Provide the Hospital Owner and Year of Report per Section 130061(e)

Facility Number:	13181
Facility Name:	St. John's Pleasant Valley Hospital
Address:	2309 Antonio Avenue
City:	Camarillo

Hospital Owner/Licensee:	St. John's Pleasant Valley Hospital
Year of Reporting:	2010
Contact 1 e-mail Address:	
Contact 2 e-mail Address:	
Contact 3 e-mail Address::	
Name of Submitter:	robert omens
Submission Date:	1/25/2011 3:00:00 PM



Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: 01 Building Name: Main Hospital

Type of Service Provided

[X]	Nursing	Inpatient Beds	66	Inpatient Days	9075
[ ]	IntensiveCare	Inpatient Beds	0	Inpatient Days	0
[ ]	Pediatric/Adolescent	Inpatient Beds	0	Inpatient Days	0
[ ]	Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	0
[X]	Obstetrical Ante/Postprtum	Inpatient Beds	7	Inpatient Days	527
[ ]	Intermediate Care	Inpatient Beds	0	Inpatient Days	0
[ ]	Skilled Nursing	Inpatient Beds	0	Inpatient Days	0

Total Beds this Building: 73

[X]	Surgical	[X]	Obstetrical Recovery
[X]	Anesthesia	[X]	Newborn/ WellBaby
[ ]	Clinical Lab	[ ]	Emergency
[ ]	Radiological/ Imaging	[ ]	Nuclear Medicine
[X]	Pharmaceutical		
[X]	Dietetic	[X]	Rehabilitation Therapy
[X]	Administration	[ ]	Renal Dialysis
[X]	Support Services	[ ]	Outpatient Surgery
[X]	Obstetrical Cesarean/Deliv	[ ]	Central Plant

Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)

Building Number: 01 **Building Name:** Main Hospital

Medical / Surgical (Include GYN)

Inpatient Bed: 66 Inpatient Days: 9075

Acute Respiratory Care

Inpatient Bed: 0 Inpatient Days: 0

Acute Psychiatric

Inpatient Bed: 0 Inpatient Days: 0

Perinatal (excluse Newborn / GYN)

Inpatient Bed: 7 Inpatient Days: 527

Burn

Inpatient Bed: 0 Inpatient Days: 0

Skilled Nursing

Inpatient Bed: 0 Inpatient Days: 0

Pediatric

Inpatient Bed: 0 Inpatient Days: 0

intensive Care Newborn Nursery

Inpatient Bed: 0 Inpatient Days: 0

Intermediate Card

Inpatient Bed: 0 Inpatient Days: 0

Intensive Care

Inpatient Bed: 0 Inpatient Days: 0

Rehabilitation Center

Inpatient Bed: 0 Inpatient Days: 0

Int. Care / development Disabled

Inpatient Bed: 0 Inpatient Days: 0

Coronary Care

Inpatient Bed: 0 Inpatient Days: 0

Chemical Dependency

Inpatient Bed: 0 Inpatient Days: 0

Total Beds this Building Per Unit: 73

Total Beds this Building Per Service: 73

For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

Building Number	Building Name	Building to be Removed
01	Main Hospital	
02	Central Plant/ Utilities Building	
03	Ancillary Building	
04	Ambulatory Surgery Center	
05	ER Entrance Canopy	
06	Skilled Nursing Building	

List ALL proposed new buildings to be constructd at this or another site.

Building Number	Building Name	New Site
N_1	Perinatal Addition	

For the building or buildings to be removed from acute care service, provide the following:

The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A)
The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B)
The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)

Building Number: 01 Main Hospital

Removal Date: 03/14/2014

Planned Uses for the building to be removed from acute care service:

Planned use for building: Clinic

Jurisdiction: OSHPD

Inpatient services currently delivered in the building:

