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

Facility Number:	10541
Facility Name:	Hemet Valley Medical Center
Address:	1117 East Devonshire
City:	Hemet
Hospital Owner/Lice	Physicians for Healthy Hospitals
Year of Rep	orting: 2012
Contact 1 e-mail Ad	dress:
Contact 2 e-mail Ad	ldress:
Contact 3 e-mail Add	dress::
Name of Sub	mitter: Hemet Valley Medical Center
Submission	Date: 1/11/2013 3:56:08 PM

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For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, retrofit or replacement of the building 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
BLD- 01406	Tower I	1117 East Devonshire	Retrofit	SPC2	01/01/2020	01/01/2020
BLD- 01408	1948 Addition	1117 East Devonshire	Retrofit	SPC2	01/01/2016	08/01/2015
BLD- 01409	North Wing and Annex	1117 East Devonshire	Retrofit	SPC2	01/01/2019	11/30/2018

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For each building which is planned for rebuild, retrofit 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: BLD-01406	Tower I		Retrofit/Replacement Project:	Hazus-Submitted
Facility Project Sub Number Number Num	Scope	Date Plan in	Approved Proj. Start Proj. Comple Date Date Date	eted Status CEQA Review
10541 HL102420-0 0		10/4/2010 12:00:00 AM	01/01/2024	ACTI No
Building No: BLD-01408	1948 Addition		Retrofit/Replacement Project:	Hazus-Submitted
Facility Project Sub Number Number Num	Scope	Date Plan in	Approved Proj. Start Proj. Comple Date Date Date	eted Status CEQA Review_
10541 HL102420-0 0		10/4/2010 12:00:00 AM	01/01/2024	ACTI No
Building No: BLD-01409	North Wing and Annex		Retrofit/Replacement Project:	Hazus-Submitted
Facility Project Sub Number Number Num	Scope	Date Plan in	Approved Proj. Start Proj. Comple Date Date Date	eted Status CEQA Review
10541 HL102420-0 0		10/4/2010 12:00:00 AM	01/01/2024	ACTI 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: BL	.D-01406	Building Name:	Tower I	
Type of Service Prov	<u>rided</u>			
X Nursing	Inpatient Beds	58 Inpatient 0 Days	X Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	X Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical   X Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
X Skilled Nursing	Inpatient Beds	23 Inpatient Days 7733	X Support Services Obstetrical	Outpatient 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: BL	_D-01408	Building Name:	1948 Addition	
Type of Service Prov	<u>rided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	i i Suluicai I i i	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	I I I Anacthodia I I	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0		Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	I I I	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	, variante la	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Services Solution Sol	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: BL	.D-01409	Building Name: No	orth Wing and Annex	
Type of Service Prov	<u>rided</u>			_
X Nursing	Inpatient Beds	22 Inpatient 0 Days	Surgical	X 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
X Obstetrical Ante/Postprtum	Inpatient Beds	12 Inpatient Days 2509	Pharmaceutical Dietetic	X 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

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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:	BLD-01406 B	Suilding Name: Towe	er I		
Medical / Surgical (	Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 58 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 23 Bed	Inpatient 7733 Days
Pediatric		intensive Care New 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 / developn Disabled	nent
	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	81	81

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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:	BLD-01408	Building Name: 1948	3 Addition		
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:	BLD-01409 <b>Bu</b>	ilding Name: No	orth Wing and Annex		
Medical / Surgical (Ir	nclude GYN)	Acute Respirato	ry Care	Acute Psychiatric	
	npatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	ewborn / GYN)	Burn		Skilled Nursing	
	npatient 2509 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care N Nursery	ewborn	Intermediate Card	
	npatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	ment
	npatient 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
	npatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	34	34

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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 / Replaced / Rebuilt
BLD-01406	Tower I	Retrofit
BLD-01408	1948 Addition	Retrofit
BLD-01409	North Wing and Annex	Retrofit
BLD-01411	1965 NW Addition	Remain
BLD-01412	Behavioral Health	Remain
BLD-01413	Obstetrics II	Remain
BLD-01415	Tower II Upper Levels	Remain
BLD-01417	Main Lobby and Entrance	Remain
BLD-01418	Area A	Remain
BLD-02857	Area B	Remain

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

Building Number	Building Name	New Site	
N_1	Multi-Story Building		
N_2	Emergency Department		
N_3	Central Plant		

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For the building or buildings to be replaced, rebuilt, 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) and provide said date or dates for replaced or rebuild buildings as well.

The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well.

