONSULTANT in the performance of this AGREEMENT except for the sole purpose of carrying out CONSULTANT's obligations under this AGREEMENT.
- 8.2 County of Monterey Records: When this AGREEMENT expires or terminates, CONSULTANT shall return to COUNTY any COUNTY records which CONSULTANT used or received from NMC to perform services under this AGREEMENT.
- 8.3 Maintenance of Records: CONSULTANT shall prepare, maintain, and preserve all reports and records that may be required by federal, state, and COUNTY and Natividad Medical Center rules and regulations related to services performed under this AGREEMENT.
- 8.4 Access to and Audit of Records: Natividad Medical Center (COUNTY) have the right to examine, monitor and audit all records, documents, conditions, and activities of

CONSULTANT and its subcontractors related to services provided under this AGREEMENT. The parties to this AGREEMENT may be subject, at the request of COUNTY or as part of any audit of COUNTY, to the examination and audit of the State Auditor pertaining to matters connected with the performance of this AGREEMENT for a period of three years after final payment under the AGREEMENT.

- 8.5 CONSULTANT agrees that any information, whether proprietary or not, made known to or discovered by it during the performance of or in connection with this AGREEMENT for COUNTY will be kept confidential and not be disclosed to any other person. CONSULTANT agrees to immediately notify COUNTY in accordance with the Notices Section of this AGREEMENT, if it is requested to disclose any information made known to or discovered by it during the performance of or in connection with this AGREEMENT. These conflict of interest and future service provisions and limitations shall remain fully effective five (5) years after termination of services to COUNTY hereunder.

### **SAMPLE AGREEMENT: 9.0 NON-DISCRIMINATION**

- 9.1 During the performance of this contract, CONSULTANT shall not unlawfully discriminate against any employee or applicant for employment because of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, marital status, age (over 40), sex, or sexual orientation. CONSULTANT shall ensure that the evaluation and treatment of its employees and applicants for employment are free of such discrimination.
- 9.2 The applicable regulations of the Fair Employment and Housing Commission implementing Government Code, §12900, et seq., set forth in Chapter 5 of Division 4 of Title 2 of the California Code of Regulations are incorporated into this AGREEMENT by reference and made a part hereof as if set forth in full.
- 9.3 CONSULTANT shall include the non-discrimination and compliance provisions of the clause in all agreements with subcontractors to perform work under the contract.

### **SAMPLE AGREEMENT: 10.0 OVERRIDING CONSULTANT PERFORMANCE REQUIREMENTS**

- 10.1 Independent Contractor: CONSULTANT shall be an independent contractor and shall not be an employee of Monterey County, nor immediate family of an employee of County. CONSULTANT shall be responsible for all insurance (General Liability, Automobile, Workers' Compensation, unemployment, etc.,) and all payroll-related taxes. CONSULTANT shall not be entitled to any employee benefits. CONSULTANT shall control the manner and means of accomplishing the result contracted for herein.
- 10.2 Minimum Work Performance Percentage: CONSULTANT shall perform with his own organization contract work amounting to not less than 50 percent of the original total AGREEMENT amount, except that any designated 'Specialty Items' may be performed by

subcontract and the amount of any such 'Specialty Items' so performed may be deducted from the original total AGREEMENT amount before computing the amount of work required to be performed by CONSULTANT with his own organization or per a consortium.

- 10.3 Non-Assignment: CONSULTANT shall not assign this contract or the work required herein without the prior written consent of County.
- 10.4 Any subcontractor shall comply with all of COUNTY requirements, including insurance and indemnification requirements as detailed in SAMPLE AGREEMENT.

### **SAMPLE AGREEMENT: 11.0 CONFLICT OF INTEREST**

- 11.1 CONSULTANT covenants that it presently has no interest, and shall not have any interest, direct or indirect, which would conflict in any manner with the performance of services required under this AGREEMENT. Without limitation, CONSULTANT represents to and agrees with COUNTY that CONSULTANT has no present, and will have no future, conflict of interest between providing COUNTY hereunder and any other person or entity (including but not limited to any federal or state environmental or regulatory agency) which has any interest adverse or potentially adverse to COUNTY, as determined in the reasonable judgment of the Board of Supervisors of County.

### **SAMPLE AGREEMENT: 12.0 COMPLIANCE WITH APPLICABLE LAWS**

- 12.1 CONSULTANT shall keep itself informed of and in compliance with all federal, state and local laws, ordinances, regulations, and orders, including but not limited to all state and federal tax laws that may affect in any manner the Project or the performance of the Services or those engaged to perform Services under this AGREEMENT. CONSULTANT shall procure all permits and licenses, pay all charges and fees, and give all notices required by law in the performance of the Services.
- 12.2 CONSULTANT shall report immediately to Natividad's Contracts/Purchasing Officer, in writing, any discrepancy or inconsistency it discovers in the laws, ordinances, regulations, orders, and/or guidelines in relation to the Project of the performance of the Services.
- 12.3 All documentation prepared by CONSULTANT shall provide for a completed project that conforms to all applicable codes, rules, regulations and guidelines that are in force at the time such documentation is prepared.
- 12.4 COMPLIANCE WITH TERMS OF STATE OR FEDERAL GRANT. If this Agreement has been or will be funded with monies received by the County pursuant to a contract with the state or federal government in which the COUNTY is the grantee, CONSULTANT will comply with all the provisions of said contract, to the extent applicable to CONSULTANT as a subgrantee under said contract, and said provisions shall be deemed a part of this

AGREEMENT, as though fully set forth herein. Upon request, COUNTY will deliver a copy of said contract to CONSULTANT, at no cost to CONSULTANT.

### **SAMPLE AGREEMENT: 13.0 PREVAILING WAGE**

- 13.1 CONSULTANT shall comply with Section 1720, et. seq., of the Labor Code, regarding the general prevailing wage rates of per diem, holiday, and overtime wages for each craft, classification, or type of worker needed to execute the AGREEMENT where applicable.

### **SAMPLE AGREEMENT: 14.0 DRUG FREE WORKPLACE**

- 14.1 CONSULTANT and CONSULTANT'S employees shall comply with the County's policy of maintaining a drug free workplace. Neither CONSULTANT nor CONSULTANT'S employees shall unlawfully manufacture, distribute, dispense, possess or use controlled substances, as defined in 21 U.S. Code § 812, including, but not limited to, marijuana, heroin, cocaine, and amphetamines, at any County facility or work site. If CONSULTANT or any employee of CONSULTANT is convicted or pleads no contest to a criminal drug statute violation occurring at a County facility or work site, the CONSULTANT shall, within five days thereafter notify the head of the NMC department/agency for which the AGREEMENT services are performed. Violation of this provision shall constitute a material breach of this AGREEMENT.

### **SAMPLE AGREEMENT: 15.0 TIME OF ESSENCE**

- 15.1 Time is of the essence in respect to all provisions of this AGREEMENT that specify a time for performance; provided, however, that the foregoing shall not be construed to limit or deprive a party of the benefits of any grace or use period allowed in this AGREEMENT.

### **SAMPLE AGREEMENT: 16.0 PERFORMANCE ASSURANCE**

- 16.1 Assurance of Performance: If at any time COUNTY believes CONSULTANT may not be adequately performing its obligations under this AGREEMENT or that CONSULTANT may fail to complete the Services as required by this AGREEMENT, County may request from CONSULTANT prompt written assurances of performance and a written plan acceptable to County, to correct the observed deficiencies in CONSULTANT'S performance. CONSULTANT shall provide such written assurances and written plan within ten (10) calendar days of its receipt of COUNTY's request and shall thereafter diligently commence and fully perform such written plan. CONSULTANT acknowledges and agrees that any failure to provide such written assurances and written plan within the required time is a material breach under this AGREEMENT. If COUNTY accepts the plan it shall issue



a signed waiver.

- 16.1.1 Waiver: No waiver of a breach, failure of any condition, or any right or remedy contained in or granted by the provisions of this AGREEMENT shall be effective unless it is in writing and signed by the party waiving the breach, failure, right or remedy. No waiver of any breach, failure, right or remedy shall be deemed a waiver of any other breach, failure, right or remedy, whether or not similar, nor shall any waiver constitute a continuing waiver unless the writing so specifies.

### **SAMPLE AGREEMENT: 17.0 TRAVEL REIMBURSEMENT**

- 17.1 Travel reimbursements are not permitted for this AGREEMENT.

### **SAMPLE AGREEMENT: 18.0 EMERGENCY SITUATIONS**

- 18.1 CONSULTANT shall provide the name and contact information of a representative who shall be available 24 hours a day, 7 days a week, in the event of an emergency. During the emergency, CONSULTANT shall provide COUNTY with all available supplies, materials, equipment and/or services on a priority basis.
- 18.2 COUNTY expects emergency deliveries to occur within 4 hours of order placement and may be required during evenings, weekends, and holidays. Time is of the essence for delivery during emergency situations. Delivery location(s) and estimated arrival will be mutually agreed upon, by COUNTY and CONSULTANT, at time of order and will be determined based on need and existing conditions. It is understood that current conditions, such as power outages, road closures, and damages to CONSULTANT's facility and/or equipment, will be taken into consideration.

### **SAMPLE AGREEMENT: 19.0 NON-APPROPRIATIONS CLAUSE**

- 19.1 Notwithstanding anything contained in this AGREEMENT to the contrary, if insufficient funds are appropriated, or funds are otherwise unavailable in the budget for COUNTY for any reason whatsoever in any fiscal year, for payments due under this AGREEMENT, COUNTY will immediately notify CONSULTANT of such occurrence, and this AGREEMENT shall terminate after the last day during the fiscal year for which appropriations shall have been budgeted for COUNTY or are otherwise available for payments.

## SAMPLE AGREEMENT: 20.0 FORCE MAJEURE

Neither NMC nor CONTRACTOR shall be liable for nonperformance or defective or late performance of any of its obligations under this Agreement to the extent and for such periods of time as such nonperformance, defective performance or late performance is due to reasons outside such Party's reasonable control (a "**Force Majeure Event**"), including, without limitation, acts of God, war (declared or undeclared), terrorism, action of any governmental authority, civil disturbances, riots, revolutions, vandalism, accidents, fire, floods, explosions, sabotage, nuclear incidents, lightning, weather, earthquakes, storms, sinkholes, epidemics, failure of transportation infrastructure, disruption of public utilities, supply chain interruptions, information systems interruptions or failures, breakdown of machinery or strikes (or similar nonperformance, defective performance or late performance of employees, suppliers or subcontractors); provided, however, that in any such event, each Party shall in good faith use its best efforts to perform its duties and obligations under this Agreement.

If either NMC or CONTRACTOR wishes to claim protection with respect to a Force Majeure Event, it shall as soon as possible following the occurrence or date of such Force Majeure Event, notify the other Party of the nature and expected duration of the force majeure event and shall thereafter keep the other Party informed until such time as it is able to perform its obligations.

## SAMPLE AGREEMENT: 21.0 NOTICES

21.1 Notices required to be given to the respective parties under this AGREEMENT shall be deemed given by any of the following means: (1) when personally delivered to NMC's contract administrator or to CONSULTANT'S responsible officer; (2) when personally delivered to the party's principle place of business during normal business hours, by leaving notice with any person apparently in charge of the office and advising such person of the import and contents of the notice; (3) 24 hours after the notice is transmitted by FAX machine to the other party, at the party's FAX number specified pursuant to this AGREEMENT, provided that the party giving notice by FAX must promptly confirm receipt of the FAX by telephone to the receiving party's office; or, (4) three (3) days after the notice is deposited in the U. S. mail with first class or better postage fully prepaid, addressed to the party as indicated below.

21.2 Notices mailed or faxed to the parties shall be addressed as follows:

TO NMC:  
Natividad Medical Center  
Attn: CONTRACTS DIVISION  
1441 Constitution Blvd Salinas,  
CA 93906  
FAX No.: 831-757-2592  
PHONE 831-755-4111

TO CONSULTANT:  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Fax: \_\_\_\_\_  
Email \_\_\_\_\_

## SAMPLE AGREEMENT: 22.0 LEGAL DISPUTES

- 22.1 CONSULTANT agrees that this AGREEMENT and any dispute arising from the relationship between the parties to this AGREEMENT, shall be governed and interpreted by the laws of the State of California, excluding any laws that direct the application of another jurisdiction's laws.
- 22.2 Any dispute that arises under or relates to this AGREEMENT (whether contract, tort, or both) shall be resolved in the Superior Court of California in Monterey County, California.
- 22.3 CONSULTANT shall continue to perform under this AGREEMENT during any dispute.
- 22.4 The parties agree to waive their separate rights to a trial by jury. This waiver means that the trial will be before a judge.

## SAMPLE AGREEMENT: 23.0 GENERAL PROVISIONS

- 23.1 Counterparts. This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.
- 23.2 Entire Agreement. This Agreement is the entire understanding and agreement of the Parties regarding its subject matter, and supersedes any prior oral or written agreements, representations, understandings or discussions between the Parties. Subject to Section 22.3, no other understanding between the Parties shall be binding on them unless set forth in writing, signed and attached to this Agreement.
- 23.3 Exhibits. The attached Exhibits, together with all documents incorporated by reference in the exhibits, form an integral part of this Agreement and are incorporated by reference into this Agreement, wherever reference is made to them to the same extent as if they were set out in full at the point at which such reference is made.
- 23.4 Severability. If any provision of this Agreement is determined to be illegal or unenforceable, that provision shall be severed from this Agreement, and such severance shall have no effect upon the enforceability of the remainder of this Agreement.
- 23.5 Statutes and Regulations. Any reference in this Agreement to any statute, regulation, ruling, or administrative order or decree shall include, and be a reference to any successor statute, regulation, ruling, or administrative order or decree.

23.6 Waiver. No delay or failure to require performance of any provision of this Agreement shall constitute a waiver of that provision as to that or any other instance. Any waiver granted by a Party must be in writing to be effective, and shall apply solely to the specific instance expressly stated.

**--END OF SAMPLE AGREEMENT SECTION--**

**ATTACHMENTS AND SIGNATURE PAGE**

**RFQ SIGNATURE PAGE**

NATIVIDAD MEDICAL CENTER (COUNTY OF MONTEREY)  
 CONTRACTS DIVISION, Bldg. 860

RFQ # 9600-85  
 ISSUE DATE: Feb. 23, 2022



**RFQ TITLE: Master Facility Plan for Natividad Medical Center**  
**PROPOSALS ARE DUE ON OR BEFORE APRIL 8, 2022**

CONSULTANT MUST INCLUDE THE FOLLOWING IN EACH PROPOSAL (1 original, plus 4 additional hard copies and 1 electronic copy)

- ☐ ALL REQUIRED CONTENT AS DEFINED PER SECTION 7 of this RFQ  
☐ Cost Proposal IN SEALED ENVELOPE (Exhibit A attached)  
☐ Local Business Declaration Form –ONLY IF APPLICABLE (Exhibit B attached)

This Signature Page must be included with your submittal in order to validate your proposal.  
**Proposals submitted without this signature page will be deemed non-responsive.**

☐ **CHECK HERE IF YOU HAVE ANY EXCEPTIONS TO THIS SOLICITATION.**

---

**BIDDERS MUST COMPLETE THE FOLLOWING TO VALIDATE PROPOSAL**

I hereby agree to furnish the articles and/or services stipulated in my proposal at the price quoted, subject to the instructions and conditions in the Request for Proposal package. I further attest that I am an official officer representing my firm and authorized with signatory authority to present this proposal package.

Company Name:				Date:			
Signature:			Phone:				
Printed Name:			Title:				
Email:							

**Confidential or Proprietary Information or Documents**

Company's authorized representative hereby certifies that the information and documents submitted by CONSULTANT to the County in connection with this RFQ do not constitute or contain confidential, proprietary, or trade secret information and hereby agrees that all information and documents submitted to the County by Proposer shall become public, non-confidential, non-proprietary, public records that may be provided by the County to the public at any time without prior notice to the Proposer as indicated in Section 15.1 herein this RFQ.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**EXHIBIT B****COUNTY OF MONTEREY LOCAL BUSINESS DECLARATION FORM**

If a business entity is claiming to be a “Local Vendor” as defined by the “Monterey County Local Preference Policy”, adopted by the Monterey County Board of Supervisors on August 29, 2012, it must certify they meet the definition of “Local Vendor” as defined and in accordance to the adopted policy. Any business entity claiming to be a local business as defined by the policy, shall so certify in writing herein that they meet all of the criteria listed within the policy, which can be accessed online at the following link:

Policy Link:

<http://www.co.monterey.ca.us/government/departments-a-h/administrative-office/contracts-purchasing/procurement-related-policies>

County shall not be responsible or required to verify the accuracy or any such certifications, and shall have sole discretion to determine if a bidder meets the definition of “local vendor” as provided herein.

Any business which falsely claims a preference pursuant to Monterey County Local Preference Policy shall be ineligible to bid on county purchases or contracts for a period of three (3) years from the date of discovery of the false certification(s).

Any business eligible for the local preference who desires to have the preference applied during the award selection process shall return this completed Local Business Preference Declaration form with its proposal or qualifications package response. Upon request, bidder agrees to provide additional information to substantiate this certification.

Select that which is applicable to your business entity (at least one in order for a business to be considered local):

- ☐ It either owns, leases, rents or otherwise occupies a fixed office or other commercial building, or portion thereof, having a street address within the Area. Vendor possesses a valid and verifiable business license, if required, issued by a city within the Area or by one of the three counties within the Area when the address is located in an unincorporated area within one of the three counties as defined as “Area”; and
- ☐ It employs at least one full time employee within the “Area”, or if the business has no employees, the business shall be at least fifty percent (50%) owned by one or more persons whose primary residence(s) is located within the “Area”; and
- ☐ It’s business has been in existence, in its current name, within the “Area” for at least two (2) years immediately prior to the issuance of either a request for proposals or request for qualifications or request for quotations for the County; and
- ☐ It is a newly established business which is owned by an individual(s) formerly employed by a Local

Business for at least two (2) years.

As per the policy: "**Area**" shall mean Monterey County, San Benito County, and Santa Cruz County.

Note; If applicable your organization must possess a valid resale license from the State Franchise Tax Board showing its local address within the "Area" and evidencing that payment of the local share of the sales tax goes to either a city within the "Area" or to one of the three counties within the defined "Area"

**On behalf of my business entity (i.e.; organization) I certify under penalty of perjury that I have both read and confirm that my business entity meets the requirements as outlined within the County's Local Preference Policy for the procurement in question.**

***Business Legal Name (and Dba name if any):*** \_\_\_\_\_

***Business Address:*** \_\_\_\_\_

***City:*** \_\_\_\_\_ ***State:*** \_\_\_\_\_ ***Zip Code:*** \_\_\_\_\_

***Signature of Authorized Representative:*** \_\_\_\_\_ ***Date:*** \_\_\_\_\_

***Title of Authorized Representative:*** \_\_\_\_\_

***Telephone Number:*** (\_\_\_\_) \_\_\_\_\_ ***E-Mail:*** \_\_\_\_\_

**This form must be submitted within a bidder's proposal or qualifications package in order for the County to apply the applicable local preference.**

**Bidders who do not qualify as a local business as per the policy should not submit this form.**



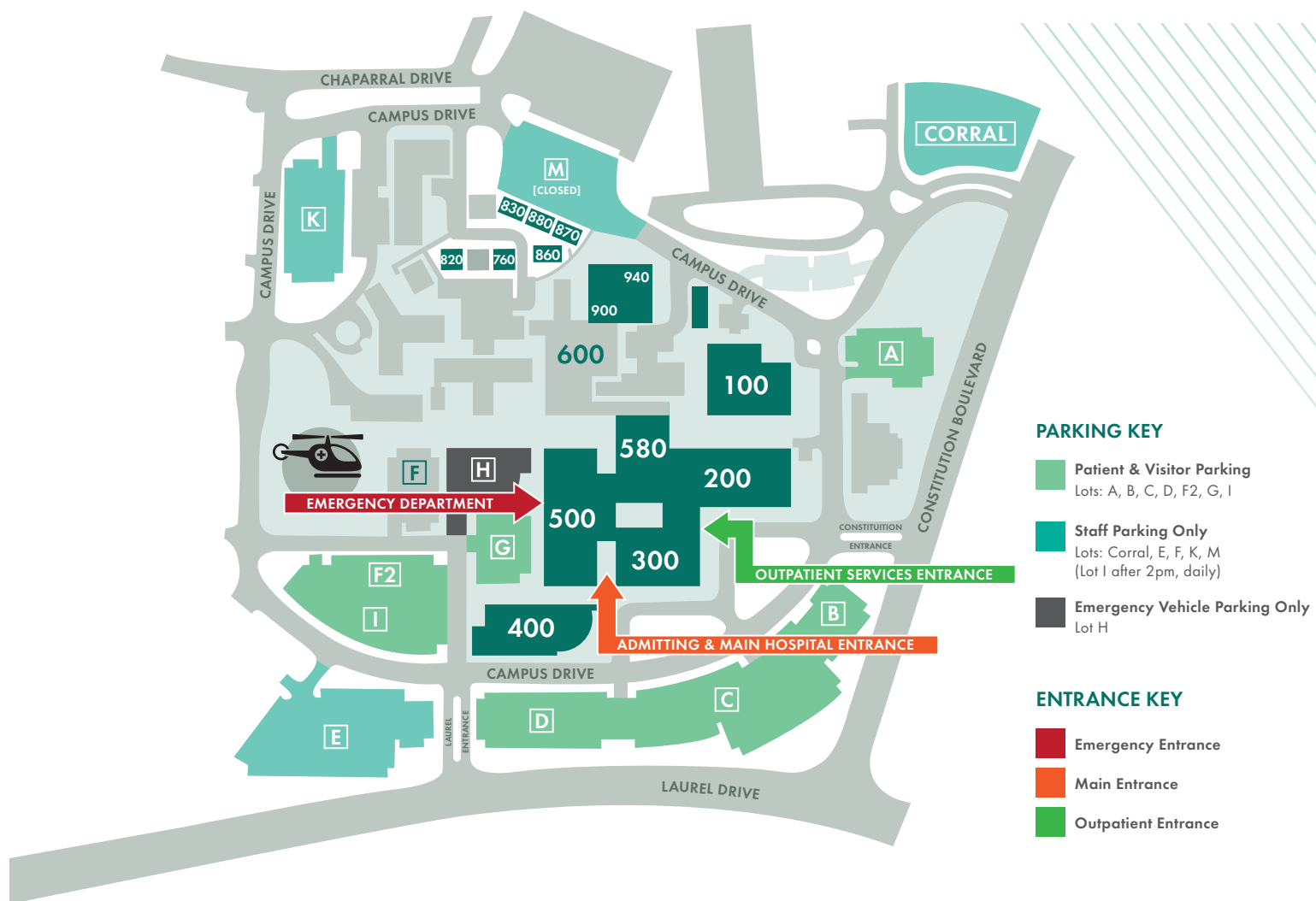
**EXHIBIT A:****Rates/Fee Schedule – TO BE SUBMITTED IN SEALED ENVELOPE WITH PROPOSAL**

Please list all key personnel and fees to be utilized for on-call Architectural Services for NMC:

<b>Position/Title</b> (Indicate Below)	<b>Hourly Rate</b>

<b>Reimbursable Items to be Billed (please list)</b>	<b>Estimated Cost Bills</b> (Note, indicated markup should not exceed 10%)	
	<b>Total Cost (if applicable at the time of RFQ )</b>	<b>% of Markup Calculated</b>

Note- provided there are no rate negotiations and NMC, submitted rates/fees herein will become an attachment to the awarded Agreement(s) and a binding part of the Agreement.



#### PARKING KEY

- **Patient & Visitor Parking**  
Lots: A, B, C, D, F2, G, I
- **Staff Parking Only**  
Lots: Corral, E, F, K, M  
(Lot I after 2pm, daily)
- **Emergency Vehicle Parking Only**  
Lot H

#### ENTRANCE KEY

- **Emergency Entrance**
- **Main Entrance**
- **Outpatient Entrance**

#### BUILDING

#### SERVICE

100	Sam Karas Acute Rehabilitation Center
200	Barnet J Segal Outpatient Services
300	Administrative Services and Financial Counseling
400	Natividad Professional Center
500	Main Hospital/Inpatient Services
580	Outpatient Therapy Services
760	Natividad Immunology Division Outpatient Clinic
820	Volunteer Auxiliary
830	Chamacos
860	Contracts
870	Managed Care
880	Nursing Education
900	Engineering
940	Inpatient Mental Health Services

#### Driving Directions

##### Traveling Hwy 101 (from San Jose or King City):

From Hwy 101, take the Laurel Dr exit. Turn left (east) at the light onto Laurel Dr. Stay on Laurel Dr, approximately two miles, crossing intersections of Main St and Natividad Rd. Turn left at the next light onto Constitution Blvd. The Natividad campus is on the left.

