Report Year:	2012
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11295

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

Facility Number:	11295
Facility Name:	Kaiser Foundation Hospital - Hayward
Address:	27400 Hesperian Boulevard
City:	Hayward
Hospital Owner/Lice Year of Rep Contact 1 e-mail Ad Contact 2 e-mail Ad Contact 3 e-mail Ado Name of Sub	orting: 2012 dress: dress: mitter: Joe Kinsella
Submission	Date: 10/31/2012 2:32:52 PM

Report Year:         2012         11295         Kaiser Foundation Hospital - Hayward		Hayward	Page:2 of 57
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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- 01320	Clinic	27400 Hesperian Boulevard	Rebuild	SPC5	01/01/2015	01/01/2015
BLD- 01321	Hospital	27400 Hesperian Boulevard	Rebuild	SPC5	01/01/2015	01/01/2015
BLD- 01322	Clinic Addition	27400 Hesperian Boulevard	Rebuild	SPC5	01/01/2015	01/01/2015

Report Year: 2012	11295 Kaiser Foundation Hospital - H	Hayward	Hayward	Page:3 of 57
projected construction	n is planned for rebuild, retrofit or replacements start date or dates and projected Completio ovals per Section 130061(c)(1)(E).			
Building No: BLD-01320	Clinic		Retrofit/Replacement Project:	Yes-Submitted
Facility Project Sub Number Number Num	Scope		oved Proj. Start Proj. Comp	
18186 IL080370-0 0	PPR HAYWARD REPLACEMENT 114-917- 03	2/27/2008 12:00:00 AM	07/14/2010 01/01/20	015 ACTI No
Building No: BLD-01321	Hospital		Retrofit/Replacement Project: oved Proj. Start Proj. Compl	Yes-Submitted
Number Number Num	Scope	in Date Fian Appr		
18186 IL080370-0 0	PPR HAYWARD REPLACEMENT 114-917- 03	2/27/2008 12:00:00 AM	07/14/2010 01/01/20	015 ACTI No
Building No: BLD-01322	Clinic Addition		Retrofit/Replacement Project:	Yes-Submitted
Facility Project Sub	Scope	Date Plan Appr in Dat		
Number Number Num				

11295

Provide the number of	r inpaient be	eds and patient days per type of service	e per building per Section 130	U01(C)(1)(F)
Building Number: BL	.D-01320	Building Name: Clin	nic	
Type of Service Prov	<u>vided</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	X 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	Outpatient Surgery
		Total Beds this <b>0</b> Building	Obstetrical     Cesarean/Deliv	Central Plant

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

Report	Year:	
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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: BLD-01321 Hospital **Building Name: Type of Service Provided** Х **Obstetrical** X 21576 Surgical 124 Nursing Inpatient Inpatient Recovery Beds Days Newborn/ X IntensiveCare Inpatient 16 Inpatient Days 1405 X Anesthesia WellBaby Beds **Clinical Lab** Emergency Inpatient Days 0 Pediatric/Adol Inpatient 0 escent Beds Nuclear Radiological/ Medicine Imaging Inpatient Days 0 Psychiatric Inpatient 0 Nursing Beds X Pharmaceutical Rehabilitation Inpatient Days 0 Inpatient Obstetrical 0 Dietetic Therapy Ante/Postprtum Beds **Renal Dialysis** Administration Intermediate Inpatient Days Inpatient 0 0 Care Beds X Support Outpatient X Services Surgery Skilled Nursing Inpatient 0 Inpatient Days 0 Beds X Obstetrical Total Beds this 140 Cesarean/Deliv Central Plant Building

Report Status: Data Last Update: 10/31/2012

Report	Year:	
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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: **BLD-01322 Clinic Addition Building Name: Type of Service Provided Obstetrical** Surgical 0 Nursing Inpatient 0 Inpatient Recovery Beds Days Newborn/ IntensiveCare Inpatient 0 **Inpatient Days** 0 Anesthesia WellBaby Beds **Clinical Lab** Emergency Х Inpatient Days lх 0 Pediatric/Adol Inpatient 0 escent Beds Nuclear Radiological/ Medicine Imaging Inpatient Days 0 Psychiatric Inpatient 0 Nursing Beds Pharmaceutical Rehabilitation Inpatient Days 0 Inpatient Obstetrical 0 Dietetic Therapy Ante/Postprtum Beds **Renal Dialysis** Administration Intermediate Inpatient Days Inpatient 0 0 Care Beds Outpatient Support Services Surgery Skilled Nursing Inpatient 0 Inpatient Days 0 Beds Obstetrical Total Beds this 0 Cesarean/Deliv Central Plant Building