[X]	Nursing	[X]	Surgical	[X]	Obstetrical Cesarean/Deliv	[X]	Rehabilitation Therapy
[ ]	IntensiveCare	[X]	Anesthesia	[X]	Obstetrical Recovery	[ ]	Renal Dialysis
[ ]	Pediatric/Adolescent	[ ]	Clinical Lab	[X]	Newborn/ WellBaby	[ ]	Outpatient Surgery
[ ]	Psychiatric Nursing	[ ]	Radiological/ Imaging	[ ]	Emergency	[X]	Central Plant
[X]	Obstetrical Ante/Postprtum	[X]	Pharmaceutical	[ ]	Nuclear Medicine	[X]	Support Services
[ ]	Intermediate Care	[X]	Dietetic				
[ ]	Skilled Nursing	[X]	Administration				

Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number: 01 Building Name: Main Hospital

Type of Service Provided

- [X] Nursing
- [ ] IntensiveCare
- [ ] Pediatric/Adolescent
- [ ] Psychiatric Nursing
- [X] Obstetrical Ante/Postprtum
- [ ] Intermediate Care
- [ ] Skilled Nursing
- [X] Surgical
- [X] Anesthesia
- [ ] Clinical Lab
- [ ] Radiological/ Imaging
- [X] Pharmaceutical
- [X] Dietetic
- [X] Administration
- [X] Obstetrical Cesarean/Deliv
- [X] Obstetrical Recovery
- [X] Newborn/ WellBaby
- [ ] Emergency
- [ ] Nuclear Medicine
- [X] Rehabilitation Therapy
- [ ] Renal Dialysis
- [ ] Outpatient Surgery
- [ ] Central Plant
- [X] Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number: 01 Building Name: Main Hospital

Configuration: Remove from GAC service by 1/1/2015

Type of Service Provided

- [X] Nursing
- [ ] IntensiveCare
- [ ] Pediatric/Adolescent
- [ ] Psychiatric Nursing
- [X] Obstetrical Ante/Postprtum
- [ ] Intermediate Care
- [ ] Skilled Nursing
- [X] Surgical
- [X] Anesthesia
- [ ] Clinical Lab
- [ ] Radiological/ Imaging
- [X] Pharmaceutical
- [X] Dietetic
- [X] Administration
- [X] Obstetrical Cesarean/Deliv
- [X] Obstetrical Recovery
- [X] Newborn/ WellBaby
- [ ] Emergency
- [ ] Nuclear Medicine
- [X] Rehabilitation Therapy
- [ ] Renal Dialysis
- [ ] Outpatient Surgery
- [ ] Central Plant
- [X] Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number: 02 Building Name: Central Plant/ Utilities Building

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

- [ ] Nursing
- [ ] IntensiveCare
- [ ] Pediatric/Adolescent
- [ ] Psychiatric Nursing
- [ ] Obstetrical Ante/Postprtum
- [ ] Intermediate Care
- [ ] Skilled Nursing
- [ ] Surgical
- [ ] Anesthesia
- [ ] Clinical Lab
- [ ] Radiological/ Imaging
- [ ] Pharmaceutical
- [X] Dietetic
- [ ] Administration
- [ ] Obstetrical Cesarean/Deliv
- [ ] Obstetrical Recovery
- [ ] Newborn/ WellBaby
- [ ] Emergency
- [ ] Nuclear Medicine
- [ ] Rehabilitation Therapy
- [ ] Renal Dialysis
- [ ] Outpatient Surgery
- [X] Central Plant
- [X] Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number: 03 Building Name: Ancillary Building

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

- [ ] Nursing
- [X] IntensiveCare
- [ ] Pediatric/Adolescent
- [ ] Psychiatric Nursing
- [ ] Obstetrical Ante/Postprtum
- [ ] Intermediate Care
- [ ] Skilled Nursing
- [ ] Surgical
- [ ] Anesthesia
- [X] Clinical Lab
- [X] Radiological/ Imaging
- [X] Pharmaceutical
- [ ] Dietetic
- [X] Administration
- [ ] Obstetrical Cesarean/Deliv
- [ ] Obstetrical Recovery
- [ ] Newborn/ WellBaby
- [ ] Emergency
- [X] Nuclear Medicine
- [ ] Rehabilitation Therapy
- [X] Renal Dialysis
- [ ] Outpatient Surgery
- [ ] Central Plant
- [X] Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number: 04 Building Name: Ambulatory Surgery Center