##### Traveling Hwy 1 (from Monterey Peninsula):

From Hwy 1, take the Imjin Pkwy exit heading East. Turn right onto Reservation Rd. Turn left onto Blanco Rd. Turn left onto S Davis Rd. Turn right onto W Rossi St. Turn left onto Sherwood Dr. Keep following Sherwood Dr. as it becomes Natividad Rd. Turn right at E Laurel Dr., then left on Constitution Blvd. The Natividad campus is on the left.

#### Public Transportation

##### Taxi

Green Cab (831) 757-4211  
Salinas Orange Cab (831) 757-7778  
Sal's Taxi (831) 422-7276

##### Bus

MST Transportation | [www.mst.org](http://www.mst.org)  
From Monterey (831) 899-2555 | From Salinas (831) 424-7695

# **Natividad Medical Center Facility # 17353**

1441 Constitutional Boulevard  
Salinas, CA 93906

## **SB 1953 Seismic Compliance Feasibility Study**

### **Feasibility Narrative**

12 December 2019

# HGA

Hammel, Green and Abrahamson, Inc.  
84 West Santa Clara Street, Suite 200  
San Jose, CA 95113  
408.288.7833 | [www.hga.com](http://www.hga.com)

HGA Commission No. 3707-014-00

© 2019 HGA, Inc.

**Part 1 Project Team Directory**

**Part 2 General Statement of SB 1953 Seismic Requirement**

- 2.1 Seismic compliance by January 1, 2030 for SPC and NPC
- 2.2 Upcoming Requirement to Acknowledge Upgrade Responsibilities
- 2.3 Structural Performance Category (SPC) Requirements for Non-conforming Buildings
- 2.4 Non-structural Performance Category (NPC) requirements
- 2.5 Potential Changes in Legislation

**Part 3 Description of Existing Conditions**

- 3.1 Campus map and Building Numbers
- 3.2 Building Inventory
- 3.3 Critical Care Areas and NPC 3 status
- 3.4 Identification of utilities serving Critical Care Areas
- 3.5 Existing Deficiencies
- 3.6 Matrix of building status and required

**Part 4 Options for Structural Performance Category (SPC)**

- 4.1 Option A
- 4.2 Option B
- 4.3 Option C

**Part 5 Options for Nonstructural Performance Category (NPC)**

- 5.1 NPV vs NPC 4D
- 5.2 Operational Plan
- 5.3 NPC / NPC 4D Compliance
- 5.4 NPC 5

**Part 6 Conclusions**

- 6.1 Seismic Performance Category Issues
- 6.2 NPC 4 or NPC 4D Upgrade
- 6.3 NPC 5 Upgrades

**Part 7 Appendix**

- 7.1 MEP
- 7.2 Existing Conditions
- 7.3 Option A
- 7.4 Option B
- 7.5 Option C

--- End of Table of Contents ---

---

## PART 1 - PROJECT TEAM DIRECTORY

### OWNER

#### Natividad Medical Center

1441 Constitution Boulevard,  
Salinas, CA 93906

Andrea Rosenberg, Assistant Administrator	831-783-2562	RosenbergAJ@natividad.com
---	--------------	---------------------------

Brian Griffin, Projects Manager III	831-783-2605	GriffinB@natividad.com
-------------------------------------	--------------	------------------------

### ARCHITECT

#### Hammel, Green & Abrahamson, Inc. (HGA)

84 W. Santa Clara Street, Suite 200  
San Jose, CA 95113  
Tel. No.: 408-288-7833

Dan Rectenwald, Principal-in-Charge	612-867-2377	drectenwald@hga.com
-------------------------------------	--------------	---------------------

Clementine Mainini, Sr. Project Manager	650-714-9142	cmainini@hga.com
---	--------------	------------------

### STRUCTURAL ENGINEER

#### Buehler Engineering, Inc.

5 3<sup>rd</sup> Street, #1125  
San Francisco, CA 94103  
Tel. No.: 415-495-1635

Warren Pottebaum, Sr. Project Manager	415-495-1635	wpottebaum@buehlerengineering.com
---------------------------------------	--------------	-----------------------------------

### MECHANICAL, ELECTRICAL, AND PLUMBING ENGINEER (MEP)

#### Glumac

150 Montgomery Street, 3<sup>rd</sup> Floor  
San Francisco, CA 94104  
Tel. No.: 415-693-7667

Cheryl Nuttall, Mechanical Engineer	415-693-4044	cnuttall@glumac.com
-------------------------------------	--------------	---------------------

Kyle Pace, Electrical Engineer	415-693-4004	kpace@glumac.com
--------------------------------	--------------	------------------

Caiping Su, Mechanical Engineer	415-693-4045	csu@glumac.com
---------------------------------	--------------	----------------

---

## **PART 2 - GENERAL STATEMENT OF SB 1953 SEISMIC REQUIREMENTS**

### **2.1 Seismic compliance by Jan 1, 2030 for SPC and NPC**

Senate Bill 1953 mandates that hospitals work to ensure that their facilities will be operational in the event of a major earthquake event, with compliance required by January 1, 2030. This includes both the structural performance of the buildings, as well as the performance of the non-structural systems within them. This applies only to general acute care hospital buildings and does not include buildings solely providing acute psychiatric care or outpatient functions.

To this end, hospital buildings have been classified using Structural Performance Categories (SPC) and Non-structural Performance Categories (NPC), with ratings of 1 through 5. By now, all hospital buildings are required to meet SPC 2 and NPC 2 or have an extension. By January 1, 2030, all hospital buildings will be required to meet the following:

- Structural Performance Category of SPC 3, SPC 4, SPC 4D or SPC5.
- Non-structural Performance Category of NPC 4 or NPC 4D, plus NPC 5 for the hospital campus as a whole.

The Natividad Medical Center campus only has one building that does not meet the SPC requirement. This is Building 600B, which was built in 1968 and is SPC 2. For non-structural, the entire hospital campus requires upgrades to meet the NPC4 (or NPC 4D) and NPC 5 requirements.

### **2.2 Upcoming Requirement to Acknowledge Upgrade Responsibilities**

As we approach the January 1, 2030 deadlines, the State wants to ensure that every hospital is aware of the remaining work they need to do to meet the SB 1953 requirements. This is reflected in a new requirement in the 2019 California Administrative Code (CAC), Chapter 6, Section 1.5.1, item 1, which reads:

“Before January 1, 2020, the owner of an acute care inpatient hospital where buildings are rated SPC 1 or SPC 2; or where the NPC rating is less than 5, shall submit to the Office an attestation that the board of directors of that hospital is aware that the hospital building is required to meet the January 1, 2030, deadline for substantial compliance with those regulations and standards.”

### **2.3 Structural Performance Category (SPC) Requirements for Non-conforming Buildings**

Prior to 1973 building code, hospital buildings were permitted under local jurisdictions. Post-1973 buildings were permitted by the Office of the State Architect (OSA) and its successor Office of Statewide Health Planning and Development (OSHPD). Under SB 1953 regulations, post-1973 hospital buildings are considered to be conforming and can stay in acute care service past January 1, 2030. Buildings built under pre-1973 codes are considered non-conforming and cannot remain in acute care service past January 1, 2030 unless they a comprehensive materials identification program is executed and the building is seismically upgraded (or otherwise justified by calculation) to meet one of the following standards.

- SPC 5 – Immediate Occupancy. Buildings in compliance with the structural provisions of the Alquist Hospital Facilities Seismic Safety Act, and reasonably capable of providing services to the public following strong ground motion. As defined in ASCE 41-13, Immediate Occupancy means the post-

earthquake damage state in which only very limited structural damage has occurred. The basic vertical- and lateral-force-resisting systems of the building retain almost all of their pre-earthquake strength and stiffness. The risk of life-threatening injury as a result of structural damage is very low, and although some minor structural repairs might be appropriate, these repairs would generally not be required before re-occupancy. Continued use of the building is not limited by its structural condition.

- SPC 4D – Damage Control. As defined in ASCE 41-13, the Damage Control Structural Performance Level is set forth as a midway point between Life Safety and Immediate Occupancy. It is intended to provide a structure with a greater reliability of resisting collapse and being less damaged than a typical structure, but not to the extent required of a structure designed to meet the Immediate Occupancy Performance Level. Although this level is a numerically intermediate level between Life Safety and Immediate Occupancy, the two performance objectives are essentially different from each other. The primary consideration for Immediate Occupancy is that the damage is limited in such a manner as to permit reoccupation of the building, with limited repair work occurring while the building is occupied. The primary consideration for Life Safety is that a margin of safety against collapse be maintained and that consideration for occupants to return to the building is a secondary impact to the Life Safety objective being achieved. The Damage Control Performance Level provides for a greater margin of safety against collapse than the Life Safety Performance Level would. It might control damage in such a manner as to permit return to function more quickly than the Life Safety Performance Level, but not as quickly as the Immediate Occupancy Performance Level does.

Practically speaking, it is usually prohibitively expensive to upgrade a non-conforming building to SPC 5 and very few hospital buildings in California have made use of this option. OSHPD added the SPC 4D option for upgrading non-conforming buildings in the 2016 CBC regulations because the SPC 5 upgrade standard was so high that it was an impediment to seismic compliance. OSHPD regulations provide two paths to achieve SPC 4D status.

- Compliance with the prescriptive requirements of the 1980 California State Building Code, as outlined in Section 501A.3.1 of the 2019 California Existing Building Code (CEBC), or
- Demonstrating that the building meets the Damage Control performance level for the BSE-1E seismic hazard (20% chance of exceedance in 50 years) and the Collapse Prevention performance level for the BSE-2E seismic hazard (5% chance of exceedance in 50 years) per the requirements of ASCE 41-17 and 2019 CEBC section 303A.3.4.5. This requires a detailed analysis of the building behavior, accounting for deficiencies in the original construction details and any seismic retrofit work. This evaluation will also require completion of a comprehensive materials identification program and updated geotechnical and geohazards reports.

In addition, CAC Chapter 6, section 1.4.5.1.3 defines certain deficiencies associated with specific building types that make a building ineligible for upgrade to SPC 4D status.

## **2.4 Non-structural Performance Category (NPC) requirements**

The NPC requirements of the SB 1953 seismic compliance regulations reflect increasing levels of safety for hospital facilities. NPC 2 is focused on life safety for building occupants and requires bracing of non-structural elements and emergency lighting in the egress pathways of the hospital. Similar to the SPC 2

status, this is intended to ensure that occupants are able to exit the building after a major seismic event. NPC 3 requires the bracing of equipment in critical areas of the hospital, including critical care areas, clinical laboratory service spaces, pharmaceutical service spaces, radiological service spaces, and central and sterile supply areas. The intent of NPC 3 is to ensure that these areas of the hospital are able to provide services immediately after a major seismic event. Originally, NPC 3 was supposed to be implemented by 2008, but for most hospitals in the state, this requirement has been delayed to January 1, 2030. NPC 4 extends these anchorage and bracing requirements out to the remainder of the hospital. NPC 5 is intended to address the potential for disruption to local infrastructure and requires that hospitals have emergency electrical power and an on-site supply of water and storage for liquid waste and sewage to allow for 72 hours of operation.

NPC 4D is an alternative to NPC 4 compliance that is being introduced by OSHPD in the 2019 California Administrative Code. The intent is to help mitigate the large financial costs associated with providing anchorage and bracing of non-structural items throughout the hospital facility. At a minimum, the critical areas of the hospital defined in NPC 3 need to have anchorage and bracing, but the hospital facility is allowed to put together an Operational Plan to address potential damage and disruption to services that are not braced. OSHPD has defined three levels of bracing, but has left it to the hospital's discretion to assess their own operations and risk and determine to what extent they want to implement additional non-structural bracing work. This essentially allows the hospital a wide variety of options to balance the risk of unbraced non-structural items and systems with their financial ability to make these improvements.

- Level 1 – NPC 3 bracing in critical areas only, plus an Operational Plan.
- Level 2 – Level 1 plus bracing of utilities passing through other areas of the hospital that provide service to critical care areas. The intent of this is to ensure that services in these critical areas are not disrupted by failures elsewhere in the facility.
- Level 3 – Level 2 plus any other areas of the hospital that the facility determines are critical to the operation or financial health of the facility.

By January 1, 2030, all hospital buildings need to meet the requirements of NPC 4 or NPC 4D and the entire campus needs to meet the requirements of NPC 5.

## **2.5 Potential Changes in Legislation**

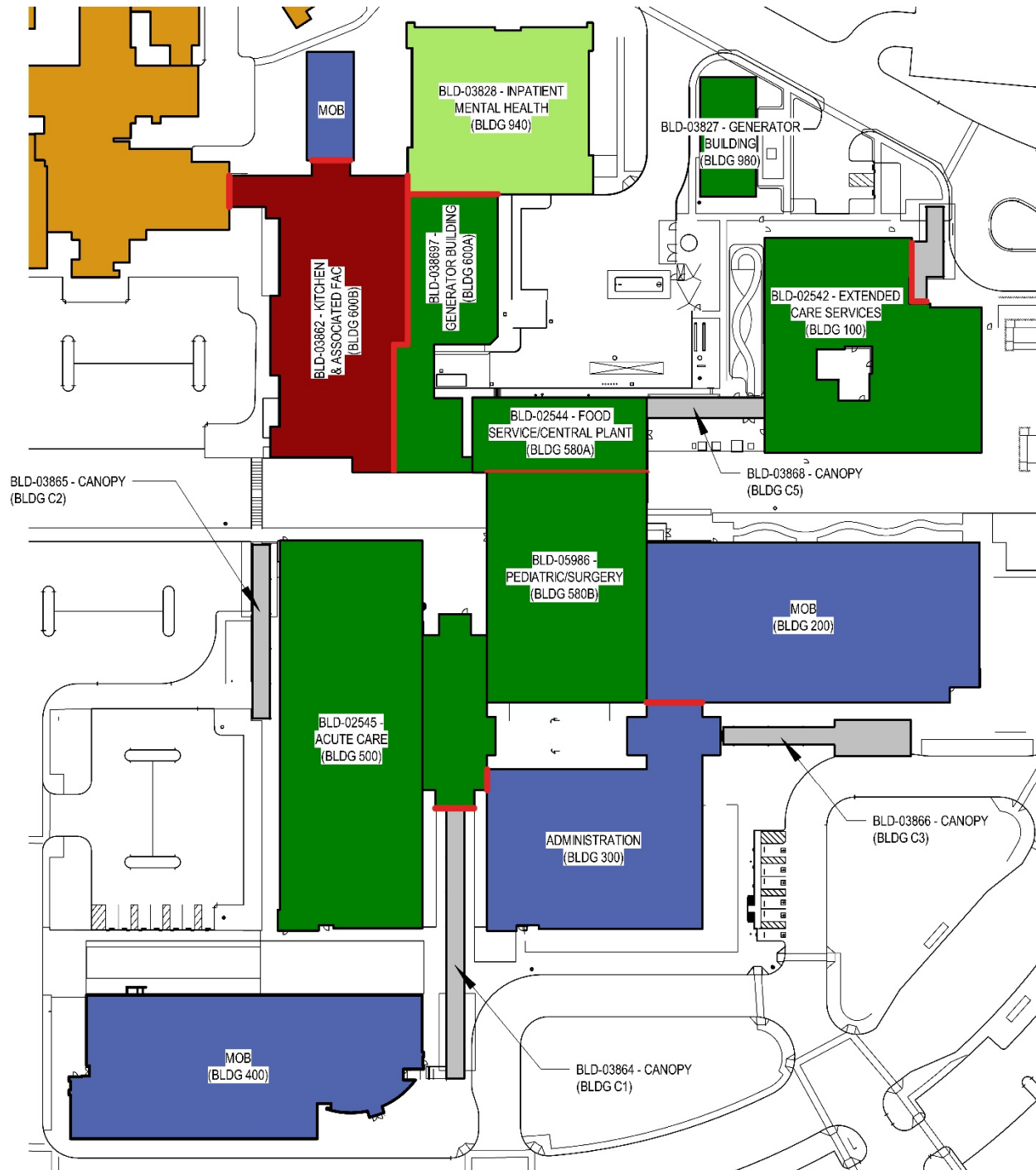
There is potential legislation, Senate Bill 758, currently under consideration in the Legislature. It is scheduled for a second reading and vote in early 2020. If passed, this legislation would reduce the requirements for hospitals to comply with the SB 1953 regulations. It would require the hospital work to ensure that it can remain operational providing critical care services, including Emergency, Surgery, and Imaging functions, for a minimum of 72 hours after a major earthquake event. However, other non-critical services would be allowed to be housed in buildings that only meet the SPC 2 Life Safety performance goal and may not be usable post-earthquake.

--- End of Part 2 ---



## PART 3 – DESCRIPTION OF EXISTING CONDITIONS

### 3.1 Campus map and Building Numbers



---

### 3.2 Building Inventory

Natividad Medical Center's hospital buildings were built at three different times, and each of these sets of buildings are treated differently by OSHPD based on their dates of construction.

- Building 600B was constructed in 1968 based on the 1964 UBC under a permit from the County of Monterey. It is a non-conforming building, rated SPC 2, and it needs to be structurally upgraded to SPC 4D or SPC 5 or removed from acute care service by January 1, 2030. It is currently rated NPC 2, but does not have any critical care areas within it, meaning that it effectively qualifies to be upgraded to NPC3 and, with an Operational Plan to address post-earthquake damage, could be upgraded to NPC 4D Level 1 without construction work.
- Buildings 600A and 940 were constructed in 1986 and 1988, respectively, based on the 1979 California Building Code under Office of the State Architect (OSA) permit H1485. They are conforming buildings, rated SPC 4, and may remain in acute care service past January 1, 2030. They are currently both rated NPC 2, but do not have any critical care areas within them, meaning that they effectively qualify to be upgraded to NPC3 and, with an Operational Plan to address post-earthquake damage, could be upgraded to NPC 4D Level 1 without construction work.

It should be noted that these buildings are dependent on the adjacent SPC 2 Building 600B in a few ways. Both buildings rely on the hallway of Building 600B to provide a contiguous connection to the remainder of the hospital, as well as for roof access. In addition, there appears to be some electrical conduit and low-voltage lines for communications antennae that are supported on the roof of Building 600B but serve items within Buildings 600A and 940. In the event that Building 600B is removed from OSHPD jurisdiction, these issues may need to be resolved.

- Buildings 100, 500, 580A, 580B, and 980, as well as four freestanding canopy structures, were constructed in 1999 based on the 1992 California Building Code under OSHPD permit HS931141-27. (OSHPD records indicate completion of construction in 2005, probably because that corresponds to final closure of the construction project.) They are conforming buildings, rated SPC 5, and may remain in acute care service past January 1, 2030. The NPC ratings are a mixture of NPC 2 and 3, as described below. Because they were built under an OSHPD permit, all original construction, including bracing and anchorage of non-structural components, is assumed to be compliant with NPC 4 standards, with the exception of fire sprinkler end of line bracing, as discussed below. The 2011 NPC 2 / NPC 3 Upgrade project (OSHPD project SS 110173-27) upgraded the fire sprinkler end of line bracing within areas identified at that time as critical care areas in Buildings 500, 580A, 580B, and 980 to bring them up to NPC 3. (When NPC 3 status was conferred upon buildings in 2015 (OSHPD projects SRU-2013-00006, SRU-2013-00007, and SRU-2013-00008), the NPC status of Building 580B was not upgraded. Per a Nov 12, 2019 conversation between Warren Pottebaum at Buehler and Patrick Rodgers at OSHPD, it appears that this was due to an administrative issue – OSHPD did not have Building 580B in its database as a structurally separate building until 2016 and it was therefore not linked to the 2011 NPC 2 / NPC 3 Upgrade project. An administrative submittal is all that should be needed to resolve this issue.) To bring these buildings up to NPC 4, the remaining areas of the building not upgraded in the NPC 2 / NPC 3 Upgrade project, end of line bracing would need to be installed and the hospital would need to provide a letter to OSHPD stating that there has been no unpermitted work installed since the time of original construction. To hospital could meet NPC 4D Level 1 requirements by providing an Operational Plan without construction work.

### **3.3 Critical Care Areas and NPC 3 status**

Areas defined as critical care require anchorage and bracing of non-structural items and systems to meet NPC 3 requirements. Critical Care Areas are defined in the 2019 CAC in Chapter 6. These include intensive care units, coronary care units, angiography laboratories, cardiac catheterization laboratories, delivery rooms, operating rooms, postoperative recovery rooms and similar areas in which patients are intended to be subject to invasive procedures and connected to line-operated, electromedical devices. These areas are shown in the Appendix Existing Conditions drawings.

The critical care areas of Buildings 500, 580A, 580B, and 980 were seismically upgraded to provide fire sprinkler end of line bracing end in the NPC 2 / NPC 3 Upgrade project. Based on the critical care areas shown in these diagrams, it appears that all of the critical care areas of the hospital were upgraded to NPC 3. Please note that it will be necessary to explicitly demonstrate to OSHPD that there are no critical care areas located within the remaining areas of the hospital. This would then be submitted to OSHPD as an SB 1953 re-evaluation of the buildings along with an application for change in NPC status to NPC 3.

### **3.4 Identification of utilities serving Critical Care Areas**

#### Mechanical

Building 500, 580A & B, and 100 are served by the Air Handling Units located on their respective building roofs. Central utility plant (CUP) is located on 3rd floor of building 580 A providing chilled water, heating hot water, low pressure steam, high pressure steam to the five critical care area buildings and AHUs with seismic flexible connections at seismic joints. The ductwork and mechanical piping from AHUs and CUPs are within these buildings.

The CUP also serves the non OSHPD buildings 200 and 300 with chilled water, heating hot water, medical gas. Seismic flexible connections and shut off valves have been provided.

#### Electrical

Building 100, 200, 300, 500, 580A & B are being served by an 8,000A combined main electrical service and 4000A emergency service from Building 980. The existing electrical systems are segregated into normal, life-safety, critical, and equipment branches to serve each building with its own normal, life-safety, critical, and equipment branches.