The inpatient service currently delivered in the buildings or buildings per Section 130061(c)(20(C))

Building I	Number: BLD-0140	8	1948 Addition			Removal Date:	(	01/01/2016		
Planned	Planned Uses for the building to be removed from acute care service:									
Planned	use for building: De	molished								
<u>Inpatient</u>	services currently del	ivered in the	e building:							
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Ш	Rehabilitation Therapy		
	IntensiveCare		Anesthesia							
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery		Ш	Renal Dialysis		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery		
	Obstetrical Ante/Postprtum		Pharmaceutical		·			Central Plant		
	Intermediate Care		Dietetic		Emergency			Contain land		
	Skilled Nursing		Administration		Nuclear Medicine			Support Services		

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For the building or buildings to be replaced, rebuilt, 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) and provide said date or dates for replaced or rebuild buildings as well.

The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well.

The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)

Building I	Number: BLD-0140	9	North Wing and Ani	nex		Removal Date:		01/01/2014	
Planned Uses for the building to be removed from acute care service:  Planned use for building: Demolished									
_	services currently deli	ivered in the	•		Obstetrical		X	Rehabilitation	
X	Nursing IntensiveCare		Surgical  Anesthesia		Cesarean/Deliv			Therapy	
	Pediatric/Adol escent		Clinical Lab	X	Obstetrical Recovery			Renal Dialysis	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery	
X	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency			Central Plant	
	Intermediate Care		Dietetic					_	
	Skilled Nursing		Administration		Nuclear Medicine		[X]	Support Services	

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Report whether the general acute care services and beds will be relocated to a new, existing or retrofitted building and any corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c) (2)(E)

			<u> </u>						
Building Number: Tower I									
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?									
Nursing Relocated to new building									
New Building RetroFitted Building	<u>Othe</u>	r SPC2-SPC5 Building							
Facility Project Sub Scope Status	Date Plan Approved	Proj. Start Proj. Completed							
Number Num	in Date	Date Date							
10541 HL102420-0 0 GEOTECH REPORT FOR HOSPITAL ADDITIONS	2010-10-04	01/01/2026 07/01/2029	ACTI						
Building Name: Tower I Number:									
Will general acutr care services and beds will be relocated to a new, Existing or re-	trofittrd building?								
Skilled Nursing Removed from hospital services									
Facility Project Sub Scope Status	Date Plan Approved	Proj. Start Proj. Completed							
Number Num	in Date	Date Date							
<ul> <li>HL102420-0 0 GEOTECH REPORT FOR HOSPITAL ADDITIONS</li> </ul>	2010-10-04	01/01/2026 07/01/2029	ACTI						

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Building Number: Tower I	
Will general acutr care services and beds will be relocated to a new, Existing or re	etrofittrd building?
Radiological/Imaging Relocated to new & other Building	
New Building RetroFitted Building	Other SPC2-SPC5 Building
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj. Completed
Number Num	in Date Date Date
10541 HL102420-0 0 GEOTECH REPORT FOR HOSPITAL ADDITIONS	2010-10-04 01/01/2026 07/01/2029 ACTI
Building Number: Tower I	
Will general acutr care services and beds will be relocated to a new, Existing or re-	etrofittrd building?
Dietetic Relocated to other building	
New Building RetroFitted Building	Other SPC2-SPC5 Building
Building Number: BLD-01406 Building Name: Tower I	
Will general acutr care services and beds will be relocated to a new, Existing or re	etrofittrd building?
Support Services Relocated to other building	
New Building RetroFitted Building	Other SPC2-SPC5 Building

Report Year: 2012 10541 Hemet Valley Medical Center Hemet Page:16 of 45 BLD-01409 North Wing and Annex **Building Name:** Building Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Relocated to new building Nursing **New Building** RetroFitted Building Other SPC2-SPC5 Building Date Plan Approved Facility Project Sub Scope Proj. Start Proj. Completed Status Number Number Num Date Date Date HL102420-0 01/01/2026 10541 0 GEOTECH REPORT FOR HOSPITAL ADDITIONS 2010-10-04 07/01/2029 ACTI BLD-01409 North Wing and Annex **Building Name:** Building Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Relocated to new building Support Services **New Building** RetroFitted Building Other SPC2-SPC5 Building Date Plan Approved Facility Project Sub Scope Proj. Start Proj. Completed Status Number Number Num Date Date Date 10541 HL102420-0 0 GEOTECH REPORT FOR HOSPITAL ADDITIONS 2010-10-04 01/01/2026 07/01/2029 **ACTI** 

