Report Year: 2011 10797 Kaiser Foundation Hospital-Redwood City Redwood City Page:1 of 13

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

Facility Number:	10797		
Facility Name:	Kaiser	oundation Hospital-Redwood City	
Address:	1150 V	terans Boulevard	
City:	Redwo	d City	
Hospital Owner/Lid	censee:	Kaiser Foundation Hospital/ #22000	0021
Year of Re	porting:	2011	
Contact 1 e-mail A	ddress:		
Contact 2 e-mail A	ddress:		
Contact 3 e-mail Ad	ddress::		
Name of Su	bmitter:	Kaiser Permanente Hospital - Redwe	ood City, CA
Submissio	on Date:	1/29/201	12 3:00:00 PM

Report Year: 2011 10797 Kaiser Foundation Hospital-Redwood City Redwood City Page:2 of 13

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	g Extension Date	Anticipated Completion Date
01	Hospital	1150 Veterans Boulevard	Replace	SPC5	01/01/2015	01/01/2015
03	Service Building 3	1150 Veterans Boulevard	Replace	SPC5	01/01/2015	01/01/2015

Report Year: 2011 10797 Kaiser Foundation Hospital-Redwood City Redwood City

For each building which is planned for retrofitting or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

Page:3 of 13

Building No: 01 Hospital	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Scope Number Num	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
10797 IS081979 0 PPR- REPLACEMENT HOSPITAL	11/05/2008 09/02/2010 01/01/2010 12/31/2013 OPEN No
Building No: 03 Service Building 3	Retrofit/Replacement Yes-Submitted Project:
Building No: 03 Service Building 3 Facility Project Sub Scope Number Num Scope	

Report Year: 2011 10797 Kaiser Foundation Hospital-Redwood City Redwood City Page:4 of 13

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		
Type of Service Prov	<u>/ided</u>			
X Nursing	Inpatient Beds	203 Inpatient 27190 Days	X Surgical	X Obstetrical Recovery
X IntensiveCare	Inpatient Beds	10 Inpatient Days 1580	X Anesthesia	X Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	X Clinical Lab	X Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging	X Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Pharmaceutical Dietetic	X Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration X Support	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services Obstetrical	X Outpatient Surgery
		Total Beds this Building 213	Cesarean/Deliv	Central Plant

Report Year: 2011 10797 Kaiser Foundation Hospital-Redwood City Redwood City Page:5 of 13

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

Building Number: 03	Buildi	ng Name: Service Building 3		
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	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services Obstetrical	Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

Report Year:

2011

10797

Kaiser Foundation Hospital-Redwood City

Redwood City

Page:6 of 13

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:	Hospital		
Medical / Surgical (Include GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 175 Bed	Inpatient 2719 Days 0	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse I	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 24 Bed	Inpatient 2491 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	∍ Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	4 Inpatient 822 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developn Disabled	nent
Inpatient 10 Bed	Inpatient 3083 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	213	213

Report Year:

2011

10797

Kaiser Foundation Hospital-Redwood City

Redwood City

Page:7 of 13

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

Building Number: 03	Building Name: Service Building 3	
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric	intensive Care Newborn Nursery	Intermediate Card
Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Intensive Care	Rehabilitation Center	Int. Care / development Disabled
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days	Inpatient 0 Inpatient 0 Days
Coronary Care	Chemical Dependency	Total Beds this Building Per Unit Building Per Service
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days	0 0

Report Year:	2011	10797	Kaiser Foundation Hospital-Redwood City		Redwood City	Page:8 of 13
--------------	------	-------	---	--	--------------	--------------

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	Hospital	
C	03	Service Building 3	

Report Year: 2011 10797 Kaiser Foundation Hospital-Redwood City Redwood City Page:9 of 13

Report Year:

2011

10797

Kaiser Foundation Hospital-Redwood City

Redwood City

Page:10 of 13

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:	Но	ospital				
Type of Servic	e Provided							
		<u> </u>	(Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	Nursing	[2	<	Anesthesia				
X	IntensiveCare	_			X	Obstetrical Recovery		Renal Dialysis
П	Pediatric/Adol escent		\	Clinical Lab			X	Outpatient
	escent	[2	<	Radiological/ Imaging	X	Newborn/ WellBaby		Surgery
	Psychiatric Nursing		$\overline{\langle}$	Pharmaceutical	X	Emergency		Central Plant
П	Obstetrical		ù					
	Ante/Postprtur	m [Dietetic	X	Nuclear Medicine	X	Support Services
	Intermediate							
	Care		Κ	Administration				
	Skilled Nursing	g						

Report Year:	2011	10797	Kaiser Foundation Hospital-Redwood City		Redwood City	Page:11 of 13
--------------	------	-------	---	--	--------------	---------------

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:	03	Building Name:	Service Building 3						
Type of Service Provided									
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	Nursing		Anesthesia						
	IntensiveCare	; _		Obstetrical Recovery		Renal Dialysis			
	Pediatric/Ado	, [Clinical Lab			Outpatient			
	escent Psychiatric		Radiological/ Imaging	Newborn/ WellBaby		Surgery			
	Nursing		Pharmaceutical	Emergency		Central Plant			
	Obstetrical Ante/Postprtu	m [Dietetic	Nuclear Medicine	X	Support Services			
	Intermediate Care		Administration						
	Skilled Nursin	ıg							

Report Year: 2011 10797 Kaiser Foundation Hospital-Redwood City Redwood City Page:12 of 13

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	r: 01	Building Na	me: Hospital								
Configuration Replace with new S		SPC 5 and NPC 4 or NPC 5 building									
Type of Service Provided											
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy				
X	IntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis				
	Pediatric/Adol escent	Х	Clinical Lab		Recovery						
	Psychiatric Nursing	X	Radiological/ Imaging	X	Newborn/ WellBaby	X	Outpatient Surgery				
	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency		Central Plant				
	Intermediate		Dietetic		Linergency		Central Flam				
	Care Skilled Nursing	X	Administration	X	Nuclear Medicine	X	Support Services				
Ш											

Report Year: 2011 10797 Kaiser Foundation Hospital-Redwood City Redwood City Page:13 of 13

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	er: 03	Building Na	me: Service Building 3							
Configuration Replace with new SPC 5 and NPC 4 or NPC 5 building										
Type of Service Provided										
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab		Recovery					
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant			
	Intermediate		Dietetic		Emergency	_	Central Flam			
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services			

Report Status: **Data Last Update**: 10/27/2011 **Submission Date**: 01/29/2012 **Print Date**: 1/30/2012 12:45 PM

i