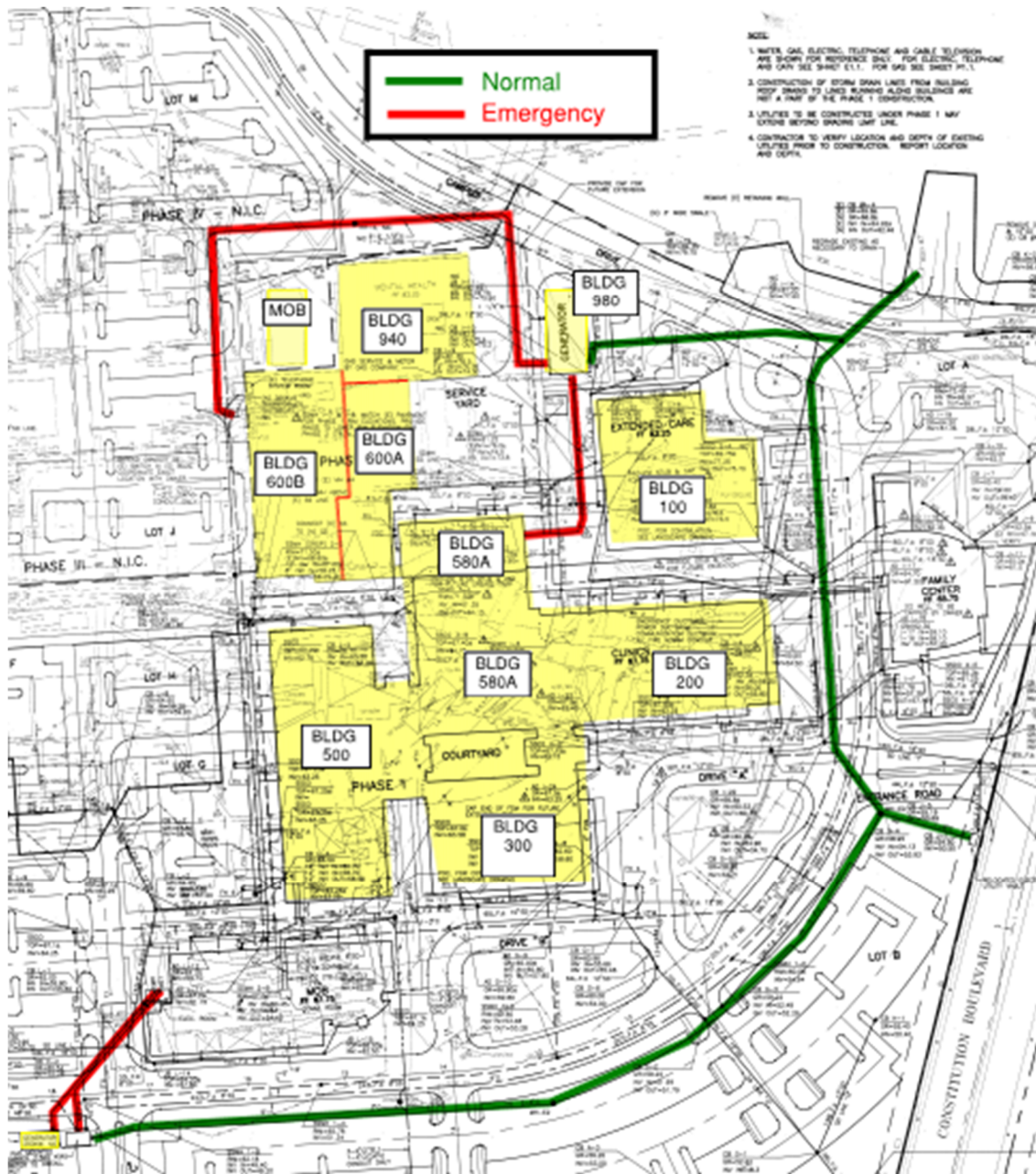
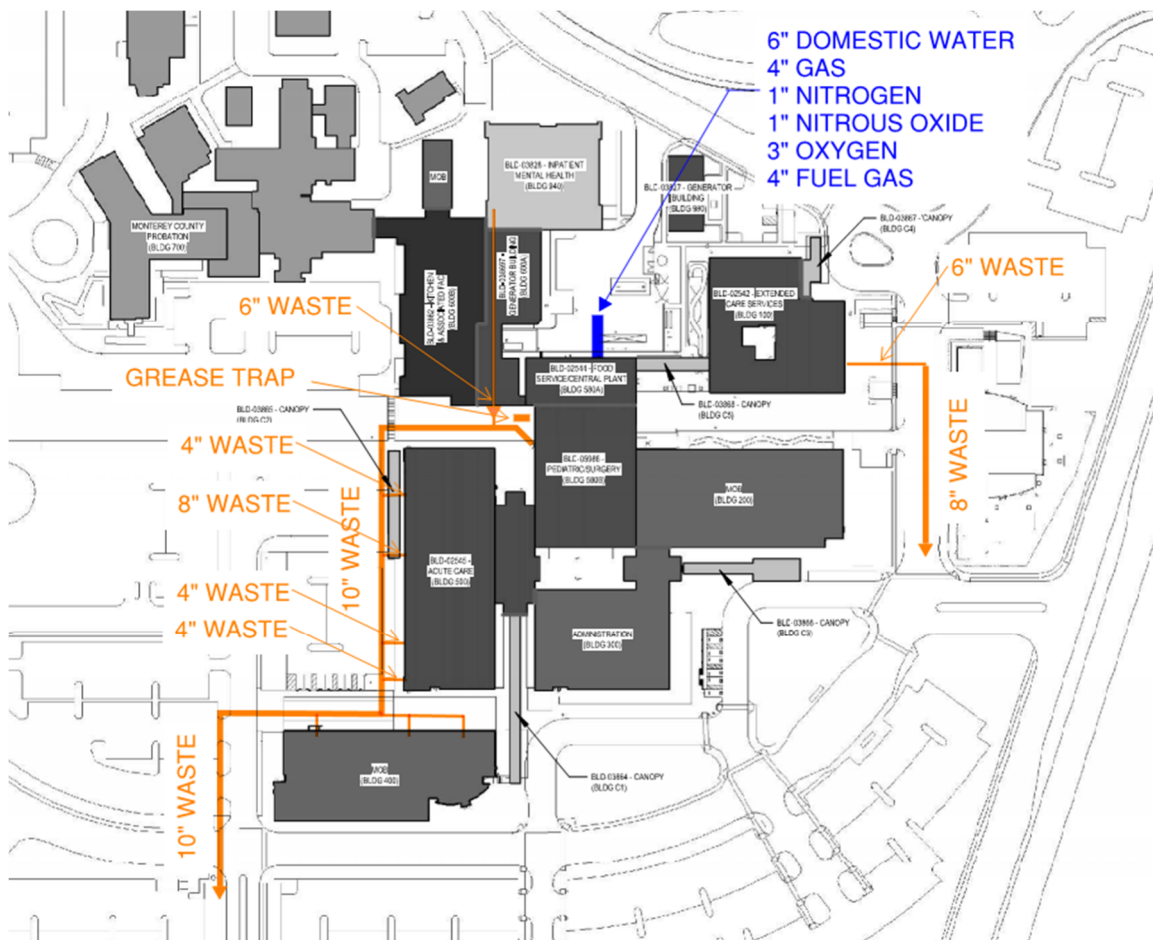


Diagram E1. Existing Electrical Utilities.

### Plumbing

Water service and medical gas service enters from building 580A and distributes to building 580B, 500 and 100. Domestic hot water heaters located on Building 580B 3rd floor central utility plant and serve the other critical area buildings. Multiple sewer connections from buildings to main waste pipe, refer to Diagram P1.

There are not critical areas in the older Buildings 940, 600A or 600B. Domestic water, gas, sewer service are not crossing between the critical care buildings and the older building. Medical gas for Building 940 is feeding from Central Utility Plant in Building 580A with seismic flexible connections at the seismic joints.



**Diagram P1. Plumbing Utilities Connections in 500, 580A, 580B and 100**

### Fire Protection

Building 500, Building 580A and Building 100 have a 6\"/>

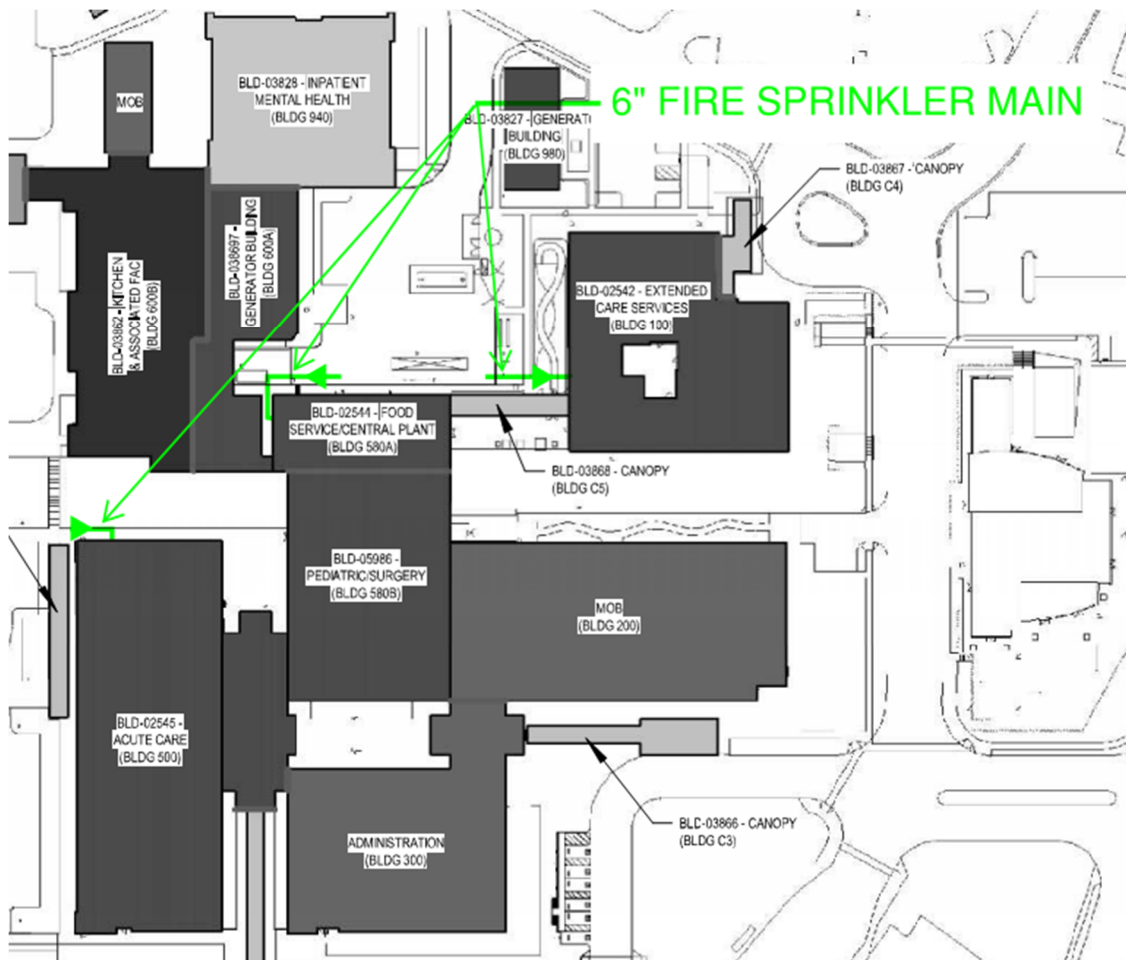


Diagram FP1. Fire Sprinkler Service for Building 500, 580A, 580B and 100

### 3.5 Existing Deficiencies Noted

The existing deficiencies noted below is not a comprehensive list of all the deficiencies on campus. The deficiencies are limited to what could be determined from as-builts and what could be visually inspected in the field. It is unclear to what extent the following items will be triggered by an NPC and SPC upgrade.

#### Building 600A

The existing electrical distribution scheme is mostly being served by normal power. A generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 then a new generator will need to be installed with additional fuel to support additional run time.



The existing lighting is currently all on a normal power system. Two (2) new electrical distribution systems will need to be added to support required Life Safety and Critical loads separately. New distribution switchboards and transfer switches will be required for each distribution type.

The existing mechanical system is currently on a normal system/unsegregated emergency power. A new electrical distribution system will need to be added to support required Equipment loads. New distribution switchboards and transfer switches will be required.

The existing fire alarm system is currently on a normal system. The existing fire alarm system would need to be transferred from the normal electrical system to the life-safety electrical emergency system.

The existing nurse call system is currently on a normal system. The existing nurse call system would need to be transferred from the normal electrical system to the critical electrical emergency system.

Any work within this area will trigger ADA upgrades.

#### Building 600B

The existing electrical distribution scheme is all being served by normal power. A generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 then a new generator will need to be installed with additional fuel to support additional run time.

The existing lighting is currently all on a normal power system. Two (2) new electrical distribution systems will need to be added to support required Life Safety and Critical loads separately. New distribution switchboards and transfer switches will be required for each distribution type.

The existing mechanical system currently has the capability to be on an unsegregated emergency power system, which is currently being fed from the Natividad Medical Center generator. The existing mechanical equipment on the roof does not have name plate information, which makes it difficult to determine where the emergency power source is being supplied from. If it is not being supplied equipment emergency power, a new electrical distribution system will need to be added to support required Equipment loads. New distribution switchboards and transfer switches will be required.

The existing fire alarm system is currently on a normal system. The existing fire alarm system would need to be transferred from the normal electrical system to the life-safety electrical emergency system.

The existing nurse call system is currently on a normal system. The existing nurse call system would need to be transferred from the normal electrical system to the critical electrical emergency system.

Any work within this area will trigger ADA upgrades.

#### Building 940

The existing electrical distribution scheme is mostly being served by normal power. A generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 then a new generator will need to be installed with additional fuel to support additional run time.

The existing lighting is currently all on a normal power system. Two (2) new electrical distribution systems will need to be added to support required Life Safety and Critical loads separately. New distribution switchboards and transfer switches will be required for each distribution type.

The existing mechanical system on the roof is currently being fed unsegregated emergency power from 600A and 600B. Any other mechanical equipment below the roof is likely to be on a normal system. A new electrical distribution system will need to be added to support required Equipment loads. New distribution switchboards and transfer switches will be required.

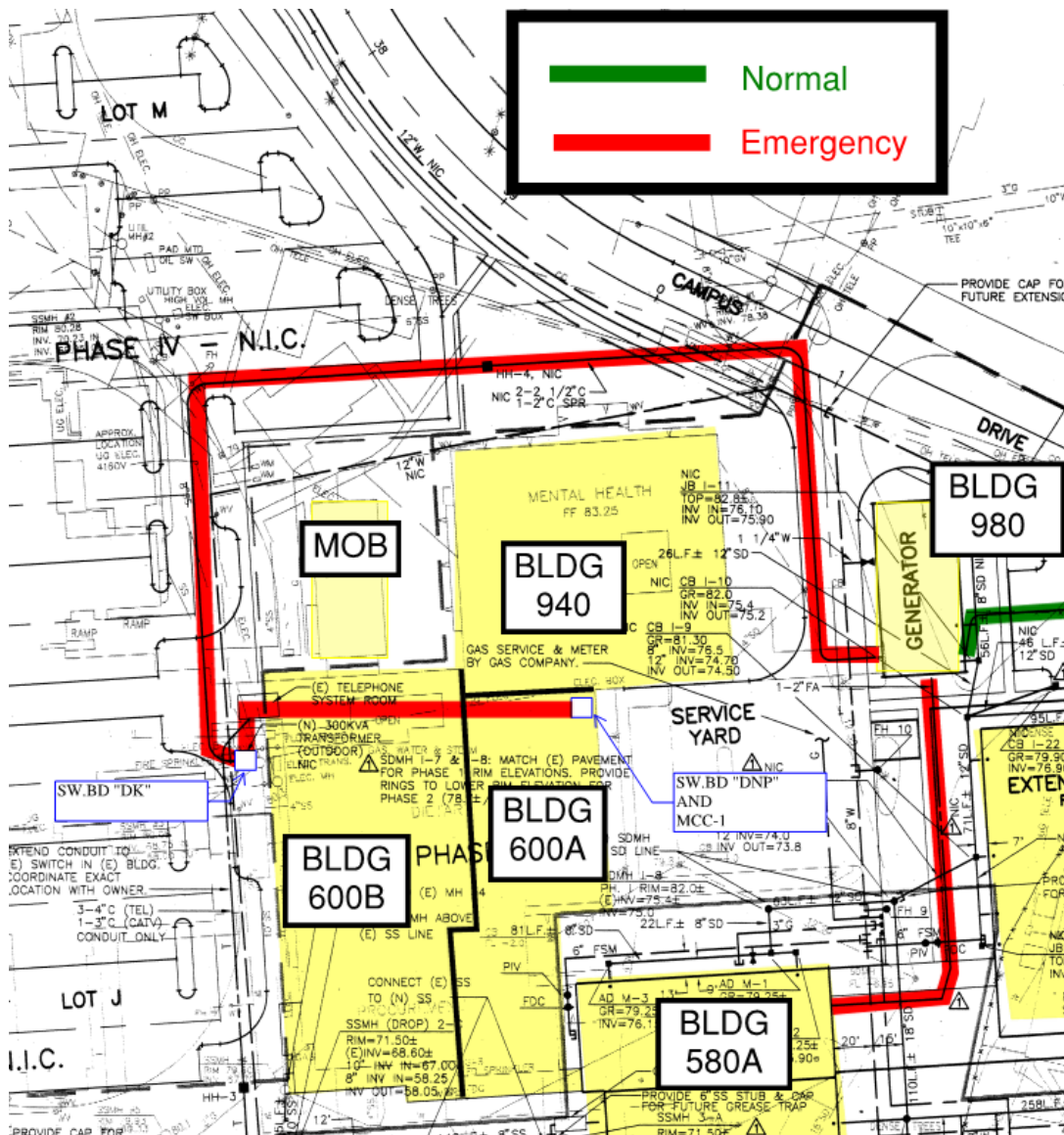


Diagram E2. Documentation showing emergency electrical power routed through existing buildings.



The existing fire alarm system is currently on a normal system. The existing fire alarm system would need to be transferred from the normal electrical system to the life-safety electrical emergency system.

The existing nurse call system is currently on a normal system. The existing nurse call system would need to be transferred from the normal electrical system to the critical electrical emergency system.

Any work within this area will trigger ADA upgrades

### 3.6 Matrix of building status and required

Building ID	Bldg Name	Bldg Num	Building Code	NPC	SPC	Sprinklered	Year Built	Building Permit No.
100	Extended Care Services (Bldg 100)	BLD-02542	1992 CBC	2		5 Fully	1999 (closed out 2005)	OSHPD HS 931141-0
500	Acute Care (Building 500)	BLD-02545	1992 CBC	3		5 Fully	1999 (closed out 2005)	OSHPD HS 931141-0
980	Generator Building (Bldg 980)	BLD-03829	1992 CBC	3		5 Fully	1999 (closed out 2005)	OSHPD HS 931141-0
580A	Food Service / Central Plant (Bldg 580A)	BLD-02544	1992 CBC	3		5 Fully	1999 (closed out 2005)	OSHPD HS 931141-0
580B	Pediatric / Surgery (BLD 580) 580B	BLD-05986	1992 CBC	2		5 Fully	1999 (closed out 2005)	OSHPD HS 931141-0
C1	Canopy	BLD-03864	1992 CBC	2		5	1999 (closed out 2005)	OSHPD HS 931141-0
C2	Canopy	BLD-03865	1992 CBC	2		5	1999 (closed out 2005)	OSHPD HS 931141-0
C3	Canopy	BLD-03867	1992 CBC	2		5	1999 (closed out 2005)	OSHPD HS 931141-0
C4	Canopy	BLD-03868	1992 CBC	2		5 Fully	1999 (closed out 2005)	OSHPD HS 931141-0
940	Inpatient Mental Health (Bldg 940)	BLD-03828	1979 CBC	2		4 Partially	1988	OSA H1485
600A	Material Management (Bldg 600A)	BLD-03827	1979 CBC	2		4 Fully	1986	OSA H1485
600B	Kitchen & Associated Fac (Bldg 600B)	BLD-03862	1964 UBC	2		2 Fully	1968	Local Permit

		Work Needed for Seismic Compliance (NPC 4 / 4D, NPC 5, and SPC 3 / 4 / 5)				
Building ID	Bldg Name	NPC 4	NPC 4D Level 1	NPC 4D Level 2	NPC 4D Level 3	SPC
100	Extended Care Services (Bldg 100)	End of Line Sprinkler Bracing, Letter from facility that all modifications have been permitted by OSHPD	NPC3 (administrative upgrade) plus Operational Plan	NPC3 (administrative upgrade) plus Operational Plan	NPC 4D Level 2 plus selected upgrades as deemed appropriate by the facility	NPC 4 or 4D plus 72 hours water supply, 72 hours liquid waste / sewage storage, and 72 hours of emergency electrical capacity
500	Acute Care (Building 500)		Operational Plan	NPC 4D Level 1 plus Selected Fire Sprinkler End of Line Bracing		
980	Generator Building (Bldg 980)		NPC3 (administrative upgrade) plus Operational Plan			
580A	Food Service / Central Plant (Bldg 580A)					
580B	Pediatric / Surgery (BLD 580) 580B					
C1	Canopy	Full building inventory of non-structural components, Engineering justification of all existing anchorages that don't match original drawings, Anchorage of unanchored items.	NPC3 (administrative upgrade) plus Operational Plan	NPC3 (administrative upgrade) plus Operational Plan	NPC 4D Level 2 plus selected upgrades as deemed appropriate by the facility	OK
C2	Canopy					
C3	Canopy					
C4	Canopy					
940	Inpatient Mental Health (Bldg 940)	Full building inventory of non-structural components, Engineering justification of all existing anchorages that don't match original drawings, Anchorage of unanchored items.	NPC3 (administrative upgrade) plus Operational Plan	NPC3 (administrative upgrade) plus Operational Plan	NPC 4D Level 2 plus selected upgrades as deemed appropriate by the facility	NPC 4 or 4D plus 72 hours water supply, 72 hours liquid waste / sewage storage, and 72 hours of emergency electrical capacity
600A	Material Management (Bldg 600A)					
600B	Kitchen & Associated Fac (Bldg 600B)					
						SPC 4D upgrade or Removal of Acute Care Services or Demolish. See Section 4.2 of this report

--- End of Part 3 ---

## **PART 4 - SPC COMPLIANCE OPTIONS**

### **4.1 Building 600B Structural Evaluation**

#### **Building Description**

Building 600B is a single-story building that is roughly rectangular in plan and was constructed circa 1968. The 1967 Uniform Building Code is listed as the criteria for its structural design. The building has overall dimensions of approximately 195 feet in the north-south direction and 91 feet in the east-west direction. The building's low/main roof is typically approximately 13 feet above the floor, but there is a high roof that is approximately 18.5 feet above the floor. This portion is located toward the south end of the building and is approximately 53 feet square in plan. The building's floor is located several feet above the adjacent grade on the west and south sides of the building.

The building also has a small projection on the middle of the north side that is approximately 13 feet in the north-south direction and 27 feet in the east west direction as well as a small projection on its northwest corner that is approximately 23 feet in the north-south direction and 36 feet in the east-west direction. Both of these projections match the height of the low-roof. A projection also originally existed at the north-east corner of the building, but that projection was later removed as described below.

Building 600B was originally constructed abutting older structures of similar height. This building abutted those structures at the north and north-west projections noted above. 2-inch separations were provided at these adjacent structures. Later, circa 1986, a Buildings 600A and 940 were constructed adjacent to the east. Two-inch clear seismic separations were generally provided at these buildings.

Several small modifications to the 600B building occurred during the construction of the adjacent buildings. The original north-east projection of the 600B building was removed to accommodate the construction of the Inpatient Mental Health building. At this corner a roof beam supporting this corner of the 600B building was framed to a new column in the Inpatient Mental Health building. Additionally, a section of roof was added to the 600B building to enclose a notch along its east side where the Material Management building was constructed. Finally, a 4-foot wide by 8-foot tall doorway was cut into a precast panel at the south end of the east wall of the 600B building. This opening does not appear to have been structurally reinforced, and infill CMU was constructed around the opening which was provided with a one-inch building separation to the adjacent building. No significant structural seismic upgrades have been performed on the 600B building since its original construction.

#### **Vertical Load Carrying System**

The vertical load carrying system of the structure includes corrugated metal decking with light-weight insulating concrete topping at both high and low roofs. The insulating topping varies from 2 to 5.5 inches above the deck. At the high roof, this decking typically spans approximately 6 feet to long-span steel open-web joists. These joists are typically 28 inches deep and supported along the north and south sides of the high roof by 12-inch-deep wide flange steel beams that are in turn supported by structural steel wide flange columns that are typically spaced at 17.5 feet on center. These columns also support framing at the low roof and then carry their load down to concrete grade beams that primarily run east-west. These beams are typically 30 inches wide and 14 inches deep and are typically supported by 12-inch diameter columns that carry the loads down to spread footings which then bear on site soils.

The metal deck at the low roof spans approximately 6 feet to steel wide flange beams that vary in depth from 6 to 16 inches. These beams typically north-south span in a north-south direction up to 37.5 feet to steel wide flange girders that range from 14 to 18 inches in depth. The girders run in an east-west direction and are supported by steel wide flange columns and precast concrete walls. Where the walls occur, these beams run over the top of the walls but bear at discrete points along the walls. The walls and the columns then carry their loads down to the grade beams and below grade concrete columns, and spread footings described above.

The building's concrete floor slab is typically 4 inches thick and bears on site soils. This soil is raised up above the adjacent grade and the building is surrounded by a perimeter cast-in-place retaining wall, varying in height from 2 to 4 feet. Foundations are depressed to be below the level of adjacent grade, even at the interior of the building.

#### **Lateral Force Resisting System**

The lateral force resisting system of the structure includes the metal deck roof diaphragms at the high and low roof. At the high roof, the diaphragm spans to steel columns along the perimeter of the high roof. These columns have pin-type connections at their tops and so cantilever up from the low roof level. At the low roof, the metal deck diaphragm spans to interior and perimeter precast concrete shear walls. Seismic forces are transferred from the deck through welding to the steel roof beams. Those beams welded shim connections at the beam bearing points onto steel channel sections with welded steel studs that were cast to the top edge of the precast wall panels. The precast panels then transfer their forces down to post installed reinforcing dowels into the concrete floor diaphragm. These dowels typically have shallow post installed concrete anchors that connect them to the precast panels. The floor slab appears to be segmental, divided by the grade beams and wall panels and does not appear to have obvious drags or collectors that would carry the floor slab diaphragm forces to lateral force resisting foundation elements at the building perimeter. The floor slabs do not appear to be connected into foundation walls for lateral force resistance at the interior of the building.

#### **SPC-4D Categorization Discussion**

In relation to Building 600B, Section 1.4.5.1.3 of the CAC indicates that buildings with certain deficiencies common to Precast Concrete buildings are not eligible for SPC 4D. These primarily relate to the segmental construction of these types of structures and the brittle nature of older precast panel connections. This section also emphasizes the detrimental performance that these brittle connections may have on other aspects of the building performance. Below is a summary and discussion of the potential deficiencies related to this type of building:

- Panel to Panel Connections – Welded panel to panel connections in non-conforming buildings can be brittle and failure could include pull out of embedded items prior to yielding of a mild steel element. Building 600B has detailing with these same issues, including connection embedment dowels with insufficient development into the precast panels. The code requires that, if panels have these brittle type connections, the structural analysis must ignore the capacity of these connections and assume that the wall panels are acting independently from each other. While it appears that many of the wall panels in this building have relatively good aspect ratios, they have no end connections that would help them prevent panel overturning and some of the panels, if disconnected from each other, are tall and narrow and prone to uplift.
- Wall Openings – This potential deficiency relates to common buildings with a series of large openings on perimeter walls of the building without adequate collectors to transfer seismic forces

to the elements that would resist that force. While Building 600B has numerous wall panels along the building perimeter, collector elements that would help distribute diaphragm forces within the building are not substantial.