Report Status: Data Last Update: 10/31/2012

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

Building Number:	BLD-01320	Building Name:	С		
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 Nursi			Skilled Nursing		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care New 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 / develop 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

Report Year:	20
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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-01321	Building Name: Ho	spital		
Medical / Surgical	(Include GYN)	Acute Respirator	y Care	Acute Psychiatric	
Inpatient 94 Bed	Inpatient 1639 Days 3	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 30 Bed	Inpatient 5183 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care No Nursery	ewborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 16 Bed	Inpatient 1405 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop 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	140	140

Report Year:	20
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Hayward

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

Building Number:	BLD-01322	Building Name:	Clinic Addition			
Medical / Surgical (Include GYN)		Acute Respiratory Care		Acute Psychiatric	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient C Bed	D Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Perinatal (excluse Newborn / GYN) Burn Skilled Nursing						
Inpatient 0 Bed	Inpatient 0 Days	Inpatient C Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	
Pediatric	iatric intensive Care Newborn Nursery		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 / develop 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	

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-01320		Rebuild		

BLD-01320	Clinic	Rebuild
BLD-01321	Hospital	Rebuild
BLD-01322	Clinic Addition	Rebuild
BLD-01323	Storeroom	Rebuild
BLD-01324	West Wing Addition	Rebuild
BLD-01325	Central Plant	Rebuild
BLD-01326	East Wing, Low Rise	Rebuild
BLD-01327	East Wing, Tower	Rebuild
BLD-01328	Lobby	Rebuild
BLD-01329	Hospital Addition	Rebuild
BLD-01330	Pharmacy Addition	Rebuild

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Report Year:	2012 11295 Kaiser Foundat	ion Hospital - Hayward	Hayward	Page:11 of 57
L	ist ALL proposed new buildings to be c	onstructd at this or another sit	e.	
Building Number	Building Name	New Site		
N_1	Hospital 2500 Merced Street	X		
=				
i				

Report Year:	2012 11295	Kaiser Foundation Hospital - Hayward	Hayward	Page:12 of 57
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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)

Building BLD-01320 Building Name: Clinic					
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?					
Radiological/Imaging Relocated to new building					
New Building RetroFitted Building	Other SPC2-SPC5 Building				
N_1-Hospital 2500 Merced Street					
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj. Completed				
Number Num	in Date Date Date				
	2008-02-27 07/14/2010 01/01/2015 ACTI				
Building BLD-01320 Building Name: Clinic					
Number:					
24.14.1.9	etrofittrd building?				
Number:	etrofittrd building?				
Number:         Will general acutr care services and beds will be relocated to a new, Existing or r	etrofittrd building? Other SPC2-SPC5 Building				
Number:         Will general acutr care services and beds will be relocated to a new, Existing or r         Administration         Relocated to new building					
Number:         Will general acutr care services and beds will be relocated to a new, Existing or r         Administration         Relocated to new building         New Building         N_1-Hospital 2500 Merced Street         Facility       Project         Sub       Scope         Status					
Number:       Vill general acutr care services and beds will be relocated to a new, Existing or r         Administration       Relocated to new building         New Building       RetroFitted Building         N_1-Hospital 2500 Merced Street         Facility       Project       Sub         Scope	Other SPC2-SPC5 Building				

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward Page:13 of 57					
Building BLD-01321 Building Name: Hospital						
Will general acutr care services and beds will be relocated to a new, Existing or r	etrofittrd building?					
Nursing N/A						
Building BLD-01321 Building Name: Hospital						
Will general acutr care services and beds will be relocated to a new, Existing or n	etrofittrd building?					
Intensive Care Relocated to new building						
New Building RetroFitted Building	Other SPC2-SPC5 Building					
N_1-Hospital 2500 Merced Street						
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj. Completed					
Number Num	in Date Date Date					
	2008-02-27 07/14/2010 01/01/2015 ACTI					

