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

Facility Number:	13225
Facility Name:	Silver Lake Medical Center - Downtown Campus
Address:	1711 W. Temple St.
City:	Los Angeles
Hospital Owner/Lice	ensee: Success Healthcare1, LLC
Year of Repo	orting: 2010
Contact 1 e-mail Ad	dress:
Contact 2 e-mail Ad	dress:
Contact 3 e-mail Add	dress::
Name of Sub	mitter: Silver Lake Medical Center Downtown Campus
Submission	Date: 1/25/2011 3:00:00 PM

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For buildings which are planned for retrofit or replacement the report shall identify: Whether the hospital owner intends to retrofit or replace the building to SPC 2 or SPC 5 per section 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for retrofit or replacement of the bulding that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)

Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
01	Hospital and Medical Office	1711 W. Temple St.	Retrofit	SPC2	01/01/2013	12/31/2012
01A	Main Hospital - West	1711 W. Temple St.	Retrofit	SPC2	01/01/2013	12/31/2012
02	Boiler & Emergency Generator	1711 W. Temple St.	Retrofit	SPC2	01/01/2013	12/31/2012

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

Building Number: 01	Buildi	ng Name: Hospital and Medical Offic	е	
Type of Service Prov	<u>rided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services  Obstetrical	Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

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

Building Number: 01	A Buildi	ing Name: Main Hospital - West		
Type of Service Prov	<u>vided</u>			
X Nursing	Inpatient Beds	75 Inpatient 5784 Days	X Surgical	Obstetrical Recovery
X IntensiveCare	Inpatient Beds	12 Inpatient Days 960	X Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	X Clinical Lab	Emergency
X Psychiatric Nursing	Inpatient Beds	29 Inpatient Days 5292	X Radiological/ Imaging  X Pharmaceutical	X Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Dietetic	X Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration  X Support	X Renal Dialysis  X Outpatient
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Services	Surgery
		Total Beds this Building	Cesarean/Deliv	X Central Plant

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

Building Number: 02	Buildi	ng Name: Boiler & Emergency Gener	ator	
Type of Service Prov	<u>/ided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services  Obstetrical	Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

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#### 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: Hosp	oital and Medical Office		
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nev Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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

Building Number:	01A	Building Name: Mair	n Hospital - West		
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 75 Bed	Inpatient 5784 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 29 Bed	Inpatient 5292 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent
Inpatient 12 Bed	Inpatient 960 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	116	116

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

Building Number:	02	Building Name:	Boiler & Emergency Generate	or	
Medical / Surgical	(Include GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	e Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	0	0

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

	Building Number	Building Name	Building to be Removed
0.	1	Hospital and Medical Office	
0	1A	Main Hospital - West	
0:	2	Boiler & Emergency Generator	

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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	g Name: Ho	ospital and Medical	Office				
Type of Service Provided Surgical Obstetrical Rehabilitation								
	Nursing		ourgical		Cesarean/Deliv		Therapy	
	-		Anesthesia		Obstetrical		Renal Dialysis	
	IntensiveCare		Clinical Lab		Recovery		,	
	Pediatric/Adol escent		Clinical Lab		Newborn/		Outpatient Surgery	
	Psychiatric		Radiological/ Imaging	_	WellBaby			
	Nursing		Pharmaceutical		Emergency		Central Plant	
	Obstetrical Ante/Postprtum		Dietetic		Nuclear Medicine		Support Services	
	Intermediate Care	Х	Administration					
	Skilled Nursing							

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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:	01A	Building Name:	Main Hospital - West					
Type of Service Provided								
		<u> </u>	Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy			
X	Nursing	×	Anesthesia					
X	IntensiveCare		_	Obstetrical Recovery	X Renal Dialysis			
	Pediatric/Adol escent	×	Clinical Lab	Newborn/	X Outpatient Surgery			
[v]	Dovekistria	×	Radiological/ Imaging	WellBaby	ou.go.y			
X	Psychiatric Nursing	×	Pharmaceutical	Emergency	X Central Plant			
	Obstetrical Ante/Postprtu	m	_	X Nuclear	X Support			
	•	×	Dietetic	Medicine	Services			
	Intermediate Care		Administration					
	Skilled Nursin	g	_					

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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:	02 Buildin	g Name: B	oiler & Emergency G	enerator				
Type of Service Provided								
			Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	Nursing		Anesthesia					
	IntensiveCare				Obstetrical Recovery		Renal Dialysis	
	Pediatric/Adol		Clinical Lab	_			Outpatient	
	L escent		Radiological/		Newborn/ WellBaby		Surgery	
	Psychiatric Nursing		Imaging		_			
			Pharmaceutical		Emergency		Central Plant	
Ц	Obstetrical Ante/Postprtum		Dietetic		Nuclear Medicine		Support Services	
	Intermediate Care		Administration					
	Skilled Nursing							

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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:	ilding Number: 01 Building Name: Hospital and Medical Office							
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5					
Type of Service Provided								
	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis	
1 1	ediatric/Adol scent		Clinical Lab		Recovery			
	Psychiatric Jursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical .nte/Postprtum		Pharmaceutical		Emergency		Central Plant	
	ntermediate		Dietetic					
	care skilled Nursing	X	Administration		Nuclear Medicine		Support Services	

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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: 01A Building Name: Main Hospital - West							
Configuration .	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Service Provided							
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	IntensiveCare	X	Anesthesia		Obstetrical	X	Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
X	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical		Emergency	X	Central Plant
	Intermediate	X	Dietetic		Linergency		Contrain lant
	Care Skilled Nursing		Administration	X	Nuclear Medicine	X	Support Services

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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:	ding Number: 02 Building Name: Boiler & Emergency Generator							
Configuration Retrofit Conforming		g building to NPC 4 or NPC 5						
Type of Service Provided								
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Int	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis	
I I	ediatric/Adol scent		Clinical Lab		Recovery			
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	bstetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant	
	termediate		Dietetic					
	are killed Nursing		Administration		Nuclear Medicine		Support Services	

Report Status: Data Last Update: 11/01/2010 Submission Date: 01/25/2011 Print Date: 1/26/2011 8:38 AM

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