- Collectors – This potential deficiency is similar to the Wall Opening deficiency noted above and primarily relates to collection and transfer of seismic forces from portions of the building with fewer lateral force resisting elements to portions with more force resisting elements. As stated above, this building does not appear to have a substantial system of collectors at either the roof or the floor level.

Due to the deficiencies noted above, this building is not a candidate for reclassification to SPC-4D performance level without substantial and extensive remediation of the deficiencies noted above.

#### Potential Structural Deficiencies

The scope of this structural evaluation was limited to qualitative review of the drawings without structural calculations. The following potential deficiencies were identified based on an initial review of the available structural drawings in relation to structural performance consistent with SPC-4D Categorization:

- Wall Anchorage – Anchorage of precast concrete walls to the diaphragm for out-of-plane lateral support appears to be inadequate.
- Deflection Compatibility for Rigid Diaphragms – Concrete columns that are not a part of the lateral force resisting system have non-ductile detailing and have inadequate shear capacity to develop the flexural strength. This may result in shear failure and a reduction in gravity load carrying capacity when subjected to building diaphragm deflections.
- Precast Wall Panel Connection to Foundation – The precast wall panels in this building are not typically connected to the foundations. Typically, they have grouted bearing pads at the foundation, but are not connected to them for shear transfer or overturning. Connection for lateral resistance occurs through reinforcing dowels with post-installed inserts at the floor slab only.
- Girders Supported by Pilasters – Pilasters supporting girders should have at least two ties securing the anchor bolts to prevent concrete breakout of the bolts at the top of the pilaster and potential loss of gravity support.
- Panel to Panel Connections – Panel to panel connections typical in this building have relatively brittle detailing.
- Collectors – This building does not appear to have a substantial system of collectors at the roof or at the floor level. This deficiency relates to collection and transfer of seismic forces throughout the building.
- Discontinuity of Lateral Force Resisting Elements – Transfer of seismic forces from the high roof down to the low roof occurs through moment resisting columns which are connected to low roof framing around the perimeter of the high roof. Transfer of these seismic forces is discontinuous since lateral force resisting elements do not generally exist below this area of the high roof. These

forces must be transferred through the steel framing supporting this area into the low roof diaphragm to be transferred to other areas of the building for resistance.

- Discontinuity of Lateral Force Resisting Elements at Floor Level – Precast concrete wall elements are typically not connected to foundations for lateral force resistance. Instead these walls are dowelled into the floor slabs using post-installed inserts. Lateral force transfer from the floor slab to the building foundations appears to only occur along the outermost perimeter of the building. In addition, short column elements below the grade beams and discontinuous walls that bring loads down to the spread footings below do not have ductile detailing.
- Adjacent Buildings – This building generally has 2-inch structural separation between adjacent buildings. Two locations occur where less separation occurs. One of those locations is at the intersection of Building 600B and the Inpatient Mental Health building 940. At this location a portion of the existing 600B building was removed and one of the remaining beams was supported by a new column within the 940 building. This column connection appears to provide only  $\frac{3}{4}$ -inch of movement in the east-west direction. The other location, which has a 1-inch seismic separation is at a doorway that was cut into the precast wall panel at the southeast corner of Building 600B during the construction of the Material Management Building 600. This CMU infill was provided around the exterior of this opening to fill the gap between the two buildings. It should be noted that, although a 2" per story seismic separation is deemed acceptable between hospital buildings and OSHPD 1R buildings that have been removed from acute care service, buildings being upgraded to SPC 4D are required to have clear seismic separations that comply with ASCE 41-17, which may be larger than 2 inches.

Precast Fascia Panels – Details of the precast concrete fascia panel reinforcement and connections do not appear to be provided in the available drawings. Based on the age of this construction, these panels may have some brittle detailing in their connection design. They also do not appear to be detailed to accommodate seismic drift of the building especially at corner intersections.

### **Conclusions**

Building 600B, has an OSHPD 1 acute classification and is currently rated SPC 2 for its structural performance. Based on current regulations, this non-conforming building would need to be removed from service or brought into SPC 4D compliance prior to January 1, 2030. While two options for achieving compliance with the SPC-4D category are provided in the current building codes, we believe that only feasible for compliance is through extensive seismic retrofit and the use of ASCE 41-17 analysis to demonstrate adequacy of the upgraded structure. During our review, we identified a number of potential seismic deficiencies that we believe would require further consideration and possible remediation in order to achieve SPC-4D compliance. Those potential deficiencies include the following:

- Wall Anchorage
- Deflection Compatibility for Rigid Diaphragms
- Precast Wall Panel Connection to Foundation
- Girders Supported by Pilasters
- Panel to Panel Connections
- Collectors
- Discontinuity of Lateral Force Resisting Elements at Floor
- Grade Beams Supported on Short Non-Ductile Columns
- Adjacent Buildings

- Precast Fascia Panels

If Building 600B were to be removed from acute care service and remain in place, it would need to have a minimum of 2 inches of clear separation to the adjacent structures. It appears that this clearance is present around most of the building perimeter, although there are two locations where modification of the building or one of the adjacent structures may be necessary. In addition, there are other issues relating to fire separations and access and services to adjacent structures that run through Building 600 that would need to be addressed.

#### 4.2 Option A – Building 940 becomes OSHPD 5, Building 600B becomes OSHPD 1R

See Appendix – SPC Option A drawings

- Architectural

Building 940

- Will be reclassified from an OSHPD1 building (General Acute Care Hospital) to an OSHPD 5 building (Acute Psychiatric Hospital).
- Facilities licensed and in operation prior to the effective date of the CBC 2019 code shall not be required to institute corrective alterations or constructions to comply with any new requirements imposed thereby or subsequently, except where specifically required or where the enforcing agency determines that a definite hazard to health and safety exists. –Meet with OSHPD in order to receive their input (Possible ADA upgrades).
- Rooms located in Building 600A currently accessible from the Building 940 corridor side need to receive 90-minute doors.
- A project to remove Acute Care Services might be needed.

Building 600B

- Will be reclassified from an OSHPD1 building (General Acute Care Hospital) to an OSHPD 1R building (buildings removed from acute care services but staying under OSHPD's jurisdiction).
- Facilities licensed and in operation prior to the effective date of the CBC 2019 code shall not be required to institute corrective alterations or constructions to comply with any new requirements imposed thereby or subsequently, except where specifically required or where the enforcing agency determines that a definite hazard to health and safety exists. –Meet with OSHPD in order to receive their input.
- Two functions need to be relocated from the future OSHPD 1R building (600B) to the remaining OSHPD 1 buildings. Those two functions consist out of the clean linen receiving room and the emergency food supply. The mezzanine in the material management Department building 600A would be a possible option to relocate the emergency food supply to.
- ADA improvements need to be made to areas that will house in the future the relocated acute care functions identified in building 600B.
- A project to remove Acute Care Services is needed.

Building 600A

- Exit improvements need to be made to the 600 A buildings, exiting for the remaining OSHPD 1 buildings need to function independently of non-OSHPD buildings.
- A two-hour occupancy separation needs to be created along and within the 600A building separating the OSHPD 1 building from the future non-OSHPD 1 buildings.



- ADA improvements need to be made to departments along the two-hour occupancy separation.
- A new roof access needs to be provided. This can be done through an exterior ships ladder. The roof is currently accessed through 600B which will not be acceptable in the future.
- Material Management will be accessible only through the loading dock and no longer through an interior corridor. This would need to be corrected with a new interior corridor at the loading dock that will connect this basic function with the other OSHPD 1 buildings.
- The CMU enclosure currently located on the loading dock, storing medical gas cylinders would need to be relocated to a different location.

▪ Structural

Building 600B - See Option A drawings

- Locally address the selected locations where the seismic separation to Building 600A is less than 2 inches. This may involve localized chipping and sawcutting of existing members.

▪ Mechanical

Building 940

Building 940 is served by multiple AC units located on the building roof. Equipment and ductwork are within the building; therefore, no modifications are required.

Building 600A

Building 600A is served by mechanical equipment located on the lower roof above material management office. Equipment and ductwork are within the building, therefore no modifications are required. Currently there is no duct crossing between building 600A and the two adjacent buildings, therefore no modifications are required.

Building 600B

Building 600B is served by mechanical equipment located on the building roof. Equipment and ductwork are within the building, therefore no modifications are required.

▪ Electrical

Building 940

The existing electrical distribution scheme is mostly being served by normal power. A generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 then a new generator will need to be installed with additional fuel to support 72 hours of acute care operation. Refer to Section 3.5 for additional deficiencies.

On the roof there is electrical power distributed from 600B to Building 940 and the Engineering Office (non-OSHPD). The power would need to be segregated and relocated elsewhere. Refer to the Appendix for further information.

Building 600B

The existing electrical distribution scheme is mostly being served by normal power. A generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 then a new generator

will need to be installed with additional fuel to support 72 hours of acute operation. Refer to Section 3.5 for additional deficiencies.

It should be noted that additional requirements may be required as determined by OSHPD as the requirements for upgrade/compliance will vary by intended use.

#### Building 600A

The existing electrical distribution scheme is mostly being served by normal power. A generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 then a new generator will need to be installed with additional fuel to support 72 hours of acute operation. Refer to Section 3.5 for additional deficiencies.

There is an existing antenna system on 600B with conduit and pull boxes located on 600A. The existing system along with the parts and components will need to be relocated. Refer to the Appendix for further information.

- Plumbing

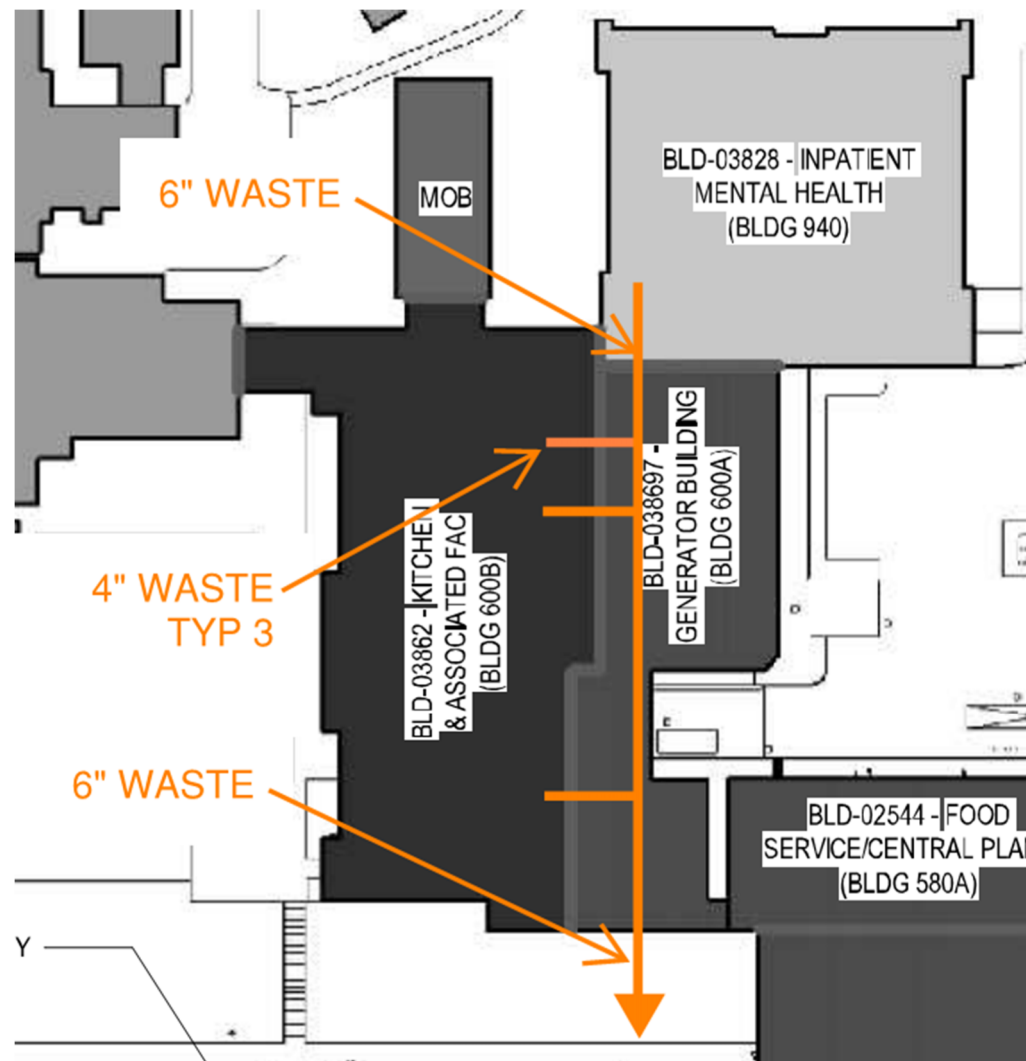
Refer to diagrams P2 and P3 for plumbing connections in Building 600A, 600B and 940. Building 600B and 940 each have a 4" domestic water service connection and Building 600A has a 1 ¼" domestic water service. There is no heating hot water in Building 600A, therefore cold and hot water to the sinks in Building 600A are fed from the adjacent buildings. One sink is near Loading Dock next to Building 600B and another one is a mob sink inside Housekeep Storage adjacent to Building 940. Both cold and hot water piping to these two sinks should be capped. Regarding the sinks in building 600A, there are two options: one option is to remove the sinks, and the second option is to connect the sinks to the 1 ¼" cold water line and provided with instantaneous water heaters or small tank type water heater.

Building 600B has a 2" gas service and it does not serve other buildings. A 3" gas service is feeding from Building 600A to Building 940, seismic Flexible connections and shut off valve are required at the seismic joint between Buildings 600A and 940.

1" oxygen, 1" medical air and 1 ½" medical vacuum piping are feeding from Building 580A passing through 600A and serve Building 940. Seismic flexible connection has been provided at seismic joint between Buildings 580A and 600A. Seismic connection and shut off valves have been provided at seismic joint between Buildings 600A and 940. No modification required.

A 6" underground sewer pipe serves all three buildings 600A, 600B and 940, refer to Diagram P3. No modification should be done to underground pipe.





**Diagram P3. Sewer Connections in Building 600A, 600B and 940.**

- **Fire Protection**

A fire riser closet is located at the border of Building 600A and 600B at the south end of the building, however the riser resides on the 600A side of seismic joint. A small branch serves the corridor in the south end of Building 600B. A seismic flexible connection and a shut off valve are required at this small branch.

In some area of building 600A and 600B are not protected with sprinklers. Building 600A and 600B need to be upgraded to be fully sprinklered.

Fire service for Building 940 is located on the east side of the building. This building is fully sprinklered.

**4.3 Option B – Building 940 becomes OSHPD 5 (or maybe stays OSHPD 1 with new connecting structure), Building 600B is demolished (and maybe replaced either as an OSHPD 1 or an B Occupancy)**

▪ Architectural

See Appendix SPC Option B1 – demo of 600B, 940 reclassified to OSHPD 5 B1

Building 940

- Please see 4.2 Option A - for more information about this building

Building 600B

- If demolished, two acute care functions need to be relocated to the remaining OSHPD 1 buildings (emergency food storage and clean linen receiving room). Other functions that are not GACH related within this building, need to be relocated to either an existing non-OSHPD or OSHPD building. ADA improvements need to be made to those scope of work areas.
- See 4.2 SPC Option 2 for a possible new location for the emergency food storage.

Building 600A

- Please see 4.2 Option A - for more information about this building

See Appendix SPC Option B2 – 600B will be rebuilt as an OSHPD 1, 940 reclassified to OSHPD 5 or stays OSHPD 1

Building 940

- Please see 4. 2 Option A above for this Building if it will be reclassified to an OSHPD 5.
- No scope of work is expected if this building stays under OSHPD 1 jurisdiction.

Building 600B

- If replaced, work needs to occur in phases in order to allow for the continued operation of the three acute care services within this building.
- ADA improvements need to be made to scope of work areas.

Building 600A

- No work is needed within this building.

See Appendix SPC Option B3 – 600B will be rebuilt as an OSHPD 1R, 940 reclassified to OSHPD 5

Building 940

- Please see 4. 2 Option A above for this Building if it will be reclassified to an OSHPD 5.

Building 600B

- If demolished and replaced, two acute care functions need to be relocated to the remaining OSHPD 1 buildings (emergency food storage, clean linen receiving and the patient care corridor). Other functions that are not GACH related within this building, need to be temporary or permanently relocated to either an existing non-OSHPD or OSHPD building.
- ADA improvements need to be made to scope of work areas.

Building 600A

- Please see 4.2 Option A - for more information about this building

▪ Structural

No significant structural modification to the adjacent buildings is required if Building 600B is demolished, except as needed to implement architectural and MEP considerations

- Mechanical

- Building 940

- Building 940 is served by multiple AC units located on the building roof. Equipment and ductwork are within the building, therefore no modifications are required.

- Building 600A

- Building 600A is served by mechanical equipment located on the lower roof above material management office. Equipment and ductwork are within the building. No duct crossing between building 600A and the two adjacent buildings, therefore no modifications are required.

- Building 600B

- Building 600B is served by mechanical equipment located on the building roof. Equipment and ductwork are within the building, which should be demolished.

- Electrical

- Building 940

- The existing electrical distribution scheme is all being served by normal power, however the mechanical equipment on the roof is currently being served from panel emergency switchboard “DK”, which is currently in Building 600B. The electrical distribution serving the mechanical unit will need to be relocated to 940 prior to demolition to 600B.

A generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system to support the additional life safety, critical, and mechanical loads. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 then a new generator will need to be installed with additional fuel to support 72 hours of acute care operation. Refer to Section 3.5 for additional deficiencies.

On the roof of 600B there is electrical power distributed from 600B to Building 940 and the Engineering Office (non-OSHPD). There is mechanical equipment on 940 that is being supplied power from 600A, which is ultimately being served from 600B. The existing power distribution will need to be relocated for these systems prior to demolition of 600B. Refer to the Appendix for further information.

- Building 600B

- The existing electrical distribution scheme is mostly being served by normal power. If a new building is to be built in its place, new emergency systems will be required to be installed. A generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 then a new generator will need to be installed with additional fuel to support 72 hours of acute care operation along with new switchboards and emergency transfer switches to support the electrical distribution.

There is a distributed antennae system on the roof of 600A/B. The system and associated components will need to be relocated to prior to demolition. Refer to the Appendix for further information.

#### Building 600A

The existing electrical distribution scheme is mostly being served by normal power. A generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 then a new generator will need to be installed with additional fuel to support 72 hours of acute care operation. Refer to Section 3.5 for additional deficiencies.

There is a distributed antennae system on the roof of 600A/B. The system and associated components will need to be relocated. Refer to the Appendix for further information.

- Plumbing

Refer to Diagrams P2 and P3 for plumbing connections in Building 600A, 600B and 940. Building 600B and 940 each have a 4" domestic water service connection and Building 600A has a 1 1/4" domestic water service. There is no heating hot water in Building 600A, therefore cold and hot water to the sinks in Building 600A are fed from the adjacent buildings. One sink is near Loading Dock next to Building 600B and another one is a mob sink inside Housekeep Storage adjacent to Building 940. Both cold and hot water piping to these two sinks should be capped. Regarding the sinks in Building 600A, there are two options: one option is to remove the sinks. Another option is to connect the sinks to the 1 1/4" cold water line and provided with instantaneous water heaters or small tank type water heater.

Building 600B has a 2" gas service and it does not serve other buildings. This should be capped back to main.

A 3" gas service is feeding from Building 600A to Building 940, seismic Flexible connections and shut off valve are required at the seismic joint between Buildings 600A and 940.

1" oxygen, 1" medical air and 1 1/2" medical vacuum piping are feeding from Building 580A passing through 600A and serve Building 940. Seismic flexible connection has been provided at seismic joint between Buildings 580A and 600A. Seismic connection and shut off valves have been provided at seismic joint between Buildings 600A and 940. No modification required.

A 6" underground sewer pipe serves all three buildings 600A, 600B and 940, refer to Diagram P3. The three 4" waste pipes from Building 600B shall be capped.

- Fire Protection

A fire riser closet is located at the border of Building 600A and 600B at the south end of the building, however the riser is on the 600A side of seismic joint. A small branch serves the corridor in the south end of Building 600B. This small branch should be capped back to main riser.

In some area of building 600A are not protected with sprinklers. Building 600A needs to be upgraded to be fully sprinklered.

Fire service for Building 940 is located on the east side of the building. This building is fully sprinklered.

#### 4.4 Option C – SPC 4D Upgrade of Building 600B, Building 940 stays as OSHPD 1

- Architectural

See Appendix SPC Option C drawings

Building 940

- No changes will occur within this building

Building 600B – will be retrofitted

- To ensure that the 3 acute care functions and the Patient corridor within this building are not being compromised during construction, construction will most likely occur in phases in order to ensure 24/7 operation without interruption.
- ADA upgrades are required within scope of work areas

Building 600A

- No changes will occur within this building

- Structural

- Building 600B would need to be seismically upgraded to the Damage Control performance level in accordance with ASCE 41 standards. This would involve extensive work to do the following items. For additional information, see section 4.1 of this report.

- Provide positive connections between the shear walls and foundations
- Strengthen the roof to wall connections
- Strengthen the roof diaphragm collector system
- Strengthen or enlarge the existing foundations
- Retrofit the connections of the existing precast concrete cladding panels to the roof structure
- Install fiber-reinforced polymer (FRP) wrapping around the concrete columns
- Modify the edge of roof where it is adjacent to other buildings to increase the width of the existing seismic separation. This may include the removal of concealed precast concrete cladding panels that were abandoned in place when Buildings 940 and 600A were constructed.

- Mechanical

Building 940

Building 940 is served by multiple AC units located on the building roof. Equipment and ductwork are within the building, therefore no modifications are required.

Building 600A

Building 600A is served by mechanical equipment located on the lower roof above material management office. Equipment and ductwork are within the building. No duct crossing between building 600A and the two adjacent buildings, therefore no modifications are required.

Building 600B

Building 600B is served by mechanical equipment located on the building roof. Equipment and ductwork are within the building, therefore no modifications are required.

- Electrical

Building 940



The existing electrical distribution scheme is mostly being served by normal power, except select mechanical equipment on the roof. The emergency power is currently being fed from 600A/B. With 600B being upgraded to SPC 4D and the NPC Rating of 940 and 600B both being NPC 2, the source power will not need to be relocated. If 600A upgrades to NPC 4D then power will need to be relocated if 600B does not maintain an equal or greater NPC rating.

A generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 then a new generator will need to be installed with additional fuel to support 72 hours of acute care operation. Refer to Section 3.5 for additional deficiencies.

#### Building 600B

The existing electrical distribution scheme is all being served by normal power. The building has the capability to have emergency power for the mechanical system, but it was undetermined in the field if the mechanical equipment in the field was supplied from the existing distribution system. Since the mechanical emergency distribution system is fed from a building with a higher seismic service rating (SPC 4 and NPC 3), the equipment will not need to be relocated. However, a generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 or the NPC rating of 600B exceeds the current rating of the Generator Building 980's NPC 3 rating, then a new generator will need to be installed with additional fuel to support 72 hours of acute operation. Generator Building 980 could be upgraded to a higher NPC rating to not relocated equipment if the loads were justifiable to expand. Refer to Section 3.5 for additional deficiencies.

#### Building 600A

The existing electrical distribution scheme is mostly being served by normal power. A generator load test is required to be performed on the campus emergency distribution system to determine the existing capacity of the emergency system. If the generator is determined to not have the existing capacity to support additional loads as determined by OSHPD PIN 38 then a new generator will need to be installed with additional fuel to support 72 hours of acute operation. Refer to Section 3.5 for additional deficiencies.

- Plumbing

Refer to diagrams P2 and P3 for plumbing connections in Building 600A, 600B and 940. Building 600B and 940 each have a 4" domestic water service connection and Building 600A has a 1 ¼" domestic water service. There is no heating hot water in Building 600A, therefore cold and hot water to the sinks in Building 600A are fed from the adjacent buildings. One sink is near Loading Dock next to Building 600B and another one is a mob sink inside Housekeep Storage adjacent to Building 940. Seismic flexible connections should be provided at the cold water and heating hot water pipe at the seismic joints.

Building 600B has a 2" gas service and it does not serve other buildings. A 3" gas service is feeding from Building 600A to Building 940, seismic Flexible connections is required at the seismic joint between Buildings 600A and 940.

1" oxygen, 1" medical air and 1 ½" medical vacuum piping are feeding from Building 580A passing through 600A and serve Building 940. Seismic flexible connection has been provided at seismic joint between Buildings 580A and 600A. Seismic connection and shut off valves have been provided at seismic joint between Buildings 600A and 940. No modification required.

A 6" underground sewer pipe serves all three buildings 600A, 600B and 940, refer to Diagram P3. No modification should be done to underground pipe.

- Fire protection

A fire riser closet is located at the border of Building 600A and 600B at the south end of the building, but mostly on the building 600B side, however the riser is on the 600A side of seismic joint. A small branch serves the corridor in the south end of Building 600B. A seismic flexible connection is required at this small branch.

In some areas of building 600A and 600B are not protected with sprinklers. Building 600A and 600B need to be upgraded to be fully sprinklered.

