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

Facility Number: 11288

Facility Name: Alameda County Medical Center - Highland Campus

Address: 1411 East 31st Street

City: Oakland

Hospital Owner/Licensee: County of Alameda, General Services Agency

Year of Reporting: 2011

Contact 1 e-mail Address:

Contact 2 e-mail Address:

Contact 3 e-mail Address::

Name of Submitter: Ann Ludwig

Submission Date: 1/29/2012 3:00:00 PM

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	Acute Care Tower	1411 East 31st Street	Replace	SPC5	01/01/2020	12/01/2016
03	Chiller Building	1411 East 31st Street	Replace	SPC5	01/01/2020	12/01/2016
04	Boiler Plant	1411 East 31st Street	Replace	SPC5	01/01/2020	01/01/2020

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).

Building No:	01			Acute Care Tower			Retrofit/Replacement Project:		Yes-Submitted

Facility Number	Project Number	Sub Num	Scope	Date in	Plan Approved Date	Proj. Start Date	Proj. Completed Date	Status	CEQA Review
11288	IS101717	0	PPR - ACUTE CARE TOWER REPLACEMENT	09/09/2010		01/01/2011	05/01/2017	OPEN	No

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Building No:	03			Chiller Building			Retrofit/Replacement Project:		Yes-Submitted

Facility Number	Project Number	Sub Num	Scope	Date in	Plan Approved Date	Proj. Start Date	Proj. Completed Date	Status	CEQA Review
11288	IS101717	0	PPR - ACUTE CARE TOWER REPLACEMENT	09/09/2010		01/01/2011	05/01/2017	OPEN	No

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Building No:	04			Boiler Plant			Retrofit/Replacement Project:		Yes-Planned

Facility Number	Project Number	Sub Num	Scope	Date in	Plan Approved Date	Proj. Start Date	Proj. Completed Date	Status	CEQA Review
11288	HS000487	0		03/14/2000	12/19/2000	10/20/2000	07/11/2005	CLSD	No

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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**   Building Name: **Acute Care Tower**

Type of Service Provided

[X]	Nursing	Inpatient Beds	194	Inpatient Days	33620	[ ] Surgical	[X] Obstetrical Recovery
[X]	IntensiveCare	Inpatient Beds	28	Inpatient Days	7199	[ ] Anesthesia	[X] Newborn/WellBaby
[ ]	Pediatric/Adolescent	Inpatient Beds	0	Inpatient Days	0	[X] Clinical Lab	[ ] Emergency
[ ]	Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	0	[X] Radiological/Imaging	[X] Nuclear Medicine
						[ ] Pharmaceutical	
[X]	Obstetrical Ante/Postprtum	Inpatient Beds	14	Inpatient Days	2862	[X] Dietetic	[X] Rehabilitation Therapy
[ ]	Intermediate Care	Inpatient Beds	0	Inpatient Days	0	[X] Administration	[ ] Renal Dialysis
[ ]	Skilled Nursing	Inpatient Beds	0	Inpatient Days	0	[X] Support Services	[ ] Outpatient Surgery
		Total Beds this Building	236			[X] Obstetrical 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: **03**   Building Name: **Chiller Building**

Type of Service Provided

| ☐ Nursing | Inpatient Beds | 0 | Inpatient Days | 0 | ☐ Surgical | ☐ Obstetrical Recovery |

| ☐ IntensiveCare | Inpatient Beds | 0 | Inpatient Days | 0 |

- ☐ Nursing — Inpatient Beds: 0 — Inpatient Days: 0
- ☐ IntensiveCare — Inpatient Beds: 0 — Inpatient Days: 0
- ☐ Pediatric/Adolescent — Inpatient Beds: 0 — Inpatient Days: 0
- ☐ Psychiatric Nursing — Inpatient Beds: 0 — Inpatient Days: 0
- ☐ Obstetrical Ante/Postprtum — Inpatient Beds: 0 — Inpatient Days: 0
- ☐ Intermediate Care — Inpatient Beds: 0 — Inpatient Days: 0
- ☐ Skilled Nursing — Inpatient Beds: 0 — Inpatient Days: 0

Total Beds this Building: **0**

- ☐ Surgical
- ☐ Anesthesia
- ☐ Clinical Lab
- ☐ Radiological/Imaging
- ☐ Pharmaceutical
- ☐ Dietetic
- ☐ Administration
- ☐ Support Services
- ☐ Obstetrical Cesarean/Deliv

- ☐ Obstetrical Recovery
- ☐ Newborn/WellBaby
- ☐ Emergency
- ☐ Nuclear Medicine
- ☐ Rehabilitation Therapy
- ☐ Renal Dialysis
- ☐ Outpatient Surgery
- ☒ 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: **04**   Building Name: **Boiler Plant**

Type of Service Provided

☐ Nursing	Inpatient Beds	0	Inpatient Days	0	☐ Surgical	☐ Obstetrical Recovery
☐ IntensiveCare	Inpatient Beds	0	Inpatient Days	0	☐ Anesthesia	☐ Newborn/ WellBaby
☐ Pediatric/Adolescent	Inpatient Beds	0	Inpatient Days	0	☐ Clinical Lab	☐ Emergency
					☐ Radiological/ Imaging	☐ Nuclear Medicine
☐ Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	0	☐ Pharmaceutical	
☐ Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days	0	☐ Dietetic	☐ Rehabilitation Therapy
☐ Intermediate Care	Inpatient Beds	0	Inpatient Days	0	☐ Administration	☐ Renal Dialysis
☐ Skilled Nursing	Inpatient Beds	0	Inpatient Days	0	☐ Support Services	☐ Outpatient Surgery
	Total Beds this Building	0			☐ 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:** Acute Care Tower