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

- [ ] Nursing
- [ ] IntensiveCare
- [ ] Pediatric/Adolescent
- [ ] Psychiatric Nursing
- [ ] Obstetrical Ante/Postprtum
- [ ] Intermediate Care
- [ ] Skilled Nursing
- [X] Surgical
- [X] Anesthesia
- [ ] Clinical Lab
- [ ] Radiological/ Imaging
- [ ] Pharmaceutical
- [ ] Dietetic
- [ ] Administration
- [ ] Obstetrical Cesarean/Deliv
- [ ] Obstetrical Recovery
- [ ] Newborn/ WellBaby
- [ ] Emergency
- [ ] Nuclear Medicine
- [ ] Rehabilitation Therapy
- [ ] Renal Dialysis
- [X] Outpatient Surgery
- [ ] Central Plant
- [ ] Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number: 05 Building Name: ER Entrance Canopy

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

- ☐ Nursing
- ☐ IntensiveCare
- ☐ Pediatric/Adolescent
- ☐ Psychiatric Nursing
- ☐ Obstetrical Ante/Postprtum
- ☐ Intermediate Care
- ☐ Skilled Nursing
- ☐ Surgical
- ☐ Anesthesia
- ☐ Clinical Lab
- ☐ Radiological/ Imaging
- ☐ Pharmaceutical
- ☐ Dietetic
- ☐ Administration
- ☐ Obstetrical Cesarean/Deliv
- ☐ Obstetrical Recovery
- ☐ Newborn/ WellBaby
- ☐ Emergency
- ☐ Nuclear Medicine
- ☐ Rehabilitation Therapy
- ☐ Renal Dialysis
- ☐ Outpatient Surgery
- ☐ Central Plant
- ☐ Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number: 06 Building Name: Skilled Nursing Building

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

- [X] Nursing
- [ ] IntensiveCare
- [ ] Pediatric/Adolescent
- [ ] Psychiatric Nursing
- [ ] Obstetrical Ante/Postprtum
- [ ] Intermediate Care
- [X] Skilled Nursing
- [ ] Surgical
- [ ] Anesthesia
- [ ] Clinical Lab
- [ ] Radiological/ Imaging
- [ ] Pharmaceutical
- [ ] Dietetic
- [ ] Administration
- [ ] Obstetrical Cesarean/Deliv
- [ ] Obstetrical Recovery
- [ ] Newborn/ WellBaby
- [ ] Emergency
- [ ] Nuclear Medicine
- [ ] Rehabilitation Therapy
- [ ] Renal Dialysis
- [ ] Outpatient Surgery
- [ ] Central Plant
- [ ] Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: 02 Building Name: Central Plant/ Utilities Building

Type of Service Provided

☐	Nursing	Inpatient Beds: 0	☐	Surgical		☐	Obstetrical Cesarean/Deliv	☐ Rehabilitation Therapy
☐	IntensiveCare	Inpatient Beds: 0	☐	Anesthesia				
☐	Pediatric/Adolescent	Inpatient Beds: 0	☐	Clinical Lab		☐	Obstetrical Recovery	☐ Renal Dialysis
☐	Psychiatric Nursing	Inpatient Beds: 0	☐	Radiological/ Imaging		☐	Newborn/ WellBaby	☐ Outpatient Surgery
☐	Obstetrical Ante/Postprtum	Inpatient Beds: 0	☐	Pharmaceutical		☐	Emergency	☒ Central Plant
☐	Intermediate Care	Inpatient Beds: 0	☒	Dietetic		☐	Nuclear Medicine	☒ Support Services
☐	Skilled Nursing	Inpatient Beds: 0	☐	Administration				

Total Beds this Building: 0

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: **03** Building Name: **Ancillary Building**