Fire service for Building 940 is located on the east side of the building. This building is fully sprinklered.

--- End of Part 4 ---

## **PART 5 - OPTIONS FOR NPC COMPLIANCE**

### **5.1 NPC 4 vs NPC 4D**

NPC 4 requires that all non-structural items and systems be properly anchored and braced throughout the hospital. NPC 4D is an alternative to NPC 4 compliance that is being introduced by OSHPD in the 2019 California Administrative Code. The intent of NPC 4D is to help mitigate the intrusive work and potentially large financial costs associated with providing anchorage and bracing of non-structural items throughout the hospital facility. If the hospital chooses to pursue NPC 4D compliance for a building, the critical areas of that building, as defined in NPC 3, still need to have proper anchorage and bracing, but the hospital facility is allowed to put together an Operational Plan to address potential damage and disruption to services that are left unbraced.

It is important to note that the hospital takes on additional risk of damage and disruption to services in areas where NPC 4D is implemented. If, for example, fire sprinkler end of line bracing is not installed and this results in broken pipes and flooding of some areas of the hospital, the associated costs may well exceed what it would have cost to install bracing.

### **5.2 Operational Plan**

The minimum content of an operational plan is defined by CAC Chapter 6 section 11.2.3(f). For minimum compliance with NPC 4D the facility must prepare an owner-approved Operational Plan specifying how it will repair nonstructural damage and bring systems and services back on line, or provide them in an alternative manner to accommodate continuation of critical care operations. This plan may include any other units or departments that hospitals may wish to keep operational for a minimum of 72 hours after a seismic event or other natural or human-made disaster. The Operational Plan shall be filed with the Office and shall include an executive summary, a detailed narrative of management of utilities, provisions, sustainability, and alternate means. The Operational Plan shall include, but is not limited to, the following topics for each unit or service that is not in compliance with NPC 4: Level 1 areas, Central and sterile Supplies, Dietary, Pharmaceutical services, Emergency power, Water supply, Medical gasses, Ventilation, and Waste disposal. The hospital shall document any changes and file the revised plan with OSHPD.

### **5.3 NPC 4 / NPC 4D Compliance**

For the newer buildings on campus, NPC 4 compliance should consist only of providing fire sprinkler end of line bracing in the areas that were not addressed in the 2011 NPC 2 / NPC 3 Upgrade project, plus providing an attestation letter from the hospital to OSHPD stating that unpermitted work has not been installed in these buildings. It should be noted that the documentation effort involved in creating an NPC 4D operational plan for these buildings may be quite large compared to the required end of line bracing work.

For the older buildings on campus (Buildings 600A, 600B, and 940), the decision to upgrade to NPC 4 or NPC 4D will be significantly affected by how the SPC compliance for Building 600B is addressed. For those buildings remaining in OSHPD 1 jurisdiction, either NPC 4 or NPC 4D upgrade would require

conducting an inventory of the non-structural items and systems in the building. At that point, the hospital could pursue any of the following options:

- Upgrade all of the identified deficiencies to meet NPC 4
- Upgrade none of the identified deficiencies and provide an Operational plan to meet NPC 4D
- Upgrade selected items to minimize risk, considering the impact to the operations of the facility and the cost of implementing the bracing. For example, the bracing of storage shelving and utilities in Building 600A may be relatively inexpensive to implement because a lot of the building is warehouse space, without ceiling or wall finishes that would need to be removed for access to the bracing of MEP systems.

#### 5.4 NPC 5

The buildings will need to meet the requirements of NPC 4 or NPC 4D and the following additional requirements to meet continual emergency operations:

##### Emergency Water Supply

As required by California Plumbing code 615.4, acute care hospitals shall have an on-site water supply sufficient to operate essential hospital utilities and equipment to support 72 hours of continuing operation in the event of an emergency.

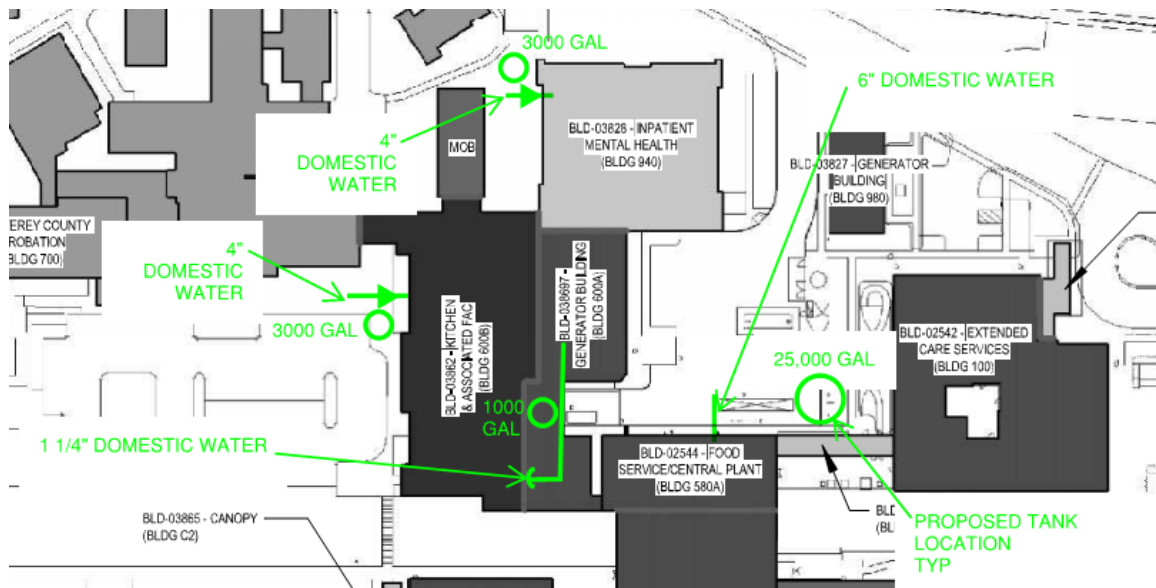
Due to the capacity of required on-site water storage, it is recommended that the water be distributed locally to each building in lieu of having a central water tank. Refer to Diagram P4 for proposed locations for water storage tanks. Water storage recommendations for each water service is below:

- 6" cold water for Buildings 500, 580A, 580B: 25,000 gallons.
- 4" cold water for Building 940: 3000 gallons, this is not required if Building 940 is removed from OSHPD 1 acute care service as part of the SPC compliance strategy.
- 4" cold water for Building 600B: 3000 gallons, this is not required if Building 600B is removed from OSHPD 1 acute care service as part of the SPC compliance strategy.
- 1 ¼" cold water for Building 600A: 1000 gallons, locate the tank on the loading dock area.

Facility has options on water tank setup.

- Option 1 is to provide multiple smaller tanks and to make use the already own 15,000-gallon tank to meet the water storage requirement.
- Option 2 is to provide one tank at each required water service.

Each water storage station needs to be modified with fittings for tank water integration. A Water pump is necessary to provide the required water pressure.

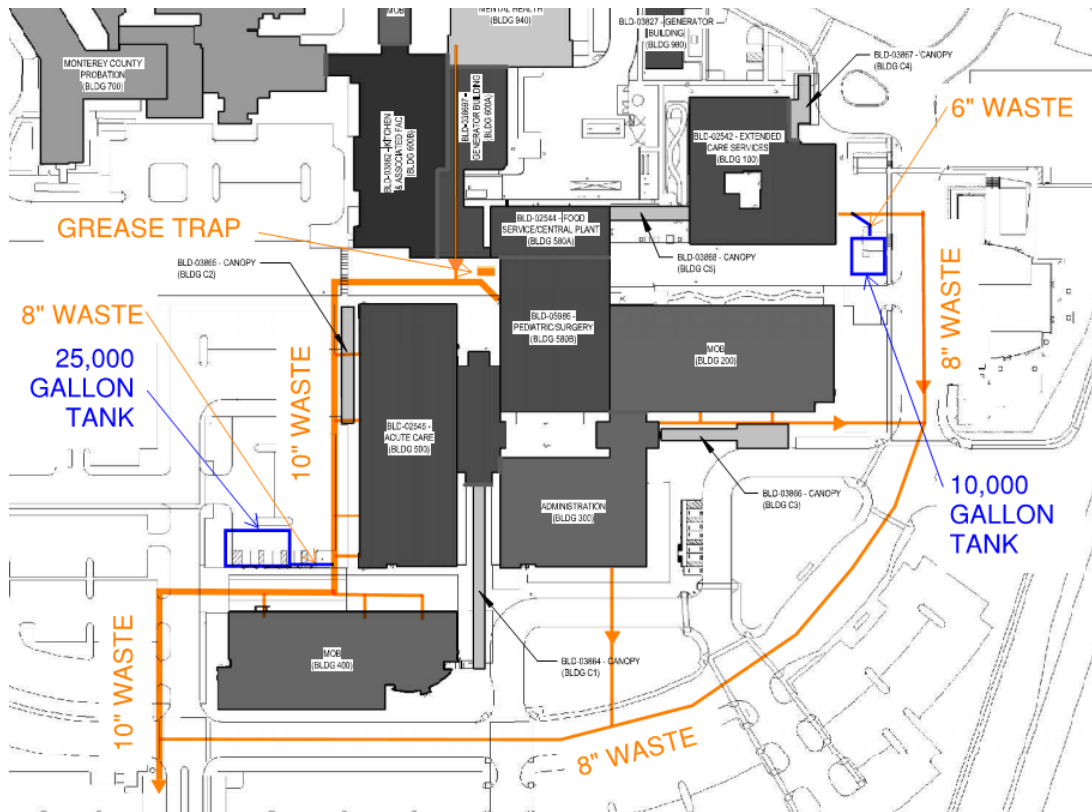


#### Liquid Waste & Sewage Storage

As required by California Plumbing code 727.0, acute care hospitals shall have an on-site holding tanks to store sewage and liquid waste sufficient to operate essential hospital utilities and equipment to support 72 hours of continuing operation in the event of an emergency. Refer to Diagram P5 for proposed locations of sewage storage tanks. Tank size recommendations is below:

- 20,000 gallons tank to service building 940, 600A, 600B, 500, 580A, 580B
- 6,000 gallons tank to service Building 100

The tanks should be underground, inlet to the tank should be at the same elevation of the existing sewage pipe. Diverting valve is required at the point of connection. In the event of emergency, sewage flow is manually diverted to the sewage tank. After the event, a sewage truck to remove the sewage off the site.



**Diagram P5. Proposed Location of sewer storage tanks, not to scale.**

#### Generator and Emergency Electrical Power

The main requirement for a facility to upgrade to NPC 5 is to have a total of 72 hours of back up emergency power. On the campus there are two (2) existing 2187 KW/ 1750 KVA, 480V, 3-Phase, 4-wire 3516 Caterpillar generators running in parallel with each other providing roughly 4,000A of emergency power to the new Natividad Medical Center. There is also a local 20,000 Gallon underground fuel tank supporting both generators. With two generators running at 100% load, the generator is designed to run a total of 80 hours with the estimated consumption rate of 248.2 Gal/Hour. There is enough fuel capacity to supply the required emergency power run time for the new Natividad Medical Center. The exact location of the underground tank could not be field verified, however permit documentation and service information was found on site. Refer to the Appendix for information on generator underground fuel tank capacity and information on the generator.

Building 600A, 600B, and 940 are currently being ran on normal power only. Additional generator power and gasoline runtime will be required to meet NPC 5. Please refer to Section 3.5 for additional information on existing deficiencies on campus.

--- End of Part 5 ---

## **PART 6 - CONCLUSIONS**

### **6.1 Seismic Performance Category (SPC) Issues**

The only building on the Natividad Medical Center campus that is non-compliant for SPC is Building 600B, which is rated SPC 2. This is a single-story concrete tilt-up building constructed in 1968. It has a significant number of seismic deficiencies that would need to be addressed to bring it up to the SPC 4D Damage Control performance level. The work required to effect this seismic upgrade would be both extensive and intrusive to the current uses, and the seismic retrofit cost would likely be a large percentage of the cost to build a new building of the same size.

As an alternative to seismic upgrade, Building 600B could also be either demolished or converted to OSHPD 1R status through the Removal of Acute Care Services (RACS) process. Both of these alternate scenarios have impact on the adjacent Building 600A and Building 940 structures. These are detailed in section 4 of the report.

### **6.2 NPC 4 or NPC 4D Upgrade**

Although the hospital has buildings listed as both NPC 2 and NPC 3, the whole campus appears to effectively qualify for NPC 3 status in its current state. This is because the NPC 3 requirements only apply to critical care areas of the hospital, and those areas were upgraded in the 2011 NPC 2 / NPC 3 project. An administrative filing with OSHPD would be required, however, to formally attain NPC 3 status for the buildings currently listed as NPC 2.

For the newer portions of the hospital that were constructed in 1999, upgrading from NPC 3 to NPC 4 would only require the installation of fire sprinkler end of line bracing. There is the alternative path of upgrading these buildings to NPC 4D Level 1, which would only require an Operational Plan, or to NPC 4D Level 2 or 3, which would also involve providing fire sprinkler end of line bracing in portions of these buildings. When making the decision on which NPC level to bring these buildings up to, it is important to consider the potential cost and disruption to services of water damage due to a broken fire sprinkler pipe or head relative to the up-front cost of providing end of line bracing.

For the older buildings of the hospital, Buildings 600A, 600B, and 940, an upgrade to NPC 4 is significantly more intrusive and costly. At a minimum, it will require a complete inventory of the non-structural components and systems in these buildings and as-built documentation of their bracing. For all of Building 600B and for those elements in Buildings 600A and 940 that do not exactly match the detailed conditions in the original approved drawings, structural calculations will be required to justify the adequacy of the existing bracing. Any bracing or anchorage found to be deficient would then need to be upgraded. An upgrade of the buildings to NPC 4D would require an inventory of the non-structural components and systems in these buildings, but with the creation of an Operational Plan for repairs in the event of a failure instead of the extensive as-built documentation and calculation.

It should be noted that the hospital can choose to upgrade to either NPC 4 or NPC 4D on a building by building basis. For example, the hospital could choose to upgrade the newer portions of the hospital to NPC 4 to minimize risk in those area and to upgrade only to NPC 4D in Buildings 600A, 600B, and 940 to minimize documentation of existing systems. In addition, the NPC compliance strategy needs to be coordinated with the options for SPC compliance. For example, if Building 600B is converted to OSHPD

1R outpatient use (or demolished), it would no longer be subject to the SB 1953 seismic compliance requirements, including NPC upgrade. Similarly, if Building 940 were converted to OSHPD 5 acute psychiatric care use, it also would not be subject to the seismic compliance requirements.

### **6.3 NPC 5 Upgrades**

NPC 5 requirements for water supply, liquid waste / sewage storage, and emergency power are in addition to the NPC 4 or 4D requirements and apply to all OSHPD 1 acute care buildings in the hospital.

It is recommended to add multiple water supply tanks, associated pumps and liquid water / sewage tanks on the campus.

Existing emergency power is adequate for the newer Natividad Medical Center buildings but needs upgrades for the older buildings.

--- End of Part 6 ---



## PART 7 – APPENDIX

### 7.1 MEP



Photo of fire alarm panel connected to Panel C which is normal power.



Photo of an electrical junction box on the roof. The electrical conduit extends to serve load in Building 940 and the admin building.



Photo of distributed antennae system on the roof.



Photo of panels serving central security system loads.



Photo of nurse call on normal power.



Photo of existing 2187 KW/ 1750 KVA generator.

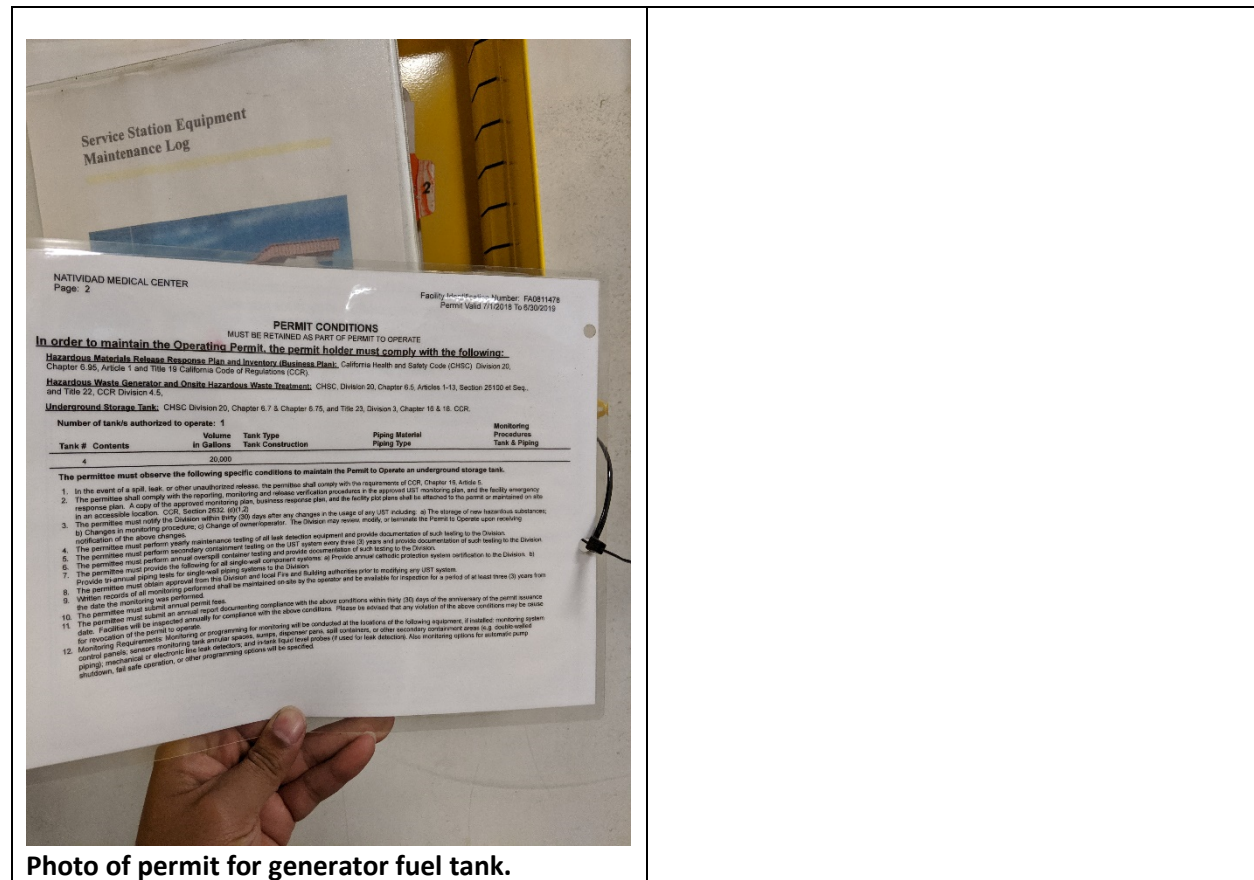
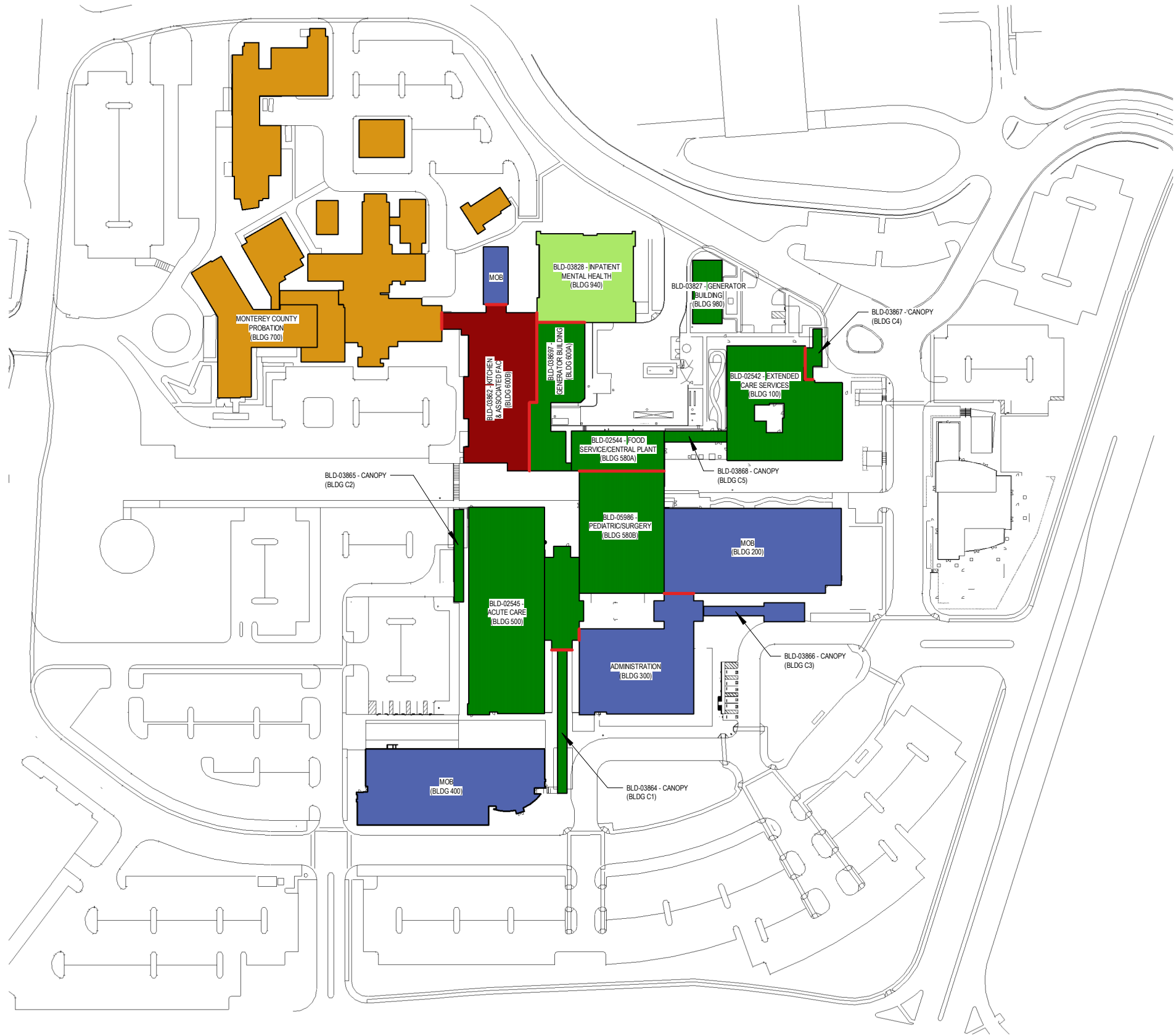


Photo of permit for generator fuel tank.