Medical / Surgical (Include GYN)	
Inpatient Bed: 194	Inpatient Days: 33620
Acute Respiratory Care	
Inpatient Bed: 0	Inpatient Days: 0
Acute Psychiatric	
Inpatient Bed: 0	Inpatient Days: 0

Medical / Surgical (Include GYN)

Inpatient Bed: 194   Inpatient Days: 33620

Acute Respiratory Care

Inpatient Bed: 0   Inpatient Days: 0

Acute Psychiatric

Inpatient Bed: 0   Inpatient Days: 0

Perinatal (exclude Newborn / GYN)

Inpatient Bed: 14   Inpatient Days: 2862

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: 8   Inpatient Days: 1379

Intermediate Card

Inpatient Bed: 0   Inpatient Days: 0

Intensive Care

Inpatient Bed: 20   Inpatient Days: 5820

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: 236

Total Beds this Building Per Service: 236

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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: 03   **Building Name:** Chiller 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 (exclude 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

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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: 04   **Building Name:** Boiler Plant

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 (exclude 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`

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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
01	Acute Care Tower	
03	Chiller Building	
04	Boiler Plant	
05	Critical Care Building	

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

Building Number	Building Name	New Site
N_1	Acute Care Tower Replacement	☐

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: Acute Care Tower

Type of Service Provided

[X]	Nursing	[ ]	Surgical	[X]	Obstetrical Cesarean/Deliv
[X]	IntensiveCare	[ ]	Anesthesia	[X]	Obstetrical Recovery
[ ]	Pediatric/Adolescent	[X]	Clinical Lab	[X]	Newborn/WellBaby
[ ]	Psychiatric Nursing	[X]	Radiological/Imaging		
[X]	Obstetrical Ante/Postprtum	[ ]	Pharmaceutical	[ ]	Emergency
[ ]	Intermediate Care	[X]	Dietetic	[X]	Nuclear Medicine
[ ]	Skilled Nursing	[X]	Administration		

[X] Rehabilitation Therapy
[ ] Renal Dialysis
[ ] Outpatient Surgery
[ ] Central Plant
[X] Support Services

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: Chiller Building

Type of Service Provided

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

Report Status: **Data Last Update:** 01/23/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:46 PM

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: 04   Building Name: Boiler Plant

Type of Service Provided

☐ Nursing	☐ Surgical
☐ IntensiveCare	☐ Anesthesia
☐ Pediatric/Adolescent	☐ Clinical Lab
☐ Psychiatric Nursing	☐ Radiological/Imaging
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical
☐ Intermediate Care	☐ Dietetic
☐ Skilled Nursing	☐ Administration

☐ Obstetrical Cesarean/Deliv
☐ Obstetrical Recovery
☐ Newborn/WellBaby
☐ Emergency
☐ Nuclear Medicine

☐ Rehabilitation Therapy
☐ Renal Dialysis
☐ Outpatient Surgery
☒ Central Plant
☐ Support Services

Report Status: **Data Last Update:** 01/23/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:46 PM

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: Acute Care Tower

Configuration: Replace with new SPC 5 and NPC 4 or NPC 5 building

Type of Service Provided

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

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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: 03   Building Name: Chiller Building

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 Recovery	☐ Renal Dialysis
☐ Pediatric/Adolescent	☐ Clinical Lab		
☐ Psychiatric Nursing	☐ Radiological/Imaging	☐ Newborn/WellBaby	☐ Outpatient Surgery
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical		
		☐ Emergency	☒ Central Plant
☐ Intermediate Care	☐ Dietetic		
		☐ Nuclear Medicine	☐ Support Services
☐ Skilled Nursing	☐ Administration		

Report Status: **Data Last Update:** 01/23/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:46 PM

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: Boiler Plant

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 Recovery	☐ Renal Dialysis
☐ Pediatric/Adolescent	☐ Clinical Lab		
☐ Psychiatric Nursing	☐ Radiological/Imaging	☐ Newborn/WellBaby	☐ Outpatient Surgery
☐ Obstetrical Ante/Postprtum	☐ Pharmaceutical	☐ Emergency	☒ Central Plant
☐ Intermediate Care	☐ Dietetic	☐ Nuclear Medicine	☐ Support Services
☐ Skilled Nursing	☐ Administration		

Report Status: **Data Last Update:** 01/23/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:46 PM

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: Critical Care Building

Configuration: Retrofit Conforming building to NPC 4 or NPC 5

Type of Service Provided

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

Report Status: **Data Last Update:** 01/23/2012   **Submission Date:** 01/29/2012   **Print Date:** 1/30/2012 12:46 PM

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: **Critical Care Building**

Type of Service Provided

Service		Beds
☐ 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
- ☒ 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 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:** Critical Care 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 (exclude 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

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