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward Page:14 of 57					
Building       BLD-01321       Building Name:       Hospital         Number:       Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?						
Surgical Relocated to new building						
New Building RetroFitted Building	Other SPC2-SPC5 Building					
N_1-Hospital 2500 Merced Street						
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj. Completed					
Number Num	in Date Date Date					
	2008-02-27 07/14/2010 01/01/2015 ACTI					
Building BLD-01321 Building Name: Hospital						
Will general acutr care services and beds will be relocated to a new, Existing or re	etrofittrd building?					
Anesthesia Relocated to new building						
New Building RetroFitted Building	Other SPC2-SPC5 Building					
N_1-Hospital 2500 Merced Street						
Facility Project Sub Scope Status <u>Number Num</u>	Date Plan Approved Proj. Start Proj. Completed					
	2008-02-27 07/14/2010 01/01/2015 ACTI					

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward	Page:15 of 57				
Building       BLD-01321       Building Name:       Hospital         Number:       Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?						
Pharmaceutical Relocated to new building						
New Building RetroFitted Building	Other SPC2-SPC5 Build	ling				
N_1-Hospital 2500 Merced Street						
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj. 0	Completed				
Number Num	in Date Date	Date				
	2008-02-27 07/14/2010	01/01/2015 ACTI				
Building BLD-01321 Building Name: Hospital						
Will general acutr care services and beds will be relocated to a new, Existing or re	etrofittrd building?					
Support Services Relocated to new building						
New Building RetroFitted Building	Other SPC2-SPC5 Build	ling				
N_1-Hospital 2500 Merced Street						
Facility Project Sub Scope Status <u>Number Num</u>	Date Plan Approved Proj. Start Proj. ( in Date Date	Completed				
	2008-02-27 07/14/2010	01/01/2015 ACTI				

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward Page:16 of 57					
Building Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?						
Obstetrical Cesarean/Deliv						
New Building RetroFitted Building	Other SPC2-SPC5 Building					
N_1-Hospital 2500 Merced Street						
Facility Project Sub Scope Status <u>Number Num</u>	Date Plan Approved Proj. Start Proj. Completed in Date Date Date					
18186 IL080370-0 0 PPR HAYWARD REPLACEMENT 114-917-03	2008-02-27 07/14/2010 01/01/2015 ACTI					
Building BLD-01321 Building Name: Hospital						
Will general acutr care services and beds will be relocated to a new, Existing or re	etrofittrd building?					
OutpatientSurgery Relocated to new building						
New Building RetroFitted Building	Other SPC2-SPC5 Building					
N_1-Hospital 2500 Merced Street						
Facility Project Sub Scope Status <u>Number Num</u>	Date Plan Approved Proj. Start Proj. Completed in Date Date Date					
	2008-02-27 07/14/2010 01/01/2015 ACTI					

Report Year:         2012         11295         Kaiser Foundation Hospital - Hayward	Hayward	Page:17 of 57
Building BLD-01321 Building Name: Hospital Number:		
Will general acutr care services and beds will be relocated to a new, Existing or re	trofittrd building?	
Medical/Surgical (Include GYN)		
Facility Project Sub Scope	Date Plan Approved Proj. S	Start Proj. Completed
Status <u>Number Num</u>	in Date Da	te Date
	2008-02-27 07	7/14/2010 01/01/2015 ACTI
Building BLD-01321 Building Name: Hospital		
Will general acutr care services and beds will be relocated to a new, Existing or re	trofittrd building?	
Perinatal (exclude Newborn / GYN))		
Facility Project Sub Scope	Date Plan Approved Proj. S	Start Proj. Completed
Status <u>Number Num</u>	in Date Da	te Date
	2008-02-27 07	7/14/2010 01/01/2015 ACTI
Building BLD-01321 Building Name: Hospital		
Will general acutr care services and beds will be relocated to a new, Existing or re	trofittrd building?	
Intensive Care Newborn Nursery		