LEGEND

- OUTPATIENT CARE FACILITIES (NON-OSHDP/EXEMPT, N.I.C.)
- GENERAL ACUTE CARE HOSPITAL (GACH) - OSHPD 1
- MONTEREY COUNTY PROBATION FACILITY NOT IN SCOPE
- GENERAL ACUTE CARE BLDG WITH SPC-2 STATUS. NEEDS TO BE REMOVED FROM ACUTE CARE SERVICES, DEMOLISHED, OR RETROFITTED PRIOR TO 01/01/2030.
- POTENTIAL FUTURE ACUTE PSYCHIATRIC HOSPITAL BUILDING WOULD BE RECLASSIFIED FROM AN OSHPD 1 TO OSHPD 5
- BUILDING SEPERATION LINE
- OSHDP FACILITY # 17353



FLOOR PLAN LEGEND

OSHDP FACILITY # 17353

- (E) 1 HR SMOKE BARRIER
- (E) 2 HR FIRE BARRIER
- (E) 4 HR RATED BUILDING SEPARATION
- CRITICAL CARE AREAS PER 2019 CAC  
CHAPTER 6 SEISMIC EVALUATION  
PROCEDURES FOR HOSPITAL BUILDINGS
- (E) EXIT STAIRWELL
- ED  
EXTERIOR EXIT TO GRADE



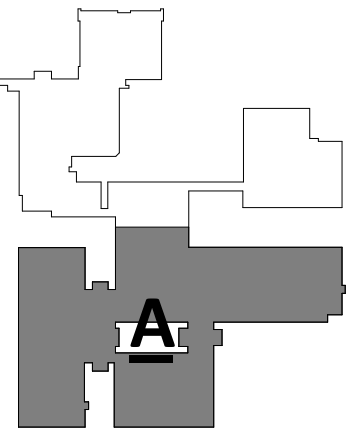
FLOOR PLAN LEGEND

OSHPD FACILITY # 17353

- (E) 1 HR SMOKE BARRIER
- (E) 2 HR FIRE BARRIER
- (E) 4 HR RATED BUILDING SEPARATION
- CRITICAL CARE AREAS PER 2019 CAC  
CHAPTER 6 SEISMIC EVALUATION  
PROCEDURES FOR HOSPITAL BUILDINGS
- (E) EXIT STAIRWELL
- ED EXTERIOR EXIT TO GRADE



LEVEL 02 KEY PLAN

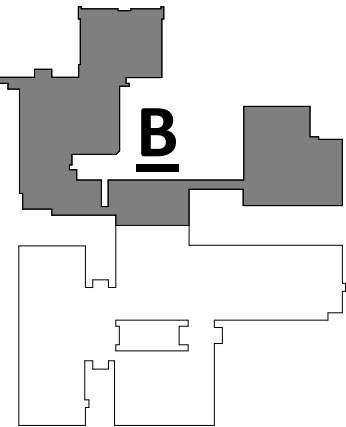


FLOOR PLAN LEGEND

OSHPD FACILITY # 17353

- (E) 1 HR SMOKE BARRIER
- (E) 2 HR FIRE BARRIER
- (E) 4 HR RATED BUILDING SEPARATION
- CRITICAL CARE AREAS PER 2019 CAC  
CHAPTER 6 SEISMIC EVALUATION  
PROCEDURES FOR HOSPITAL BUILDINGS
- (E) EXIT STAIRWELL
- ED  
EXTERIOR EXIT TO GRADE
- GENERAL ACUTE CARE BLDG WITH SPC-2  
STATUS. NEEDS TO BE REMOVED FROM  
ACUTE CARE SERVICES, DEMOLISHED, OR  
RETROFITTED PRIOR TO 01/01/2030.
- POTENTIAL FUTURE ACUTE PSYCHIATRIC  
HOSPITAL BUILDING WOULD BE RECLASSIFIED  
FROM AN OSHPD 1 TO OSHPD 5
- ACUTE CARE FUNCTIONS WITHIN THE 600B  
BUILDING  
A - EMERGENCY FOOD STORAGE - PER CBC  
2019 1224.20.23  
B - CLEAN LINEN STORAGE - PER CBC 2019  
1224.27.2  
C - PATIENT CARE CORRIDOR - PER CBC 2019  
1224.23.1
- (E) SEISMIC SEPARATION

LEVEL 02 KEY PLAN



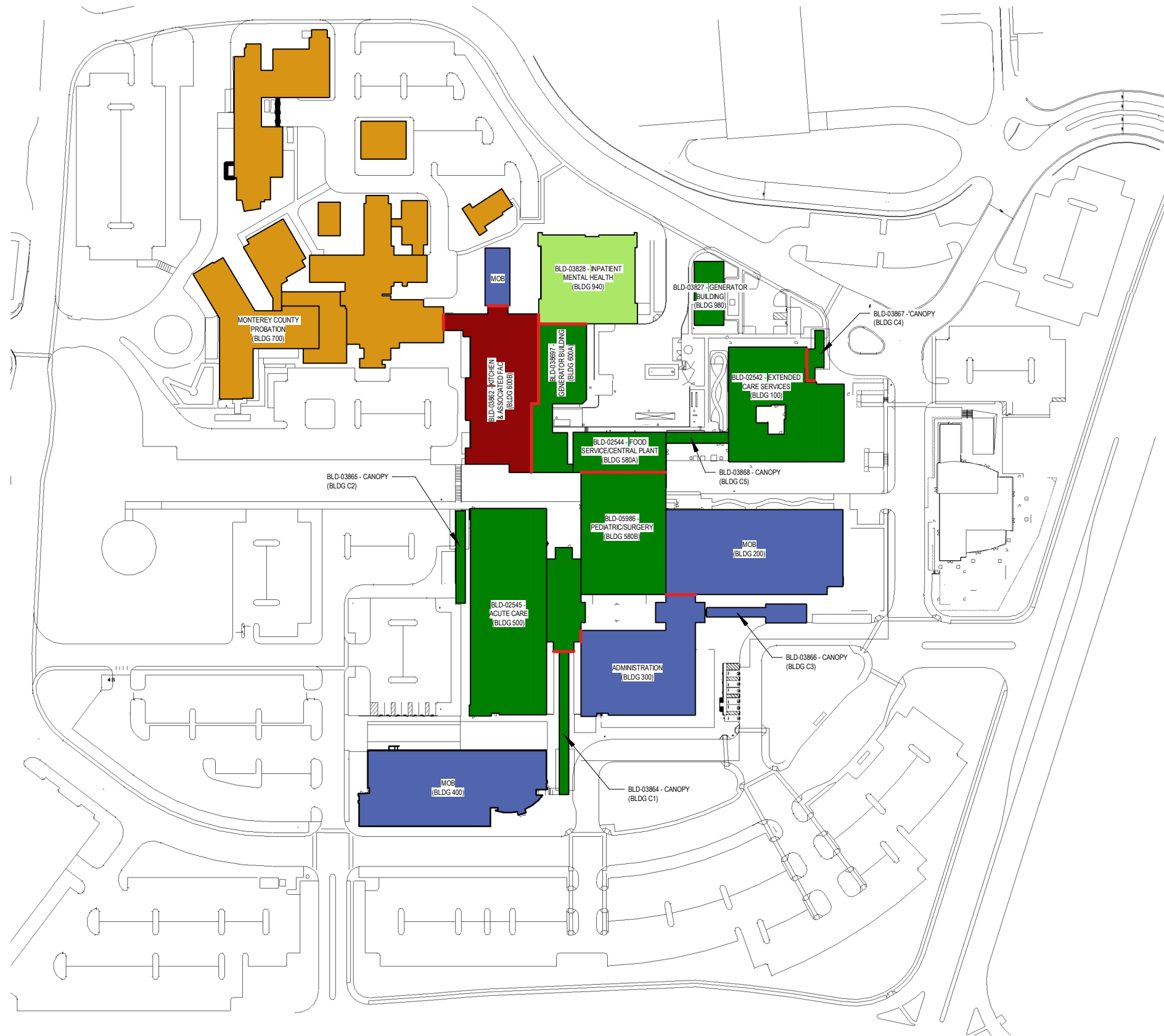
FLOOR PLAN LEGEND







OSHDP FACILITY # 17353

- (E) 1 HR SMOKE BARRIER
- (E) 2 HR FIRE BARRIER
- (E) 4 HR RATED BUILDING SEPARATION
- CRITICAL CARE AREAS PER 2019 CAC CHAPTER 6 SEISMIC EVALUATION PROCEDURES FOR HOSPITAL BUILDINGS
- (E) EXIT STAIRWELL
- ED EXTERIOR EXIT TO GRADE







- |   |  |
|---|--|
|  | OUTPATIENT CARE FACILITIES (NON-OSHPD/EXEMPT, N.I.C.)  |
|  | GENERAL ACUTE CARE HOSPITAL (GACH) - OSHPD 1   |
|  | MONTEREY COUNTY PROBATION FACILITY NOT IN SCOPE  |
|  | GENERAL ACUTE CARE BLDG WITH SPC-2 STATUS. WILL BE REMOVED FROM ACUTE CARE SERVICES BY 01/01/2030. FUTURE OSHPD 1R BUILDING. |
|  | FUTURE ACUTE PSYCHIATRIC HOSPITAL BUILDING WOULD BE RECLASSIFIED FROM AN OSHPD 1 TO OSHPD 5                                  |
|  | BUILDING SEPERATION LINE   |

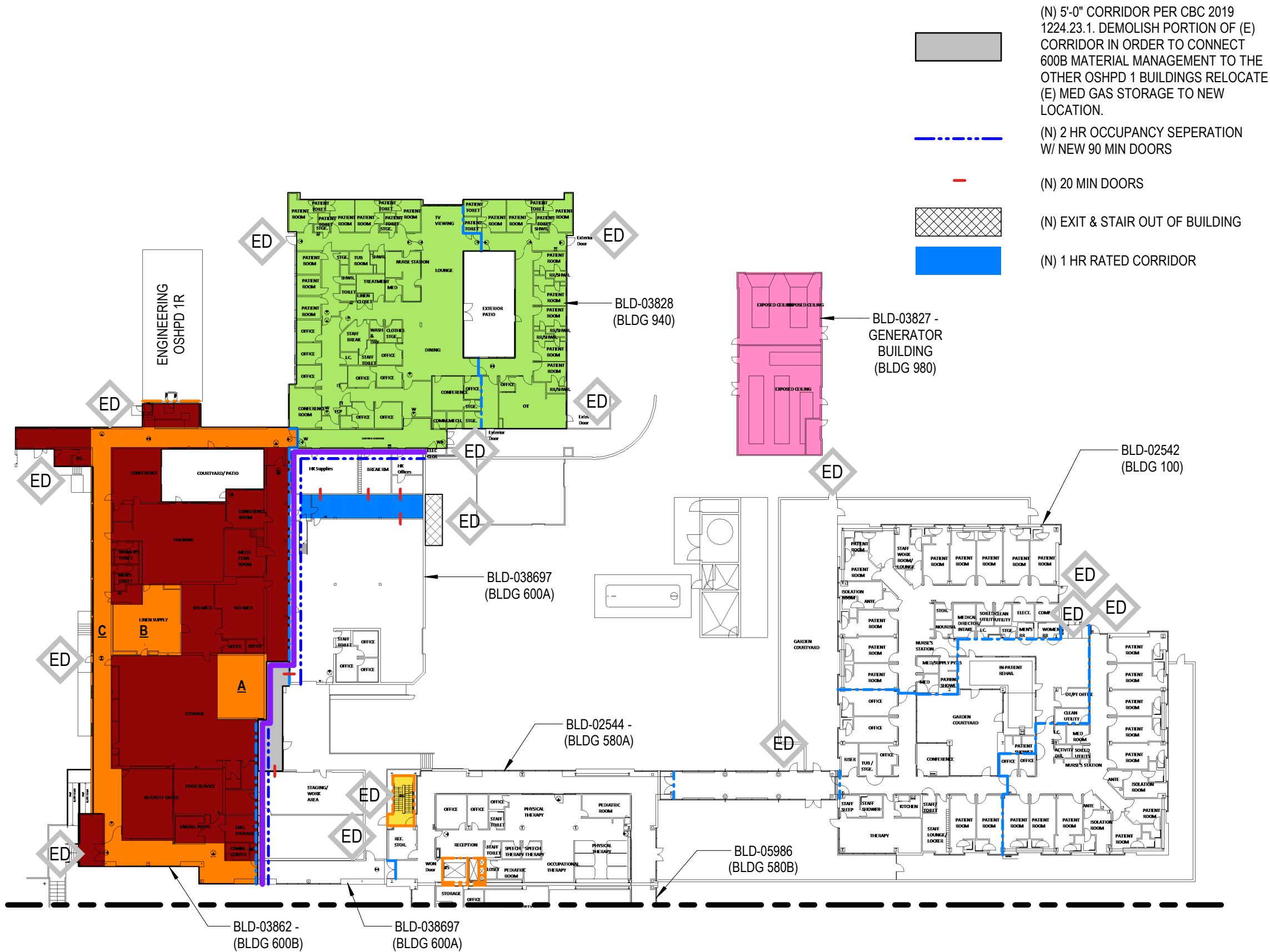
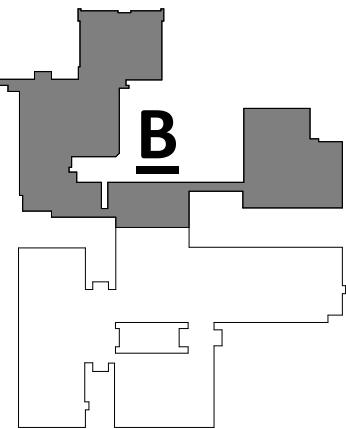
OSHPD FACILITY # 17353

FLOOR PLAN LEGEND







OSHPD FACILITY # 17353

- (E) 1 HR SMOKE BARRIER
- (E) 2 HR FIRE BARRIER
- (E) 4 HR RATED BUILDING SEPARATION
- CRITICAL CARE AREAS PER 2019 CAC CHAPTER 6 SEISMIC EVALUATION PROCEDURES FOR HOSPITAL BUILDINGS
- (E) EXIT STAIRWELL
- ED EXTERIOR EXIT TO GRADE
- GENERAL ACUTE CARE BLDG WITH SPC-2 STATUS. WILL BE REMOVED FROM ACUTE CARE SERVICES BY 01/01/2030. FUTURE OSHPD 1R BUILDING.
- FUTURE ACUTE PSYCHIATRIC HOSPITAL BUILDING WOULD BE RECLASSIFIED FROM AN OSHPD 1 TO OSHPD 5
- ACUTE CARE FUNCTIONS WITHIN THE 600B BUILDING
  - A - EMERGENCY FOOD STORAGE - PER CBC 2019 1224.20.23
  - B - CLEAN LINEN STORAGE - PER CBC 2019 1224.27.2
  - C - PATIENT CARE CORRIDOR - PER CBC 2019 1224.23.1
- (E) SEISMIC SEPARATION

LEVEL 02 KEY PLAN





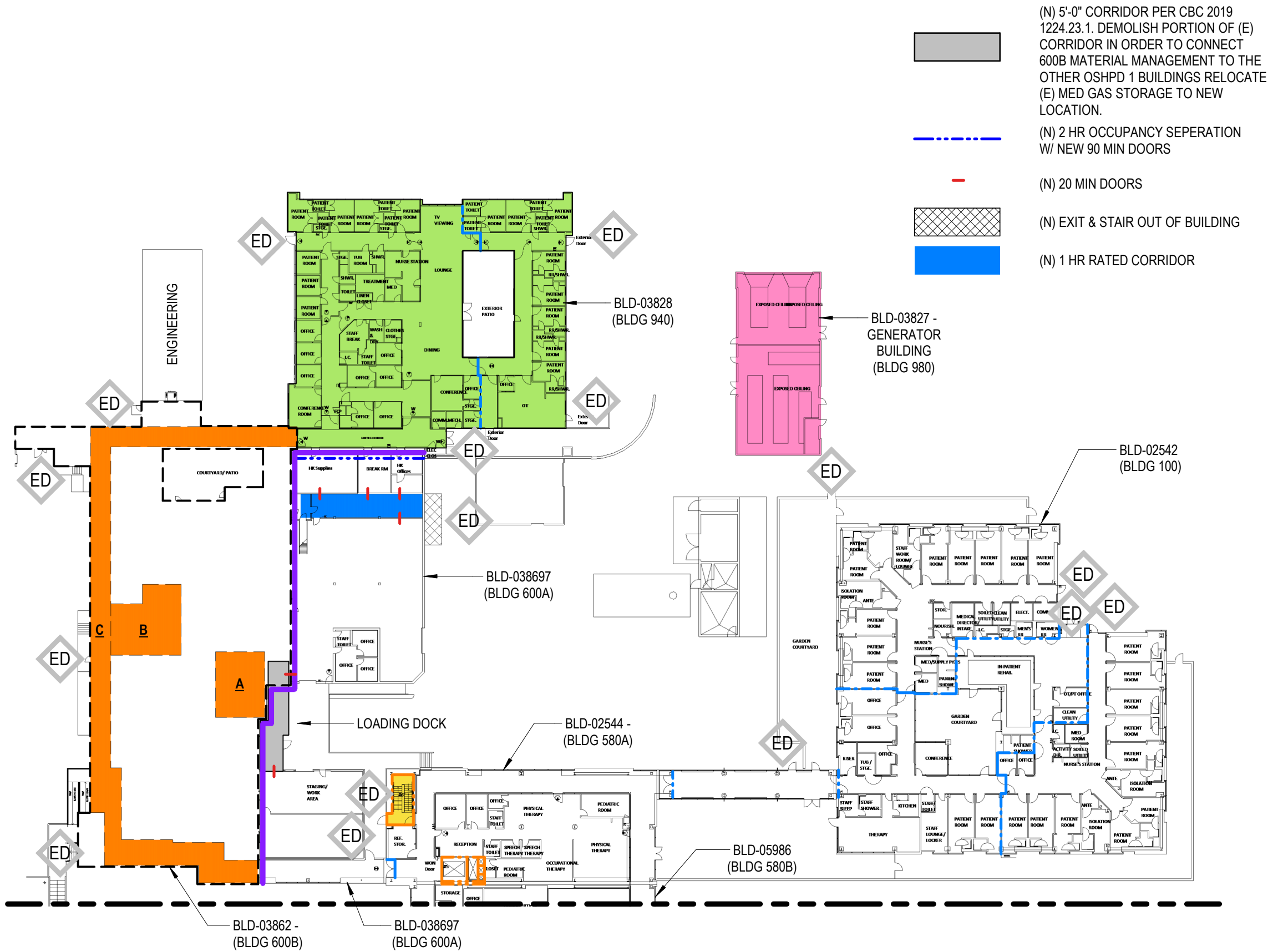
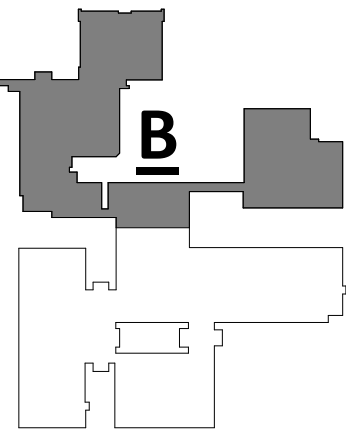
-  OUTPATIENT CARE FACILITIES (NON-OSHPD/EXEMPT, N.I.C.)
  -  GENERAL ACUTE CARE HOSPITAL (GACH) - OSHPD 1
  -  MONTEREY COUNTY PROBATION FACILITY NOT IN SCOPE
  -  GENERAL ACUTE CARE BLDG WITH SPC-2 STATUS. WILL BE DEMOLISHED OR REPLACED PRIOR TO 01/01/2030.
  -  ACUTE PSYCHIATRIC HOSPITAL BUILDING CAN STAY UNDER OSHPD 1 JURISDICTION, IF BUILDING 600B WILL BE REPLACED AS AN OSHPD 1 BUILDING. IF BUILDING 600B IS BEING REPLACED BY A NEW B OCCUPANCY BUILDING OR IS BEING DEMOLISHED, BUILDING 940 WILL BE RECLASSIFIED AS AN OSHPD 5.
  -  BUILDING SEPERATION LINE

FLOOR PLAN LEGEND

OSHPD FACILITY # 17353

- (E) 1 HR SMOKE BARRIER
- (E) 2 HR FIRE BARRIER
- (E) 4 HR RATED BUILDING SEPARATION
- CRITICAL CARE AREAS PER 2019 CAC CHAPTER 6 SEISMIC EVALUATION PROCEDURES FOR HOSPITAL BUILDINGS
- (E) EXIT STAIRWELL
- ED EXTERIOR EXIT TO GRADE
- GENERAL ACUTE CARE BLDG WITH SPC-2 STATUS, WILL BE DEMOLISHED PRIOR TO 01/01/2030. ALL OTHER FUNCTIONS NOT IDENTIFIED AS ACUTE CARE NEED TO BE RELOCATE OR ELIMINATED.
- ACUTE PSYCHIATRIC HOSPITAL BUILDING WOULD BE RECLASSIFIED FROM AN OSHPD 1 TO OSHPD 5
- ACUTE CARE FUNCTIONS WITHIN THE 600B BUILDING
  - A - EMERGENCY FOOD STORAGE - PER CBC 2019 1224.20.23
  - B - CLEAN LINEN STORAGE - PER CBC 2019 1224.27.2
  - C - PATIENT CARE CORRIDOR - PER CBC 2019 1224.23.1
- (E) SEISMIC SEPARATION

LEVEL 02 KEY PLAN



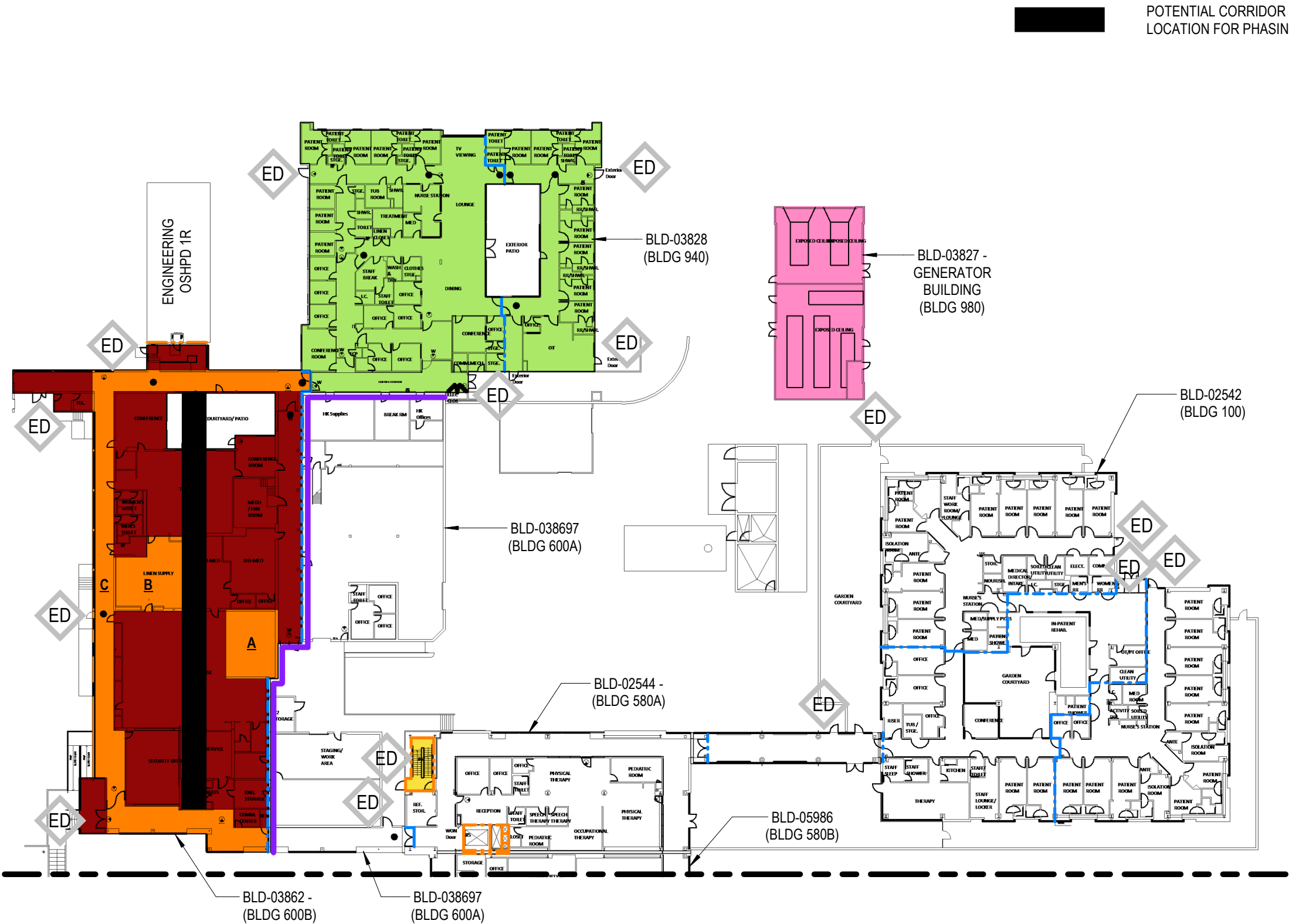
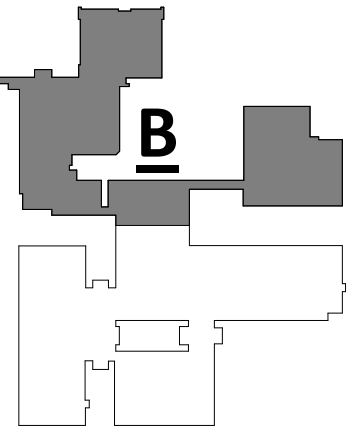


FLOOR PLAN LEGEND

OSHPD FACILITY # 17353

- (E) 1 HR SMOKE BARRIER
- (E) 2 HR FIRE BARRIER
- (E) 4 HR RATED BUILDING SEPARATION
- CRITICAL CARE AREAS PER 2019 CAC CHAPTER 6 SEISMIC EVALUATION PROCEDURES FOR HOSPITAL BUILDINGS
- (E) EXIT STAIRWELL
- ED EXTERIOR EXIT TO GRADE
- GENERAL ACUTE CARE BLDG WITH SPC-2 STATUS, WILL BE REBUILT AS AN OSHPD 1 BUILDING PRIOR TO 01/01/2030.
- BUILDING WILL STAY UNDER OSHPD 1 JURISDICTION OR CAN BE MOVED TO AN OSHPD 5.
- ACUTE CARE FUNCTIONS WITHIN THE 600B BUILDING
  - A - EMERGENCY FOOD STORAGE - PER CBC 2019 1224.20.23
  - B - CLEAN LINEN STORAGE - PER CBC 2019 1224.27.2
  - C - PATIENT CARE CORRIDOR - PER CBC 2019 1224.23.1
- (E) SEISMIC SEPARATION