10541 Hemet Valley Medical Center Report Year: 2012 Hemet Page:17 of 45 BLD-01409 North Wing and Annex **Building Name:** Building Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building? Rehabilitation Relocated to new building Therapy **New Building RetroFitted Building** Other SPC2-SPC5 Building Date Plan Approved Project Sub Proj. Start Proj. Completed Facility Scope Status Date Date Number Number Num Date HL102420-0 0 GEOTECH REPORT FOR HOSPITAL ADDITIONS 2010-10-04 01/01/2026 07/01/2029 10541 ACTI

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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:	BLD-01406 Buildin	ng Name: Tower I							
Type of Service Provided									
		X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy					
X	Nursing	X Anesthesia							
	IntensiveCare		Obstetrical Recovery	Renal Dialysis					
	Pediatric/Adol escent	Clinical Lab	Newborn/	Outpatient Surgery					
	Psychiatric	X Radiological/ Imaging	WellBaby	J					
	Nursing	Pharmaceutical	Emergency	X Central Plant					
	Obstetrical Ante/Postprtum	_	Nuclear	X Support					
	·	X Dietetic	Medicine	Services					
	Intermediate Care	Administration							
X	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:	BLD-01408 Buildin	g Name: 1948 Addition							
Type of Service Provided									
		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy					
	Nursing	Anesthesia							
	IntensiveCare		Obstetrical Recovery	Renal Dialysis					
П	Pediatric/Adol escent	Clinical Lab		Outpatient					
	Psychiatric	Radiological/ Imaging	Newborn/ WellBaby	☐ Surgery					
	Nursing	Pharmaceutical	Emergency	Central Plant					
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Services					
	Intermediate Care	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:	BLD-01409 Buildin	g Name: North Wing and Annex								
Type of Service Provided										
		Surgical	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy					
X	Nursing	Anesthesia								
	IntensiveCare	Ariestriesia	X Obstetrical Recovery		Renal Dialysis					
	Pediatric/Adol escent	Clinical Lab			Outpatient					
		Radiological/ Imaging	Newborn/ WellBaby		Surgery					
Ш	Psychiatric Nursing	Pharmaceutical	Emergency		Central Plant					
X	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X	Support Services					
	Intermediate Care	Administration								
П	Skilled Nursing									

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Building Numbe	er: BLD-01406	D-01406 Building Name: Tower I								
Configuration	Replace with exist	ing SPC3, S	PC4 or SPC5 and NF	PC4 or NPC	5 building.					
Type of Serv	vice Provided									
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab		Recovery					
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	X	Central Plant			
	Intermediate	X	Dietetic							
X	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services			

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Building Numbe	Iding Number: BLD-01408 Building Name: 1948 Addition								
Configuration:	Replace with exist	ing SPC3, S	PC4 or SPC5 and NF	PC4 or NPC	5 building.				
Type of Serv	ice 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						
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services		

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Building Number	uilding Number: BLD-01409 Building Name: North Wing and Annex									
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new S	SPC5 and N	NPC4 or NPC5 building.					
Type of Serv	ice Provided									
X	Nursing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy			
	IntensiveCare		Anesthesia	X	Obstetrical		Renal Dialysis			
	Pediatric/Adol escent		Clinical Lab		Recovery					
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
1, , 1	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant			
	Intermediate Care		Dietetic				0 1			
	Skilled Nursing		Administration		Nuclear Medicine	X	Support Services			

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Building Number	r: BLD-01411	Building Na	me: 1965 NW Add	dition			
Configuration: N/A							
Type of Serv	ice 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	X	Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

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Building Number:	BLD-01412	Building Na	me: Behavioral Hea	alth			
Configuration: N/A							
Type of Service Provided							
	Jursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
lı	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
l I	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Jursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical ante/Postprtum		Pharmaceutical	X	Emergency		Central Plant
	ntermediate Care		Dietetic				0
	Skilled Nursing		Administration		Nuclear Medicine	[X]	Support Services

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Building Number:	BLD-01413	Building Nar	me: Obstetrics II			
Configuration:	N/A					
Type of Service Provided						
☐ No	ursing		Surgical	X	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Int	tensiveCare		Anesthesia	X	Obstetrical	Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery	
	sychiatric ursing		Radiological/ Imaging	X	Newborn/ WellBaby	Outpatient Surgery
	ostetrical nte/Postprtum		Pharmaceutical		Emergency	Central Plant
	termediate		Dietetic	_	Emergency	Contain and
	are killed Nursing		Administration		Nuclear Medicine	Support Services