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward	Page:18 of 57				
Building       BLD-01322       Building Name:       Clinic Addition         Number:       Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?						
ClinicalLab Relocated to new building						
New Building RetroFitted Building	Other SPC2-SPC5 Build	ing				
N_1-Hospital 2500 Merced Street						
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj. C	Completed				
Number Num	in Date Date	Date				
	2008-02-27 07/14/2010 (	01/01/2015 ACTI				
Building BLD-01322 Building Name: Clinic Addition						
Will general acutr care services and beds will be relocated to a new, Existing or r	etrofittrd building?					
Emergency Relocated to new building						
New Building RetroFitted Building	Other SPC2-SPC5 Build	ing				
N_1-Hospital 2500 Merced Street						
Facility Project Sub Scope Status <u>Number Num</u>	Date Plan Approved Proj. Start Proj. C in Date Date	Completed				
	2008-02-27 07/14/2010 (	01/01/2015 ACTI				

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward	Page:19 of 57
Building       BLD-01323       Building Name:       Storeroom         Number:       Will general acutr care services and beds will be relocated to a new, Existing or new	etrofittrd building?	
Support Services Relocated to new building		
New Building RetroFitted Building	Other SPC2-SPC5 Bu	<u>ilding</u>
N_1-Hospital 2500 Merced Street		
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj	. Completed
Number Num	in Date Date	Date
	2008-02-27 07/14/2010	01/01/2015 ACTI
Building BLD-01324 Building Name: West Wing Addition		
Will general acutr care services and beds will be relocated to a new, Existing or re	etrofittrd building?	
Intensive Care Relocated to new building		
New Building RetroFitted Building	Other SPC2-SPC5 Bu	ilding
N_1-Hospital 2500 Merced Street		
Facility Project Sub Scope Status <u>Number Num</u>	Date Plan Approved Proj. Start Proj in Date Date	. Completed
— 18186 IL080370-0 0 PPR HAYWARD REPLACEMENT 114-917-03	2008-02-27 07/14/2010	01/01/2015 ACTI

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward	Page:20 of 57				
Building BLD-01324 Building Name: West Wing Addition Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?						
Pediatric Adolescent Removed from hospital services						
Building BLD-01324 Building Name: West Wing Addition						
Will general acutr care services and beds will be relocated to a new, Existing or re	trofittrd building?					
Pediatric Removed from hospital services						
Building BLD-01324 Building Name: West Wing Addition						
Will general acutr care services and beds will be relocated to a new, Existing or re	trofittrd building?					
Intensive Care Relocated to new building						
New Building RetroFitted Building	Other SPC2-SPC5	Building				
N_1-Hospital 2500 Merced Street						
Facility Project Sub Scope	Date Plan Approved Proj. Start F	Proj. Completed				
Status Number Num	in Date Date	Date				
— 18186 IL080370-0 0 PPR HAYWARD REPLACEMENT 114-917-03	2008-02-27 07/14/201	0 01/01/2015 ACTI				

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward Page:21 of 57
Building BLD-01325 Building Name: Central Plant	
Will general acutr care services and beds will be relocated to a new, Existing or r	retrofittrd building?
CentralPlant Relocated to new building	
New Building RetroFitted Building	Other SPC2-SPC5 Building
N_1-Hospital 2500 Merced Street	
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj. Completed
Number Num	in Date Date Date
18186 IL080370-0 0 PPR HAYWARD REPLACEMENT 114-917-03	2008-02-27 07/14/2010 01/01/2015 ACTI
Building BLD-01326 Building Name: East Wing, Low Rise Number:	
Will general acutr care services and beds will be relocated to a new, Existing or r	retrofittrd building?
Rehabilitation Therapy	
New Building RetroFitted Building	Other SPC2-SPC5 Building
N_1-Hospital 2500 Merced Street	
Facility Project Sub Scope	Date Plan Approved Proj. Start Proj. Completed
Status Number Number Num	in Date Date Date
18186 IL080370-0 0 PPR HAYWARD REPLACEMENT 114-917-03	2008-02-27 07/14/2010 01/01/2015 ACTI