LEVEL 02 KEY PLAN

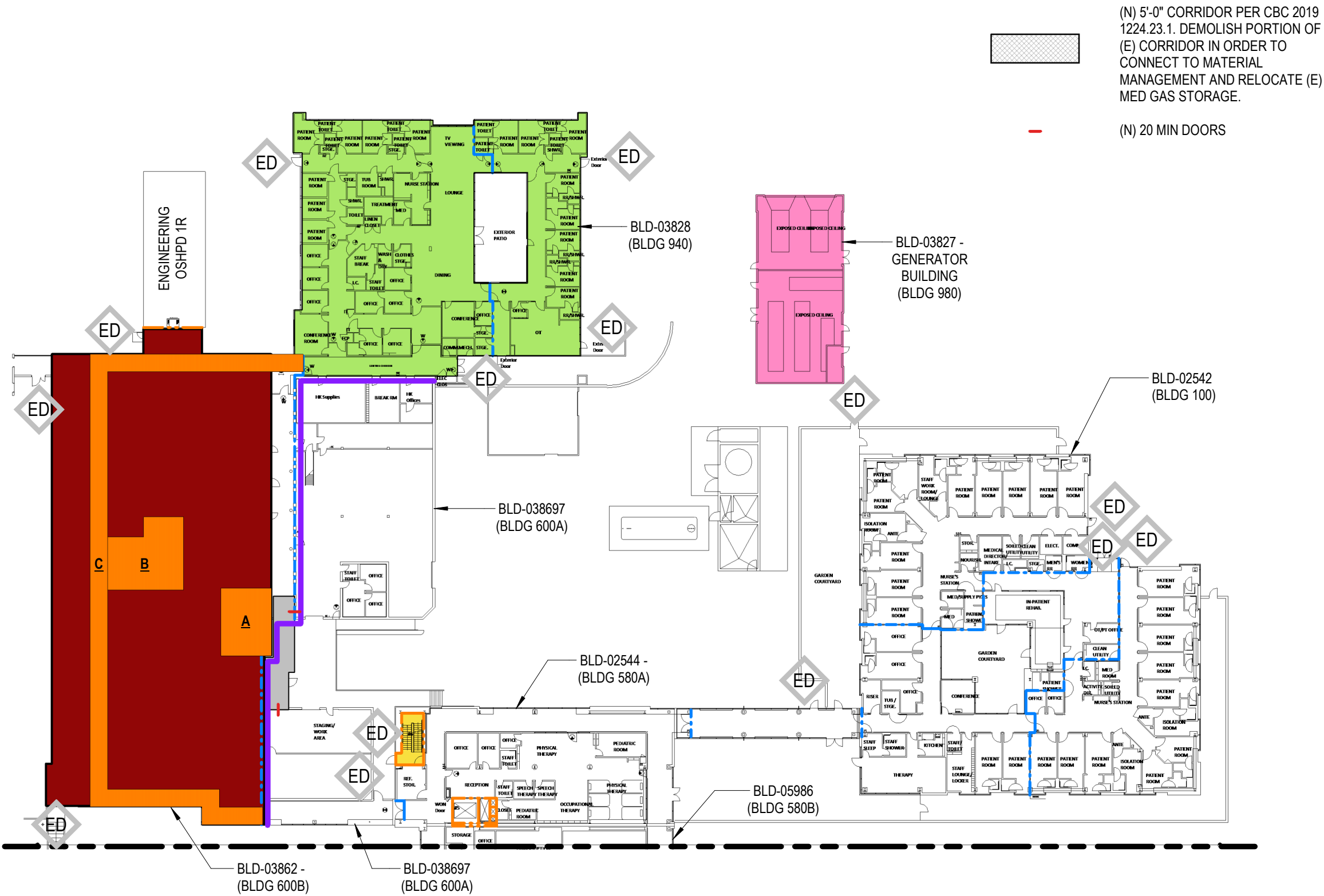
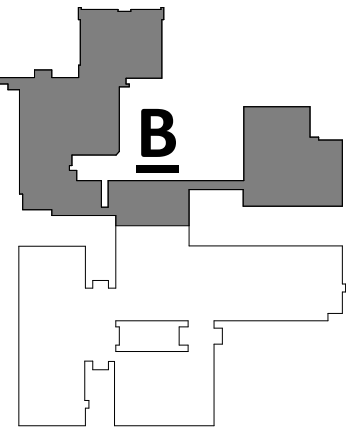


FLOOR PLAN LEGEND

OSHPD FACILITY # 17353

- (N) 5'-0" CORRIDOR PER CBC 2019 1224.23.1. DEMOLISH PORTION OF (E) CORRIDOR IN ORDER TO CONNECT TO MATERIAL MANAGEMENT AND RELOCATE (E) MED GAS STORAGE.
- (N) 20 MIN DOORS
- (E) 1 HR SMOKE BARRIER
- (E) 2 HR FIRE BARRIER
- (E) 4 HR RATED BUILDING SEPARATION
- CRITICAL CARE AREAS PER 2019 CAC CHAPTER 6 SEISMIC EVALUATION PROCEDURES FOR HOSPITAL BUILDINGS
- (E) EXIT STAIRWELL
- EXTERIOR EXIT TO GRADE
- GENERAL ACUTE CARE BLDG WITH SPC-2 STATUS, WILL BE REBUILT AS AN OSHPD 1R BUILDING PRIOR TO 01/01/2030.
- BUILDING WILL BE MOVED TO AN OSHPD 5 JURISDICTION.
- ACUTE CARE FUNCTIONS WITHIN THE 600B BUILDING
  - A - EMERGENCY FOOD STORAGE - PER CBC 2019 1224.20.23
  - B - CLEAN LINEN STORAGE - PER CBC 2019 1224.27.2
  - C - PATIENT CARE CORRIDOR - PER CBC 2019 1224.23.1
- (E) SEISMIC SEPARATION

LEVEL 02 KEY PLAN



LEGEND

- OUTPATIENT CARE FACILITIES (NON-OSHDP/EXEMPT, N.I.C.)
- GENERAL ACUTE CARE HOSPITAL (GACH) - OSHPD 1
- MONTEREY COUNTY PROBATION FACILITY NOT IN SCOPE
- GENERAL ACUTE CARE BLDG WITH SPC-2 STATUS. WILL BE RETROFITTED BY 01/01/2030.
- ACUTE PSYCHIATRIC HOSPITAL BUILDING CAN STAY UNDER OSHPD 1 JURISDICTION OR CAN BE MOVED TO OSHPD 5 JURISDICTION.
- BUILDING SEPERATION LINE
- OSHDP FACILITY # 17353

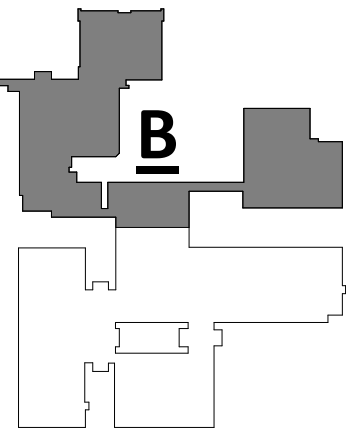


FLOOR PLAN LEGEND

OSHPD FACILITY # 17353

- (E) 1 HR SMOKE BARRIER
- (E) 2 HR FIRE BARRIER
- (E) 4 HR RATED BUILDING SEPARATION
- CRITICAL CARE AREAS PER 2019 CAC CHAPTER 6 SEISMIC EVALUATION PROCEDURES FOR HOSPITAL BUILDINGS
- (E) EXIT STAIRWELL
- ED EXTERIOR EXIT TO GRADE
- GENERAL ACUTE CARE BLDG WITH SPC-2 STATUS, WILL BE RETROFITTED BY 01/01/2030.
- ACUTE PSYCHIATRIC HOSPITAL BUILDING CAN STAY UNDER OSHPD 1 OR CAN BE MOVED TO AN OSHPD 5 JURISDICTION
- ACUTE CARE FUNCTIONS WITHIN THE 600B BUILDING
  - A - EMERGENCY FOOD STORAGE - PER CBC 2019 1224.20.23
  - B - CLEAN LINEN STORAGE - PER CBC 2019 1224.27.2
  - C - PATIENT CARE CORRIDOR - PER CBC 2019 1224.23.1
- (E) SEISMIC SEPARATION

LEVEL 02 KEY PLAN





DIRECTORY

Department	Level	Location
Administration & Public Relations	2	211
Admission	1	110
Audiology	1	103
Cafeteria	1	108
Case Management/Social Services	1	114
D'Arrigo Family Specialty Services	2	201
Diabetes Education	1	113
Diagnostic Imaging	1	111
Emergency Department	1	109
Engineering	2	233
Financial Counseling/Medi-Cal Eligibility	1	115
Gift Shop	1	104
Human Resources	1	112
Intensive Care Unit (ICU)	3	302
Intermediate Care Unit (IMCU)	3	303
Labor & Delivery	2	205
Laboratory	1	107
Laurel Pediatric Clinic	1	101
Maternal Infant Unit	2	207
Medical Records/ Health Information Management	2	203
Medical Surgical Unit	3	304
Medical Surgical Unit II	2	222
Mental Health	2	232
Natividad Foundation	2	210
Natividad Medical Group	1	102
Natividad Room	1	105
Neonatal Intensive Care Unit (NICU)	2	206
Outpatient Surgical Services	2	202
Pediatric/NICU Conference Room	2	209
Pediatric Unit	3	301
Pharmacy	1	106
Prenatal Testing	2	208
Sam Karas Acute Rehabilitation Center	2	221
SEA Room	2	231
Therapy Services (PT/OT/Speech)	2	204

★ You Are Here  
Usted Está Aquí

● Level 1  
Nivel 1

● Level 2  
Nivel 2

● Level 3  
Nivel 3

▲ Entrance  
Entrada

♿ Bathroom  
Baño

🛗 Elevator  
Elevador

🪜 Stairs  
Escaleras

📄 24-Hour Vending  
Máquinas Exendedoras,  
Abierto las 24 Horas

☎ Phone  
Teléfono

📠 TTY Phone  
Teléfono TTY

💰 ATM  
ATM

🛋 Lounge/Waiting Area  
Sala de Espera

ℹ Information  
Información

LEVEL 3  
NIVEL

LEVEL 2  
NIVEL

LEVEL 1  
NIVEL



DIRECTORIO

Departamento	Nivel	Ubicación
Administración de Casos/Servicios Sociales	1	114
Administración y Relaciones Públicas	2	211
Audiología	1	103
Cafetería	1	108
Clínica de Pediatría Laurel	1	101
Departamento de Emergencias	1	109
Diagnóstico por Imágenes	1	111
Educación sobre la Diabetes	1	113
Expedientes Médicos/Administración de Información para la Salud	1	203
Familia D'Arrigo Servicios de Especialidades	2	201
Farmacia	1	106
Fundación de Natividad	2	210
Grupo Médico Natividad	1	102
Ingeniería	2	233
Laboratorio	1	107
Oficina de Negocios/ Elegibilidad de Medi-Cal	1	115
Partos y Nacimientos	2	205
Pruebas Prenatales	2	208
Recursos Humanos	1	112
Admisión	1	110
Sala de Conferencia Pediatría /NICU	2	209
Sala de Entrenamiento Personal	2	231
Sala Natividad	1	105
Salud Mental	2	232
Sam Karas Centro de Rehabilitación Intensiva	2	221
Servicios Quirúrgicos para Pacientes Ambulatorios	2	202
Servicios Terapéuticos (Terapia física, Terapia ocupacional, Terapia del habla)	2	204
Tienda de Regalos	1	104
Unidad de Cuidados Intensivos (ICU)	3	302
Unidad de Cuidados Intensivos Neonatales (NICU)	2	206
Unidad de Cuidados Intermedios	3	303
Unidad de Madres y Bebés	2	207
Unidad Médica-Quirúrgica	3	304
Unidad Médica-Quirúrgica II	2	222
Unidad Pediátrica	3	301

Exterior Buildings Edificios Exteriores	Services Servicios
400	Natividad Professional Center Centro Profesional de Natividad
760	NIDO NIDO
820	Volunteers Voluntarios
830	Chamacos Chamacos
840	IT Informática
860	Contracts Contratos
870	Managed Care Atención Médica Administrada
880	Nursing Education Educación de Enfermería

DIRECTORY

Department	Level	Location
Administration & Public Relations	2	211
Admission	1	110
Audiology	1	103
Cafeteria	1	108
Case Management/Social Services	1	114
D'Arrigo Family Specialty Services	2	201
Diabetes Education	1	113
Diagnostic Imaging	1	111
Emergency Department	1	109
Engineering	2	233
Financial Counseling/Medi-Cal Eligibility	1	115
Gift Shop	1	104
Human Resources	1	112
Intensive Care Unit (ICU)	3	302
Intermediate Care Unit (IMCU)	3	303
Labor & Delivery	2	205
Laboratory	1	107
Laurel Pediatric Clinic	1	101
Maternal Infant Unit	2	207
Medical Records/Health Information Management	2	203
Medical Surgical Unit	3	304
Medical Surgical Unit II	2	222
Mental Health	2	232
Natividad Foundation	2	210
Natividad Medical Group	1	102
Natividad Room	1	105
Neonatal Intensive Care Unit (NICU)	2	206
Outpatient Surgical Services	2	202
Pediatric/NICU Conference Room	2	209
Pediatric Unit	3	301
Pharmacy	1	106
Prenatal Testing	2	208
Sam Karas Acute Rehabilitation Center	2	221
SEA Room	2	231
Therapy Services (PT/OT/Speech)	2	204

★ You Are Here  
Usted Está Aquí

● Level 1  
Nivel 1

● Level 2  
Nivel 2

● Level 3  
Nivel 3

▲ Entrance  
Entrada

♿ Bathroom  
Baño

🛗 Elevator  
Elevador

🪜 Stairs  
Escaleras

📄 24-Hour Vending  
Máquinas Exendedoras,  
Abierto las 24 Horas

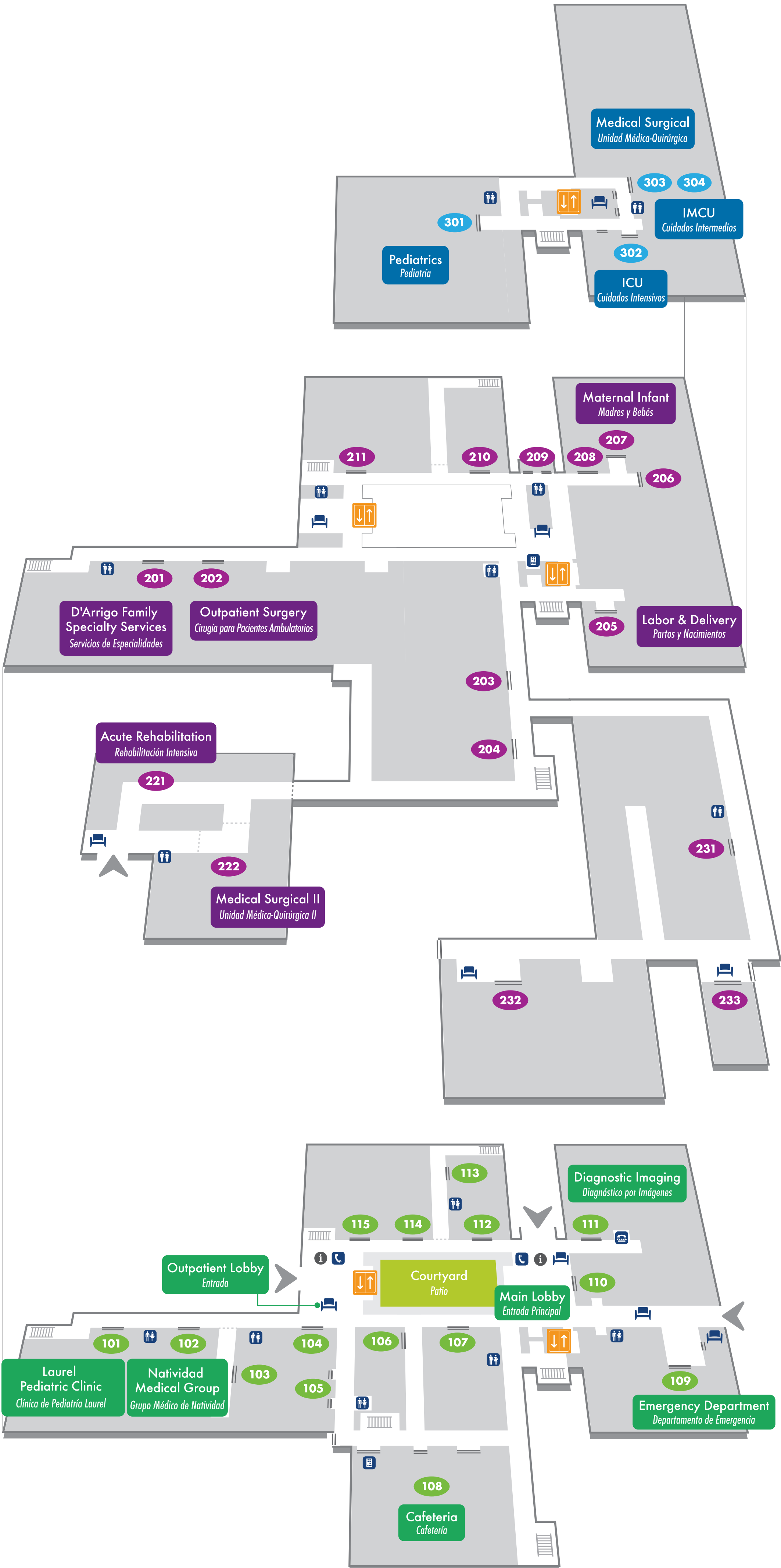
☎ Phone  
Teléfono

📠 TTY Phone  
Teléfono TTY

💰 ATM  
ATM

🛋 Lounge/Waiting Area  
Sala de Espera

📍 Information  
Información



LEVEL  
3  
NIVEL

LEVEL  
2  
NIVEL

LEVEL  
1  
NIVEL

DIRECTORIO

Departamento	Nivel	Ubicación
Administración de Casos/Servicios Sociales	1	114
Administración y Relaciones Públicas	2	211
Audiología	1	103
Cafetería	1	108
Clínica de Pediatría Laurel	1	101
Departamento de Emergencias	1	109
Diagnóstico por Imágenes	1	111
Educación sobre la Diabetes	1	113
Expedientes Médicos/Administración de Información para la Salud	1	203
Familia D'Arrigo Servicios de Especialidades	2	201
Farmacia	1	106
Fundación de Natividad	2	210
Grupo Médico Natividad	1	102
Ingeniería	2	233
Laboratorio	1	107
Oficina de Negocios/Elegibilidad de Medi-Cal	1	115
Partos y Nacimientos	2	205
Pruebas Prenatales	2	208
Recursos Humanos	1	112
Admisión	1	110
Sala de Conferencia Pediatría /NICU	2	209
Sala de Entrenamiento Personal	2	231
Sala Natividad	1	105
Salud Mental	2	232
Sam Karas Centro de Rehabilitación Intensiva	2	221
Servicios Quirúrgicos para Pacientes Ambulatorios	2	202
Servicios Terapéuticos (Terapia física, Terapia ocupacional, Terapia del habla)	2	204
Tienda de Regalos	1	104
Unidad de Cuidados Intensivos (ICU)	3	302
Unidad de Cuidados Intensivos Neonatales (NICU)	2	206
Unidad de Cuidados Intermedios	3	303
Unidad de Madres y Bebés	2	207
Unidad Médica-Quirúrgica	3	304
Unidad Médica-Quirúrgica II	2	222
Unidad Pediátrica	3	301

Exterior Buildings Edificios Exteriores	Services Servicios
400	Natividad Professional Center Centro Profesional de Natividad
760	NIDO NIDO
820	Volunteers Voluntarios
830	Chamacos Chamacos
840	IT Informática
860	Contracts Contratos
870	Managed Care Atención Médica Administrada
880	Nursing Education Educación de Enfermería



DIRECTORY

Department	Level	Location
Administration & Public Relations	2	211
Admission	1	110
Audiology	1	103
Cafeteria	1	108
Case Management/Social Services	1	114
D'Arrigo Family Specialty Services	2	201
Diabetes Education	1	113
Diagnostic Imaging	1	111
Emergency Department	1	109
Engineering	2	233
Financial Counseling/Medi-Cal Eligibility	1	115
Gift Shop	1	104
Human Resources	1	112
Intensive Care Unit (ICU)	3	302
Intermediate Care Unit (IMCU)	3	303
Labor & Delivery	2	205
Laboratory	1	107
Laurel Pediatric Clinic	1	101
Maternal Infant Unit	2	207
Medical Records/Health Information Management	2	203
Medical Surgical Unit	3	304
Medical Surgical Unit II	2	222
Mental Health	2	232
Natividad Foundation	2	210
Natividad Medical Group	1	102
Natividad Room	1	105
Neonatal Intensive Care Unit (NICU)	2	206
Outpatient Surgical Services	2	202
Pediatric/NICU Conference Room	2	209
Pediatric Unit	3	301
Pharmacy	1	106
Prenatal Testing	2	208
Sam Karas Acute Rehabilitation Center	2	221
SEA Room	2	231
Therapy Services (PT/OT/Speech)	2	204

★ You Are Here  
Usted Está Aquí

● Level 1  
Nivel 1

● Level 2  
Nivel 2

● Level 3  
Nivel 3

➤ Entrance  
Entrada

♿ Bathroom  
Baño

🛗 Elevator  
Elevador

🪜 Stairs  
Escaleras

📄 24-Hour Vending  
Máquinas Exendedoras,  
Abierto las 24 Horas

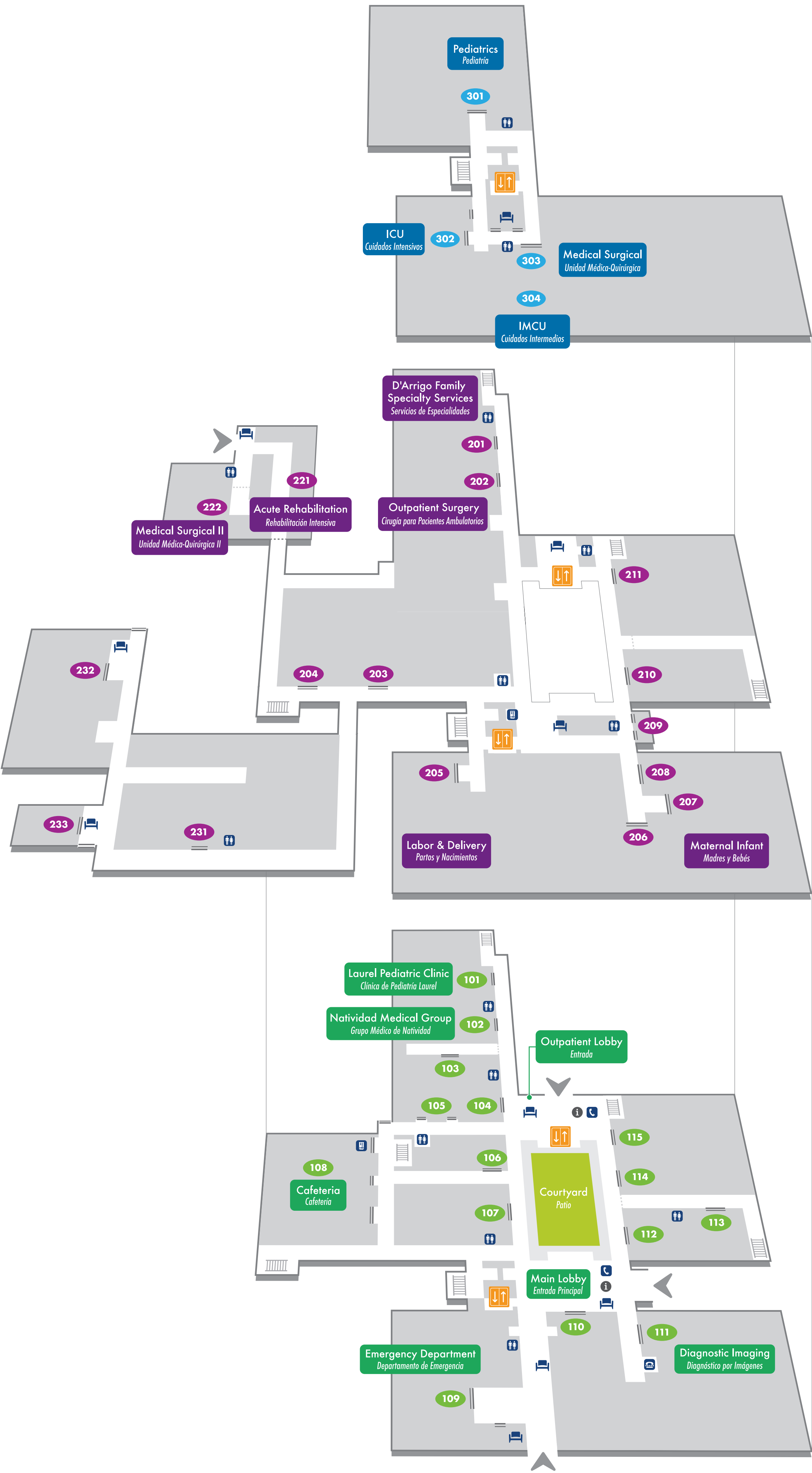
☎ Phone  
Teléfono

📠 TTY Phone  
Teléfono TTY

💰 ATM  
ATM

🛋 Lounge/Waiting Area  
Sala de Espera

ℹ Information  
Información



LEVEL  
3  
NIVEL

LEVEL  
2  
NIVEL

LEVEL  
1  
NIVEL

DIRECTORIO

Departamento	Nivel	Ubicación
Administración de Casos/Servicios Sociales	1	114
Administración y Relaciones Públicas	2	211
Audiología	1	103
Cafetería	1	108
Clínica de Pediatría Laurel	1	101
Departamento de Emergencias	1	109
Diagnóstico por Imágenes	1	111
Educación sobre la Diabetes	1	113
Expedientes Médicos/Administración de Información para la Salud	1	203
Familia D'Arrigo Servicios de Especialidades	2	201
Farmacia	1	106
Fundación de Natividad	2	210
Grupo Médico Natividad	1	102
Ingeniería	2	233
Laboratorio	1	107
Oficina de Negocios/Elegibilidad de Medi-Cal	1	115
Partos y Nacimientos	2	205
Pruebas Prenatales	2	208
Recursos Humanos	1	112
Admisión	1	110
Sala de Conferencia Pediatría /NICU	2	209
Sala de Entrenamiento Personal	2	231
Sala Natividad	1	105
Salud Mental	2	232
Sam Karas Centro de Rehabilitación Intensiva	2	221
Servicios Quirúrgicos para Pacientes Ambulatorios	2	202
Servicios Terapéuticos (Terapia física, Terapia ocupacional, Terapia del habla)	2	204
Tienda de Regalos	1	104
Unidad de Cuidados Intensivos (ICU)	3	302
Unidad de Cuidados Intensivos Neonatales (NICU)	2	206
Unidad de Cuidados Intermedios	3	303
Unidad de Madres y Bebés	2	207
Unidad Médica-Quirúrgica	3	304
Unidad Médica-Quirúrgica II	2	222
Unidad Pediátrica	3	301