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Building Number:	BLD-01415 Building Name: Tower II Upper Levels						
Configuration:	N/A						
Type of Service	Provided						
X N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X In	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant
	termediate		Dietetic	<u></u>	31931139	_	Contract land
	are killed Nursing		Administration		Nuclear Medicine	X	Support Services

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Building Numbe	er: BLD-01417	Building Na	me: Main Lobby ar	nd Entrance			
Configuration: N/A							
Type of Serv	vice 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	П	Emergency	П	Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing	X	Administration		Nuclear Medicine		Support Services

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Building Number:	BLD-01418	Building Na	me: Area A			
Configuration:	N/A					
Type of Service	Provided					_
Nu	rsing	X	Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare		Anesthesia	Obstetrical		Renal Dialysis
	diatric/Adol cent		Clinical Lab	Recovery		
	ychiatric rsing		Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery
	stetrical te/Postprtum		Pharmaceutical	Emergency		Central Plant
	ermediate		Dietetic			Contract land
Ca	re illed Nursing		Administration	Nuclear Medicine	X	Support Services

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Building Number:	BLD-02857	Building Na	me: Area B			
Configuration:	N/A					
Type of Servic	e Provided					
□ N	ursing	X	Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
In	tensiveCare		Anesthesia	Obstetrical		Renal Dialysis
l I	ediatric/Adol scent		Clinical Lab	Recovery		
	sychiatric ursing		Radiological/ Imaging	Newborn/ WellBaby	X	Outpatient Surgery
	bstetrical nte/Postprtum		Pharmaceutical	Emergency		Central Plant
<b></b>	termediate		Dietetic			
	are killed Nursing		Administration	Nuclear Medicine	Ш	Support Services

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Building Number: BL	Building Number: BLD-01411 Building Name: 1965 NW Addition							
Type of Service Pro	Type of Service Provided							
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveCare	Inpatient Beds	0	Anesthesia					
Pediatric/Adol escent	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	X Pharmaceutical	Emergency	Central Plant			
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services			
Skilled Nursing	Inpatient Beds	0	Administration					
Total Beds this Building		0						

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Building Number: BL	Building Number: BLD-01412 Building Name: Behavioral Health							
Type of Service Provided								
Nursing	Inpatient Beds	0	Surg	ical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
IntensiveCare	Inpatient Beds	0	Anes	thesia				
Pediatric/Adol escent	Inpatient Beds	0	Clinic	cal Lab	Obstetrical Recovery	Renal Dialysis		
Psychiatric Nursing	Inpatient Beds	0	X Radio Imag	ological/ ing	Newborn/ WellBaby	Outpatient Surgery		
Obstetrical Ante/Postprtum	Inpatient Beds	0	Phari	maceutical	X Emergency	Central Plant		
Intermediate Care	Inpatient Beds	0	Diete	rtic	Nuclear Medicine	X Support Services		
Skilled Nursing	Inpatient Beds	0	Admi	nistration				
Total Beds this Building		0						

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Building Number: BL	.D-01413	Building N	Name: Obstet	rics II		
Type of Service Pro	<u>vided</u>					
Nursing	Inpatient Beds	0	Su	ırgical	X Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	An	esthesia		
Pediatric/Adol escent	Inpatient Beds	0	Clii	nical Lab	X Obstetrical Recovery	Renal Dialysis
Psychiatric Nursing	Inpatient Beds	0		diological/ aging	X Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0	Ph:	armaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0	Die	etetic	Nuclear Medicine	Support Services
Skilled Nursing	Inpatient Beds	0	Ad	ministration		
Total Beds this Building		0				

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Building Number: BL	D-01415	Building I	Name: To	wer II Upper Levels		
Type of Service Pro	<u>vided</u>					
X Nursing	Inpatient Beds	165		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X IntensiveCare	Inpatient Beds	26		Anesthesia		
Pediatric/Adol escent	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	X Support Services
Skilled Nursing	Inpatient Beds	0		Administration		
Total Beds this Building		191				

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Building Number: BI	_D-01417	Building N	Name: Ma	in Lobby and Ent	rance	
Type of Service Pro	<u>ovided</u>					
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0		Anesthesia		
Pediatric/Adol escent	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	X	Administration		
Total Beds this Building		0				

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Building Number: BL	D-01418	Building N	Name: Area A		
Type of Service Prov	<u>/ided</u>				
Nursing	Inpatient Beds	0	X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCare	Inpatient Beds	0	Anesthesia		
Pediatric/Adol escent	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	X Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			