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward	Page:22 of 57
Building BLD-01327 Building Name: East Wing, Tower		
Will general acutr care services and beds will be relocated to a new, Existing or r	etrofittrd building?	
Nursing Relocated to new building		
New Building RetroFitted Building	Other SPC	2-SPC5 Building
N_1-Hospital 2500 Merced Street		
Facility Project Sub Scope Status		. Start Proj. Completed
Number Num	in Date I	Date Date
— 18186 IL080370-0 0 PPR HAYWARD REPLACEMENT 114-917-03 ————————————————————————————————————	2008-02-27	07/14/2010 01/01/2015 ACTI
Building BLD-01327 Building Name: East Wing, Tower Number:		
Will general acutr care services and beds will be relocated to a new, Existing or r	etrofittrd building?	
Obstetrical Ante Postprtum		
New Building RetroFitted Building	Other SPC	2-SPC5 Building
N_1-Hospital 2500 Merced Street		
Facility Project Sub Scope	Date Plan Approved Proj	. Start Proj. Completed
Status <u>Number Num</u>	in Date [	Date Date
18186 IL080370-0 0 PPR HAYWARD REPLACEMENT 114-917-03	2008-02-27	07/14/2010 01/01/2015 ACTI

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward	Page:23 of 57
Building       BLD-01327       Building Name:       East Wing, Tower         Number:       Will general acutr care services and beds will be relocated to a new, Existing or reduced to	etrofittrd building?	
Support Services Relocated to new building		
New Building RetroFitted Building	Other SPC2-SPC5 Bui	lding
N_1-Hospital 2500 Merced Street		
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj.	. Completed
Number Num	in Date Date	Date
	2008-02-27 07/14/2010	01/01/2015 ACTI
Building BLD-01327 Building Name: East Wing, Tower Number:		
Will general acutr care services and beds will be relocated to a new, Existing or re	etrofittrd building?	
Obstetrical Recovery Relocated to new building		
New Building RetroFitted Building	Other SPC2-SPC5 Bui	lding
N_1-Hospital 2500 Merced Street		
Facility Project Sub Scope Status <u>Number Num</u>	Date Plan Approved Proj. Start Proj. in Date Date	Completed
	2008-02-27 07/14/2010	01/01/2015 ACTI

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward		Page:24 of 57
Building BLD-01327 Building Name: East Wing, Tower			
Will general acutr care services and beds will be relocated to a new, Existing or r	etrofittrd building?		
Emergency Relocated to new building			
New Building RetroFitted Building	Othe	r SPC2-SPC5 Building	1
N_1-Hospital 2500 Merced Street		-	
Facility Project Sub Scope Status	Date Plan Approved	Proj. Start Proj. Con	npleted
Number Num	in Date	Date Da	ate
	2008-02-27	07/14/2010 01/0	01/2015 ACTI
Building BLD-01327 Building Name: East Wing, Tower Number:			
Will general acutr care services and beds will be relocated to a new, Existing or r	etrofittrd building?		
Medical/Surgical (Include GYN)			
New Building RetroFitted Building	Other	SPC2-SPC5 Building	<u> </u>
N_1-Hospital 2500 Merced Street			
Facility Project Sub Scope	Date Plan Approved	Proj. Start Proj. Com	npleted
Status <u>Number Num</u>	in Date	Date Da	ate
18186 IL080370-0 0 PPR HAYWARD REPLACEMENT 114-917-03	2008-02-27	07/14/2010 01/0	01/2015 ACTI

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Building BLD-01327 Building Name: East Wing, Tower					
Will general acutr care services and beds will be relocated to a new, Existing or r					
Perinatal (exclude     Relocated to new building       Newborn / GYN))					
New Building RetroFitted Building	Other SPC2-SPC5 Building	ļ			
N_1-Hospital 2500 Merced Street					
Facility Project Sub Scope Status <u>Number Num</u>	Date Plan Approved Proj. Start Proj. Completed in Date Date Date				
18186 IL080370-0 0 PPR HAYWARD REPLACEMENT 114-917-03	2008-02-27 07/14/2010 01/01/2015 ACTI				
Building BLD-01329 Building Name: Hospital Addition					
Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?					
Support Services Relocated to new building					
New Building RetroFitted Building	Other SPC2-SPC5 Building	ļ			
N_1-Hospital 2500 Merced Street					
Facility Project Sub Scope Status	Date Plan Approved Proj. Start Proj. Completed				
Number Number Num	in Date Date Date	ļ			
18186 IL080370-0 0 PPR HAYWARD REPLACEMENT 114-917-03	2008-02-27 07/14/2010 01/01/2015 ACTI				