Type of Service Provided

☐	Nursing	Inpatient Beds	0
☒	IntensiveCare	Inpatient Beds	8
☐	Pediatric/Adolescent	Inpatient Beds	0
☐	Psychiatric Nursing	Inpatient Beds	0
☐	Obstetrical Ante/Postprtum	Inpatient Beds	0
☐	Intermediate Care	Inpatient Beds	0
☐	Skilled Nursing	Inpatient Beds	0

Total Beds this Building: 8

☐	Surgical	☐	Obstetrical Cesarean/Deliv
☐	Anesthesia	☐	Rehabilitation Therapy
☒	Clinical Lab	☐	Obstetrical Recovery
☒	Radiological/ Imaging	☒	Renal Dialysis
☒	Pharmaceutical	☐	Newborn/ WellBaby
☐	Dietetic	☐	Outpatient Surgery
☒	Administration	☐	Emergency
		☐	Central Plant
		☒	Nuclear Medicine
		☒	Support Services

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: 04 Building Name: Ambulatory Surgery Center

Type of Service Provided

☐	Nursing	Inpatient Beds: 0	☒	Surgical		☐	Obstetrical Cesarean/Deliv	☐	Rehabilitation Therapy
☐	IntensiveCare	Inpatient Beds: 0	☒	Anesthesia					
☐	Pediatric/Adolescent	Inpatient Beds: 0	☐	Clinical Lab		☐	Obstetrical Recovery	☐	Renal Dialysis
☐	Psychiatric Nursing	Inpatient Beds: 0	☐	Radiological/ Imaging		☐	Newborn/ WellBaby	☒	Outpatient Surgery
☐	Obstetrical Ante/Postprtum	Inpatient Beds: 0	☐	Pharmaceutical		☐	Emergency	☐	Central Plant
☐	Intermediate Care	Inpatient Beds: 0	☐	Dietetic		☐	Nuclear Medicine	☐	Support Services
☐	Skilled Nursing	Inpatient Beds: 0	☐	Administration					

Total Beds this Building: 0

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: **05** Building Name: **ER Entrance Canopy**

Type of Service Provided

☐ Nursing	Inpatient Beds	0	
☐ IntensiveCare	Inpatient Beds	0	
☐ Pediatric/Adolescent	Inpatient Beds	0	
☐ Psychiatric Nursing	Inpatient Beds	0	
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0	
☐ Intermediate Care	Inpatient Beds	0	
☐ Skilled Nursing	Inpatient Beds	0	
Total Beds this Building		0	

☐ Surgical	☐ Obstetrical Cesarean/Deliv	☐ Rehabilitation Therapy
☐ Anesthesia		
☐ Clinical Lab	☐ Obstetrical Recovery	☐ Renal Dialysis
☐ Radiological/ Imaging	☐ Newborn/ WellBaby	☐ Outpatient Surgery
☐ Pharmaceutical	☐ Emergency	☐ Central Plant
☐ Dietetic	☐ Nuclear Medicine	☐ Support Services
☐ Administration		

Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: **06** Building Name: **Skilled Nursing Building**

Type of Service Provided

[X]	Nursing	Inpatient Beds	0
[ ]	IntensiveCare	Inpatient Beds	0
[ ]	Pediatric/Adolescent	Inpatient Beds	0
[ ]	Psychiatric Nursing	Inpatient Beds	0
[ ]	Obstetrical Ante/Postprtum	Inpatient Beds	0
[ ]	Intermediate Care	Inpatient Beds	0
[X]	Skilled Nursing	Inpatient Beds	99
	Total Beds this Building		99

[ ]	Surgical	[ ] Obstetrical Cesarean/Deliv	[ ] Rehabilitation Therapy
[ ]	Anesthesia		
[ ]	Clinical Lab	[ ] Obstetrical Recovery	[ ] Renal Dialysis
[ ]	Radiological/ Imaging	[ ] Newborn/ WellBaby	[ ] Outpatient Surgery
[ ]	Pharmaceutical	[ ] Emergency	[ ] Central Plant
[ ]	Dietetic	[ ] Nuclear Medicine	[ ] Support Services
[ ]	Administration		

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: 02 **Building Name:** Central Plant/ Utilities Building