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Buildi	ing Number: BLI	D-02857	Building I	Name: Ar	ea B		
Тур	e of Service Prov	<u>rided</u>					
	Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	X 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				

Report Status: **Data Last Update:** 10/25/2012 **Submission Date:** 01/11/2013 **Print Date:** 1/12/2013 6:25 AM

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Building Number:	BLD-01411	Building Name:	1965 NW	Addition		
Medical / Surgical (I	nclude GYN)	Acute Ro	espiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpa	atient 0	Inpatient 0	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn			Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpa	atient 0	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Nursery	e Care Newbori	1	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpa	atient 0	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabili Center	tation		Int. Care / develop	ment
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpa	atient 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemica Depende			Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpa	atient 0	0	0

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Building Number:	BLD-01412 Build	Behavioral Health	
Medical / Surgical (In	clude GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days
Perinatal (excluse Ne	wborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient Days	Inpatient 0 Inpatient 0 Days
Pediatric		intensive Care Newborn Nursery	Intermediate Card
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Days
Intensive Care		Rehabilitation Center	Int. Care / development Disabled
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 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 Inpatient 0 Days	,

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Building Number:	BLD-01413	Building Name:	Obstetrics II				
Medical / Surgical (Include GYN)		Acute Res	piratory Care	Acute Ps	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days		
Perinatal (excluse Newborn / GYN)		Burn		Skilled N	Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days		
Pediatric		intensive ( Nursery	Care Newborn	Intermed	Intermediate Card		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days		
Intensive Care		Rehabilita Center	tion	Int. Care Disabled	/ development		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days		
Coronary Care		Chemical Dependen	су	Total Be Building Unit			
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0	0 0		

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Building Number:	LD-01415 Build	ing Name: Towe	er II Upper Levels			
Medical / Surgical (Inc	lude GYN)	Acute Respiratory	Care	Acute Psychiatric		
Inpatient 165 Bed	Inpatient 31365 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days		
Perinatal (excluse Newborn / GYN)		Burn		Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days		
Pediatric		intensive Care New Nursery	vborn	Intermediate Card		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days		
Intensive Care		Rehabilitation Center		Int. Care / development Disabled		
Inpatient 18 Bed	Inpatient 4899 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Inpatient 0 Days		
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit Total Beds this Building Per Service		
Inpatient 8 Bed	Inpatient 1089 Days	Inpatient 0 Bed	Inpatient 0 Days	191 191		

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Building Number:	BLD-01417	Building Name:	Main Lobby and Entrance				
Medical / Surgical (Include GYN)		Acute Respi	atory Care	Acute Psychiatric	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing	Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Pediatric		intensive Ca Nursery	re Newborn	Intermediate Card	Intermediate Card		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Intensive Care		Rehabilitatio Center	n	Int. Care / develop Disabled	ment		
Inpatient 0 Bed	Inpatient Days	0 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 Days	0 Inpatient Bed	0 Inpatient 0 Days	0	0		

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Building Number:	BLD-01418	Building Name:	Area A				
Medical / Surgical (Include GYN)		Acute Resp	iratory Care	Acute Psychiatric	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse Newborn / GYN)		Burn		Skilled Nursing	Skilled Nursing		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Pediatric		intensive Ca Nursery	are Newborn	Intermediate Card	Intermediate Card		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Intensive Care		Rehabilitati Center	on	Int. Care / develop	ment		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Coronary Care		Chemical Dependenc	у	Total Beds this Building Per Unit	Total Beds this Building Per Service		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	0	0		

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Building Number:	BLD-02857	Building Name	Area I	В				
Medical / Surgical (Include GYN)		Acute F	Acute Respiratory Care			Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatien Bed	t 0	Inpatient Days	-	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse N	Burn	Burn			Skilled Nursing			
Inpatient 0 Bed	Inpatient Days	0 Inpatien Bed	t 0	Inpatient Days	~ I	Inpatient 0	Inpatient 0 Days	
Pediatric		intensive Care Newborn Nursery			Intermediate Card			
Inpatient 0 Bed	Inpatient Days	0 Inpatien Bed	t 0	Inpatient Days	-	Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabil Center	itation			Int. Care / developr Disabled	nent	
Inpatient 0 Bed	Inpatient Days	0 Inpatien Bed	t 0	Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemic Depend				Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient Days	0 Inpatien Bed	t 0	Inpatient Days	0	0	0	

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