Report Year:   2012   11295   Kaiser Foundation Hospital - Hayward	Hayward	Page:26 of 57				
Building BLD-01330 Building Name: Pharmacy Addition Number: Will general acutr care services and beds will be relocated to a new, Existing or retrofittrd building?						
Pharmaceutical Relocated to new building						
New Building RetroFitted Building	Other	SPC2-SPC5 Building				
N_1-Hospital 2500 Merced Street						
Facility Project Sub Scope Status	Date Plan Approved	Proj. Start Proj. Completed				
Number Num	in Date	Date Date				
—						
18186 IL080370-0 0 PPR HAYWARD REPLACEMENT 114-917-03	2008-02-27	07/14/2010 01/01/2015 ACTI				

Report Year:	2012
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Kaiser Foundation Hospital - Hayward

Hayward

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-01320 Building	Name: Clinic				
Type of Service Provided					
	Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
Nursing	Anesthesia				
IntensiveCare		Obstetrical Recovery		Renal Dialysis	
Pediatric/Adol	Clinical Lab	_		Outpatient	
escent	X Radiological/	Newborn/ WellBaby		Surgery	
Psychiatric Nursing	Imaging Pharmaceutical	Emergency		Central Plant	
	Filamaceutica			Central Flant	
Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine		Support Services	
Intermediate Care	X Administration				
Skilled Nursing	X Administration				

Report Status: Data Last Update: 10/31/2012

Report Year:	2012
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Kaiser Foundation Hospital - Hayward

Hayward

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-01321 Building	g Name: Hospital			
Type of Service Provided					
	Nursing	X Surgical	X Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare	X Anesthesia	Obstetrical		Renal Dialysis
X	Pediatric/Adol	Clinical Lab		_	Outpatient
	escent	Radiological/	Newborn/ WellBaby	x	Surgery
	Psychiatric Nursing	Imaging           X         Pharmaceutical	Emergency		Central Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	X	Support Services
	Intermediate Care	Administration			
	Skilled Nursing				

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-01322	Building Name: Clinic Addition										
Type of Service Provided          Surgical       Obstetrical       Rehabilitation         Cesarean/Deliv       Therapy											
Nursing	Anesthesia	_									
IntensiveCare		Obstetrical Recovery		Renal Dialysis							
Pediatric/Adol escent	X Clinical Lab	Newborn/ WellBaby		Outpatient Surgery							
Psychiatric Nursing	Imaging Pharmaceutical	X Emergency		Central Plant							
Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine		Support Services							
Intermediate Care	Administration										
Skilled Nursing											

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Building Number:	: BLD-01320	Building Nar	ne: Clinic			
Configuration:	Rebuild (Per SB90	) Definition fo	r Rebuild) with new SP	C5 and N	IPC4 or NPC5 building.	
Type of Servi	ce Provided					
1	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	ntensiveCare		Anesthesia		Obstetrical	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical		Pharmaceutical			
	Ante/Postprtum				Emergency	Central Plant
	ntermediate Care		Dietetic			
	Skilled Nursing	X	Administration		Nuclear Medicine	Support Services

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Building Number:	BLD-01321	Building Nar	me: Hospital							
-										
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.										
Type of Service Provided										
XN	lursing	X	Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
X In	ntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab		Recovery					
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery			
Πo	Obstetrical	X	Pharmaceutical							
L A	nte/Postprtum				Emergency		Central Plant			
	ntermediate		Dietetic	_		_				
C	care				Nuclear Medicine	Х	Support Services			
s	killed Nursing		Administration				001110000			

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Building Number:	BLD-01322	Building Nar	ne: Clinic Addition						
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Service Provided									
N	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
lr Ir	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis		
	ediatric/Adol scent	X	Clinical Lab		Recovery				
P N	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical		Pharmaceutical						
	nte/Postprtum			X	Emergency		Central Plant		
lr	ntermediate		Dietetic						
C	care				Nuclear Medicine		Support Services		
s	killed Nursing		Administration						

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Building Number:	BLD-01323	Building Nar	ne: Storeroom						
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Service Provided									
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
ln	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recovery				
Ps Ni	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	bstetrical		Pharmaceutical						
	nte/Postprtum				Emergency		Central Plant		
	termediate		Dietetic	_		_			
Ca	are				Nuclear Medicine	X	Support Services		
SI SI	killed Nursing		Administration						