Exterior Buildings Edificios Exteriores	Services Servicios
400	Natividad Professional Center Centro Profesional de Natividad
760	NIDO NIDO
820	Volunteers Voluntarios
830	Chamacos Chamacos
840	IT Informática
860	Contracts Contratos
870	Managed Care Atención Médica Administrada
880	Nursing Education Educación de Enfermería

DIRECTORY

Department	Level	Location
Administration & Public Relations	2	211
Admission	1	110
Audiology	1	103
Cafeteria	1	108
Case Management/Social Services	1	114
D'Arrigo Family Specialty Services	2	201
Diabetes Education	1	113
Diagnostic Imaging	1	111
Emergency Department	1	109
Engineering	2	233
Financial Counseling/Medi-Cal Eligibility	1	115
Gift Shop	1	104
Human Resources	1	112
Intensive Care Unit (ICU)	3	302
Intermediate Care Unit (IMCU)	3	303
Labor & Delivery	2	205
Laboratory	1	107
Laurel Pediatric Clinic	1	101
Maternal Infant Unit	2	207
Medical Records/Health Information Management	2	203
Medical Surgical Unit	3	304
Medical Surgical Unit II	2	222
Mental Health	2	232
Natividad Foundation	2	210
Natividad Medical Group	1	102
Natividad Room	1	105
Neonatal Intensive Care Unit (NICU)	2	206
Outpatient Surgical Services	2	202
Pediatric/NICU Conference Room	2	209
Pediatric Unit	3	301
Pharmacy	1	106
Prenatal Testing	2	208
Sam Karas Acute Rehabilitation Center	2	221
SEA Room	2	231
Therapy Services (PT/OT/Speech)	2	204

★ You Are Here  
Usted Está Aquí

● Level 1  
Nivel 1

● Level 2  
Nivel 2

● Level 3  
Nivel 3

▲ Entrance  
Entrada

♿ Bathroom  
Baño

🛗 Elevator  
Elevador

🪜 Stairs  
Escaleras

📄 24-Hour Vending  
Máquinas Expendedoras,  
Abierto las 24 Horas

☎ Phone  
Teléfono

📠 TTY Phone  
Teléfono TTY

💰 ATM  
ATM

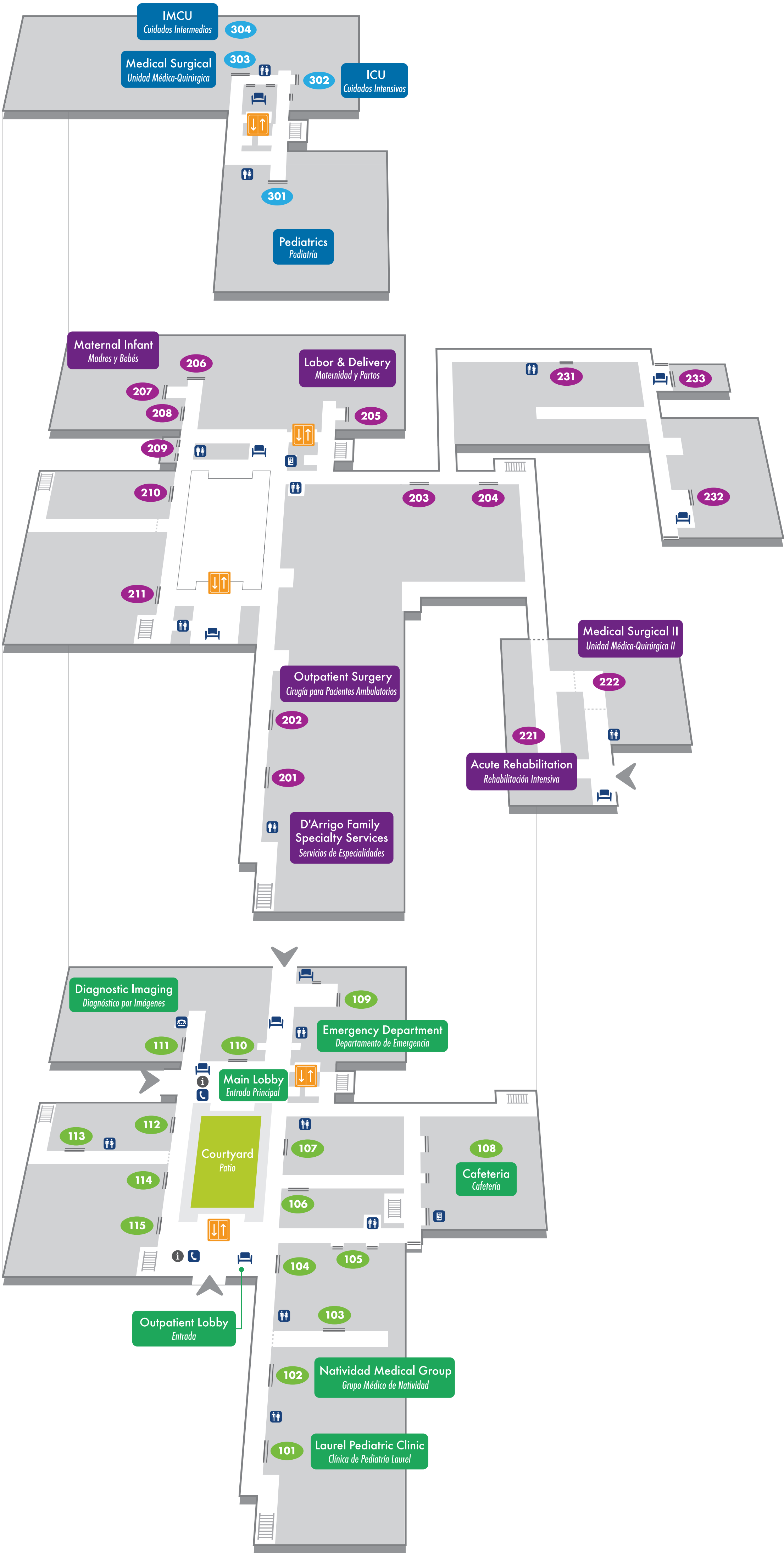
🛋 Lounge/Waiting Area  
Sala de Espera

ℹ Information  
Información

LEVEL 3  
NIVEL

LEVEL 2  
NIVEL

LEVEL 1  
NIVEL

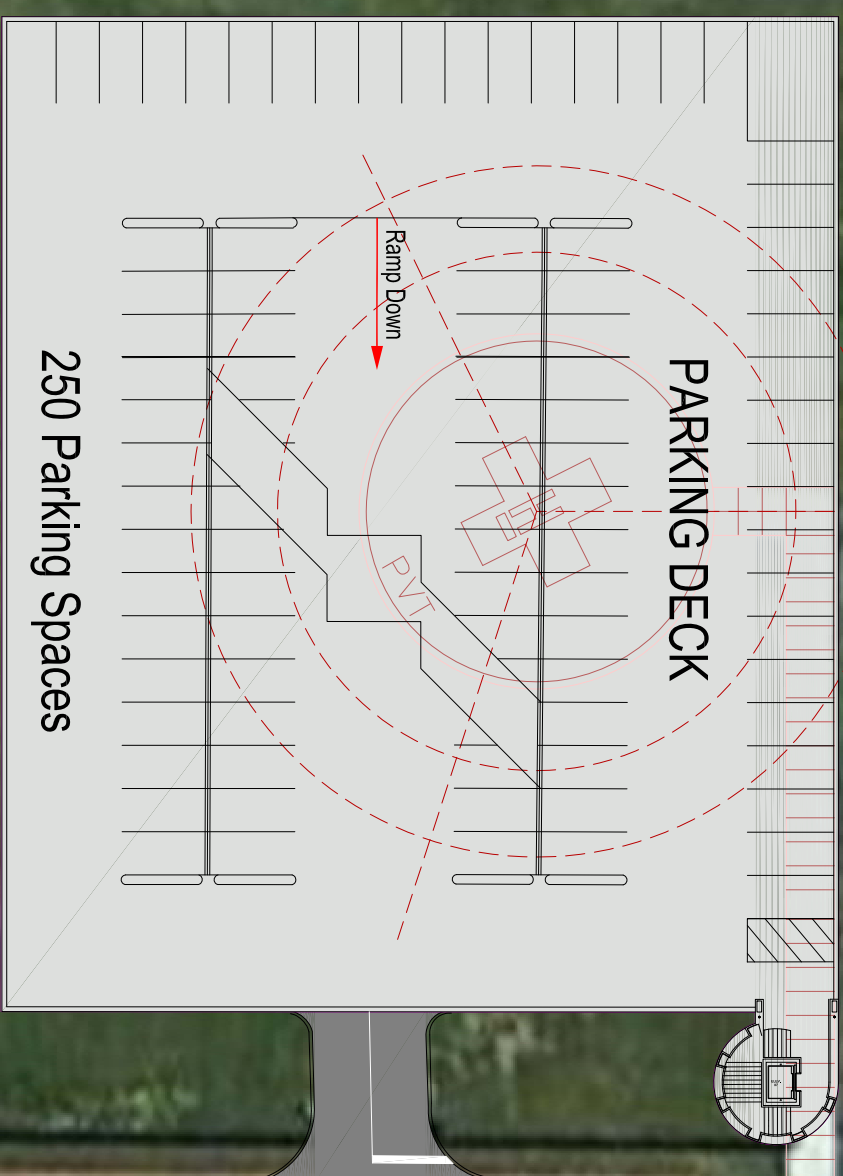


DIRECTORIO

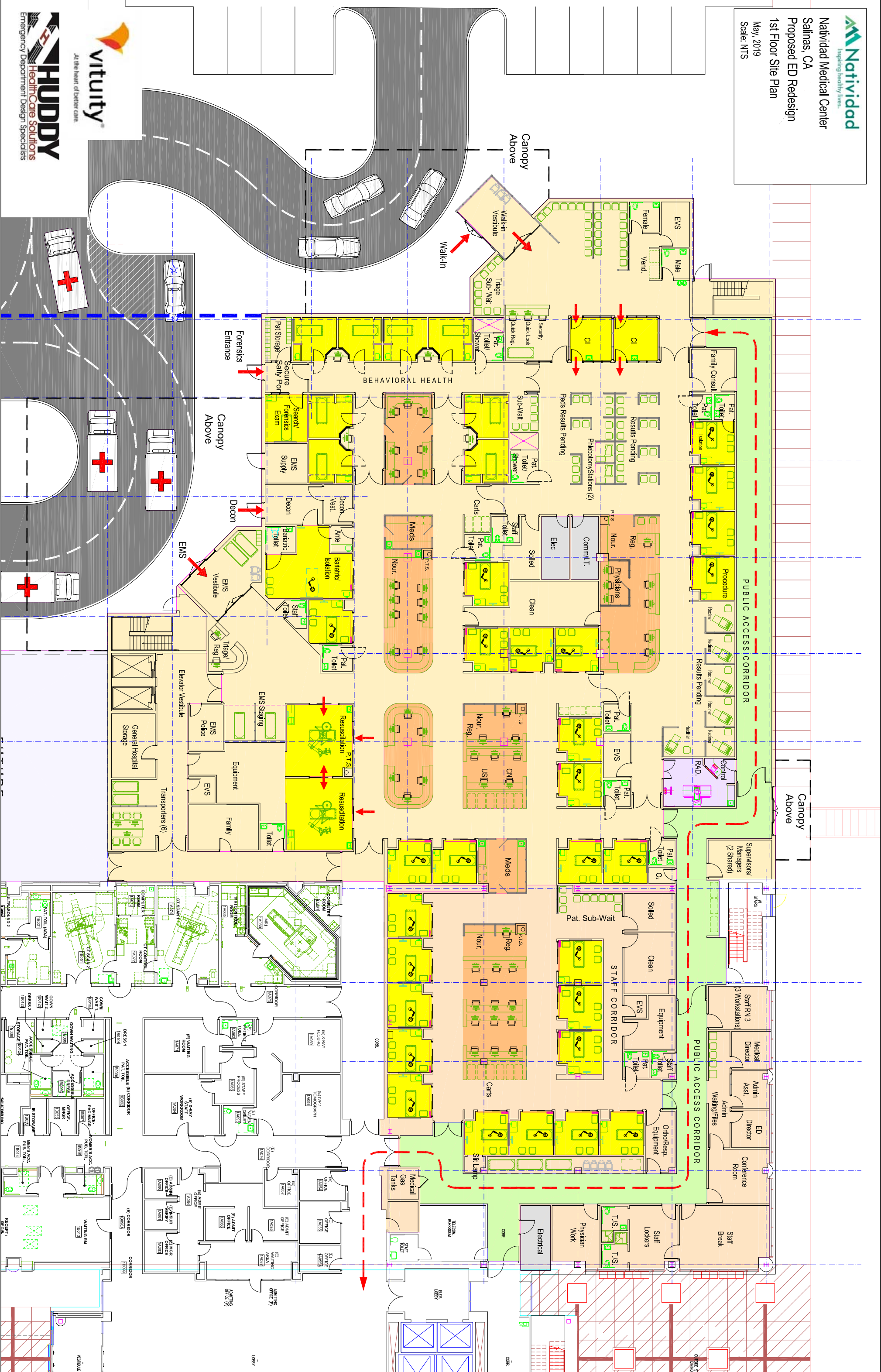
Departamento	Nivel	Ubicación
Administración de Casos/Servicios Sociales	1	114
Administración y Relaciones Públicas	2	211
Audiología	1	103
Cafetería	1	108
Clínica de Pediatría Laurel	1	101
Departamento de Emergencias	1	109
Diagnóstico por Imágenes	1	111
Educación sobre la Diabetes	1	113
Expedientes Médicos/Administración de Información para la Salud	1	203
Familia D'Arrigo Servicios de Especialidades	2	201
Farmacia	1	106
Fundación de Natividad	2	210
Grupo Médico Natividad	1	102
Ingeniería	2	233
Laboratorio	1	107
Oficina de Negocios/Elegibilidad de Medi-Cal	1	115
Partos y Nacimientos	2	205
Pruebas Prenatales	2	208
Recursos Humanos	1	112
Admisión	1	110
Sala de Conferencia Pediatría /NICU	2	209
Sala de Entrenamiento Personal	2	231
Sala Natividad	1	105
Salud Mental	2	232
Sam Karas Centro de Rehabilitación Intensiva	2	221
Servicios Quirúrgicos para Pacientes Ambulatorios	2	202
Servicios Terapéuticos (Terapia física, Terapia ocupacional, Terapia del habla)	2	204
Tienda de Regalos	1	104
Unidad de Cuidados Intensivos (ICU)	3	302
Unidad de Cuidados Intensivos Neonatales (NICU)	2	206
Unidad de Cuidados Intermedios	3	303
Unidad de Madres y Bebés	2	207
Unidad Médica-Quirúrgica	3	304
Unidad Médica-Quirúrgica II	2	222
Unidad Pediátrica	3	301

Exterior Buildings Edificios Exteriores	Services Servicios
400	Natividad Professional Center Centro Profesional de Natividad
760	NIDO NIDO
820	Volunteers Voluntarios
830	Chamacos Chamacos
840	IT Informática
860	Contracts Contratos
870	Managed Care Atención Médica Administrada
880	Nursing Education Educación de Enfermería





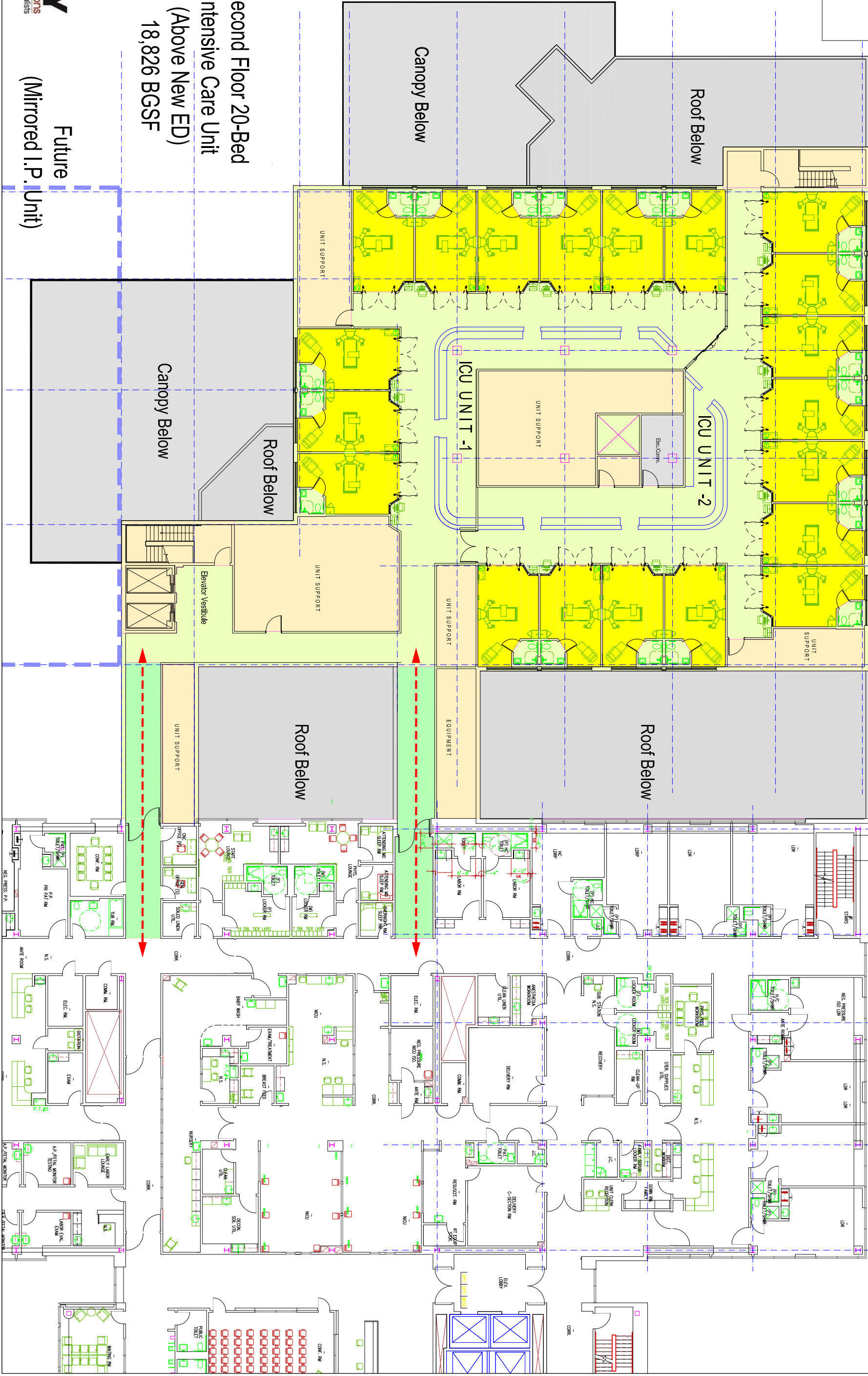




Second Floor 20-Bed  
Intensive Care Unit  
(Above New ED)  
18,826 BGSF



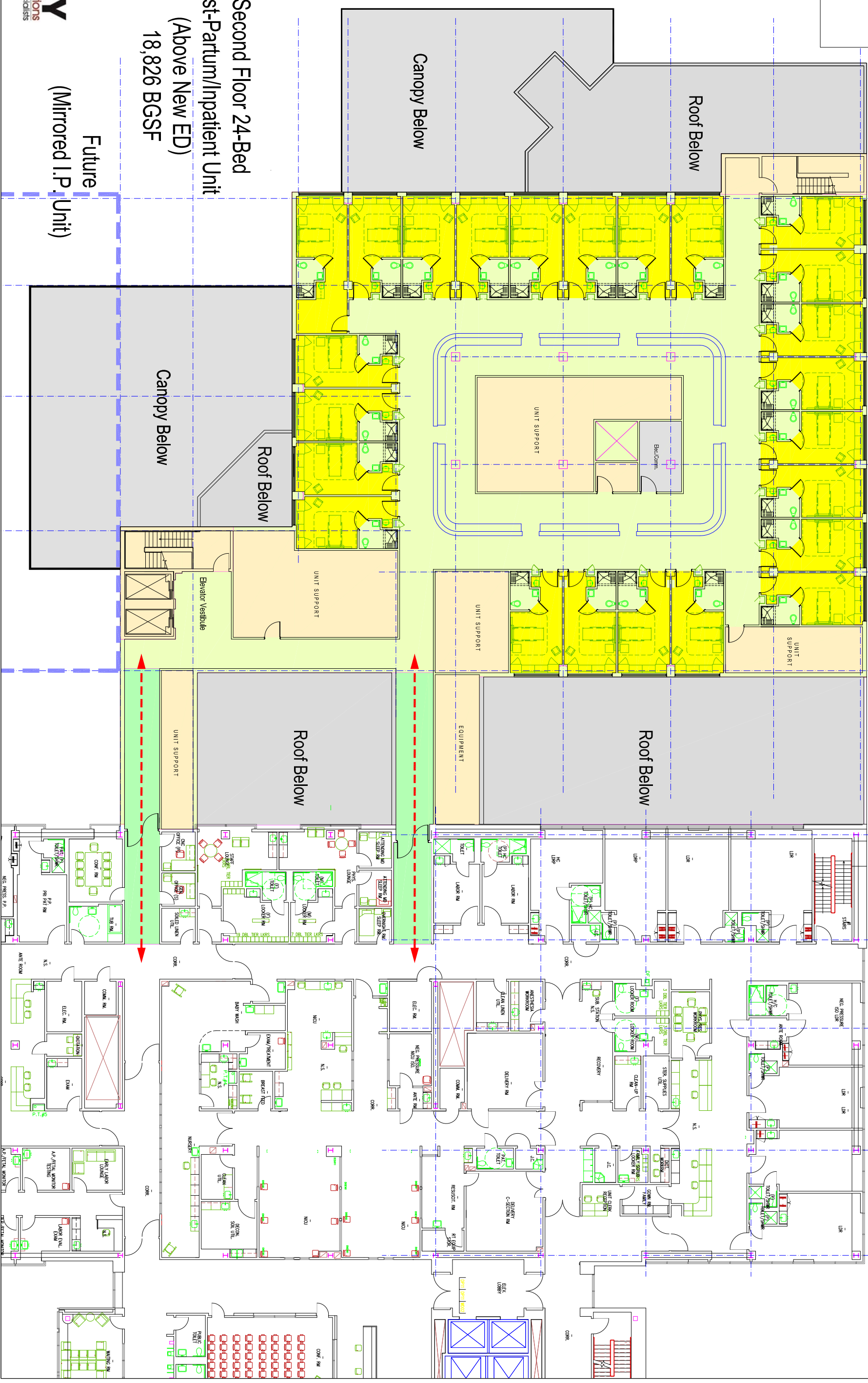
Future  
(Mirrored I.P. Unit)



## Second Floor 24-Bed Post-Partum/Inpatient Unit

(Above New ED)  
18,826 BGSF

Future  
(Mirrored I.P. Unit)





Third Floor 20-Bed

Intensive Care Units

(Above New ED)

18,222 BGSF