Medical / Surgical (Include GYN)
Inpatient Bed: 0 Inpatient Days: 0

Acute Respiratory Care
Inpatient Bed: 0 Inpatient Days: 0

Acute Psychiatric
Inpatient Bed: 0 Inpatient Days: 0

Perinatal (excluse Newborn / GYN)
Inpatient Bed: 0 Inpatient Days: 0

Burn
Inpatient Bed: 0 Inpatient Days: 0

Skilled Nursing
Inpatient Bed: 0 Inpatient Days: 0

Pediatric
Inpatient Bed: 0 Inpatient Days: 0

intensive Care Newborn Nursery
Inpatient Bed: 0 Inpatient Days: 0

Intermediate Card
Inpatient Bed: 0 Inpatient Days: 0

Intensive Care
Inpatient Bed: 0 Inpatient Days: 0

Rehabilitation Center
Inpatient Bed: 0 Inpatient Days: 0

Int. Care / development Disabled
Inpatient Bed: 0 Inpatient Days: 0

Coronary Care
Inpatient Bed: 0 Inpatient Days: 0

Chemical Dependency
Inpatient Bed: 0 Inpatient Days: 0

Total Beds this Building Per Unit: 0

Total Beds this Building Per Service: 0

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: 03 **Building Name:** Ancillary Building

	Inpatient Bed	Inpatient Days
Medical / Surgical (Include GYN)	0	0
Acute Respiratory Care	0	0
Acute Psychiatric	0	0
Perinatal (excluse Newborn / GYN)	0	0
Burn	0	0
Skilled Nursing	0	0
Pediatric	0	0
intensive Care Newborn Nursery	0	0
Intermediate Card	0	0
Intensive Care	8	1361
Rehabilitation Center	0	0
Int. Care / development Disabled	0	0
Coronary Care	0	0
Chemical Dependency	0	0

Total Beds this Building Per Unit: 8

Total Beds this Building Per Service: 8

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: 04 **Building Name:** Ambulatory Surgery Center

	Inpatient Bed	Inpatient Days
Medical / Surgical (Include GYN)	0	0
Acute Respiratory Care	0	0
Acute Psychiatric	0	0
Perinatal (excluse Newborn / GYN)	0	0
Burn	0	0
Skilled Nursing	0	0
Pediatric	0	0
intensive Care Newborn Nursery	0	0
Intermediate Card	0	0
Intensive Care	0	0
Rehabilitation Center	0	0
Int. Care / development Disabled	0	0
Coronary Care	0	0
Chemical Dependency	0	0

Total Beds this Building Per Unit: 0

Total Beds this Building Per Service: 0

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: 05 **Building Name:** ER Entrance Canopy

	Inpatient Bed	Inpatient Days
Medical / Surgical (Include GYN)	0	0
Acute Respiratory Care	0	0
Acute Psychiatric	0	0
Perinatal (excluse Newborn / GYN)	0	0
Burn	0	0
Skilled Nursing	0	0
Pediatric	0	0
intensive Care Newborn Nursery	0	0
Intermediate Card	0	0
Intensive Care	0	0
Rehabilitation Center	0	0
Int. Care / development Disabled	0	0
Coronary Care	0	0
Chemical Dependency	0	0

Total Beds this Building Per Unit: 0

Total Beds this Building Per Service: 0

Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number: 06 **Building Name:** Skilled Nursing Building

	Inpatient Bed	Inpatient Days
Medical / Surgical (Include GYN)	0	0
Acute Respiratory Care	0	0
Acute Psychiatric	0	0
Perinatal (excluse Newborn / GYN)	0	0
Burn	0	0
Skilled Nursing	99	13802
Pediatric	0	0
intensive Care Newborn Nursery	0	0
Intermediate Card	0	0
Intensive Care	0	0
Rehabilitation Center	0	0
Int. Care / development Disabled	0	0
Coronary Care	0	0
Chemical Dependency	0	0

Total Beds this Building Per Unit: 99

Total Beds this Building Per Service: 0