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Building Numbe	r: BLD-01324	Building Na	me: West Wing Additio	n					
Building Number	1. BLD-01324	Dulluling Na	me. West Wing Additio	11					
Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.									
Type of Serv	ice Provided								
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
X	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis		
	Pediatric/Adol escent		Clinical Lab		Recovery				
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	Obstetrical		Pharmaceutical						
	Ante/Postprtum				Emergency		Central Plant		
	Intermediate		Dietetic						
	Care				Nuclear Medicine		Support Services		
	Skilled Nursing		Administration				00111000		

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Building Number:	BLD-01325	Building Nar	me: Central Plant				
Configuration:	Rebuild (Per SB90	Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.					
Type of Service Provided							
N	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
In In	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
P N	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	·			
					Emergency	Х	Central Plant
	Intermediate Care		Dietetic				
с					Nuclear Medicine		Support Services
s 🗌	killed Nursing		Administration				

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Building Numbe	er: BLD-01326	Building Na	me: East Wing, Low R	ise			
Configuration:	Rebuild (Per SB90	) Definition fo	or Rebuild) with new SPC5 and NPC4 or NPC5 building.				
Type of Service Provided							
	Nursing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical		Pharmaceutical				
	Ante/Postprtum				Emergency		Central Plant
	Intermediate		Dietetic				
	Care				Nuclear Medicine		Support Services
	Skilled Nursing		Administration				

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Building Number: BLD-01327		27 Building Name: East Wing, Tower							
Configuration:	Rebuild (Per SB90	) Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.							
Type of Servic	ce Provided								
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	ntensiveCare		Anesthesia	x	Obstetrical		Renal Dialysis		
	Pediatric/Adol escent		Clinical Lab		Recovery				
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
X Q	Obstetrical		Pharmaceutical						
	Ante/Postprtum			X	Emergency		Central Plant		
	ntermediate		Dietetic						
	Care				Nuclear Medicine	Х	Support Services		
	Skilled Nursing		Administration				00111063		

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Building Number: BLD-01328		Building Nar	me: Lobby					
Configuration:	Rebuild (Per SB90	) Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.						
Type of Servi	ce 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		Pharmaceutical					
	Ante/Postprtum				Emergency		Central Plant	
	Intermediate		Dietetic					
	Care				Nuclear Medicine		Support Services	
	Skilled Nursing		Administration					

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Building Number: BLD-01329		Building Name: Hospital Addition						
Configuration:	Rebuild (Per SB90	Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.						
Type of Servic	e Provided							
<b>N</b>	lursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
ln In	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis	
	ediatric/Adol scent		Clinical Lab		Recovery			
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	obstetrical	Pharmaceutical						
	nte/Postprtum				Emergency		Central Plant	
	ntermediate		Dietetic					
	are				Nuclear Medicine	Х	Support Services	
s	killed Nursing		Administration					

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Building Number	r: BLD-01330	Building Nar	me: Pharmacy Addition			
Configuration:	Rebuild (Per SB90	Definition fo	r Rebuild) with new SPC	5 and N	IPC4 or NPC5 building.	
Type of Serv	ice Provided					
	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical	x	Pharmaceutical			
	Ante/Postprtum				Emergency	Central Plant
	Intermediate Care		Dietetic			
	Cale				Nuclear Medicine	Support Services
	Skilled Nursing		Administration			

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Kaiser Foundation Hospital - Hayward

ayward Hayward

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)

Buildi	ng Number: BLI	D-01323	Building N	Name: Sto	preroom		
Туре	e of Service Prov	ided					
	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
П	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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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)

Buildi	ng Number: BLC	0-01324	Building Na	me: We	st Wing Addition		
Туре	e of Service Prov	ided					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
Х	IntensiveCare	Inpatient Beds	16		Anesthesia		
×	Pediatric/Adol escent	Inpatient Beds	20		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		36				

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Kaiser Foundation Hospital - Hayward

ayward Hayward

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)

Buildi	ng Number: BLI	D-01325	Building I	Name: Ce	ntral Plant			
Туре	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		Pharmaceutical	Emergency	X Central Plant	
П	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration			
	Total Beds this Building		0					

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Kaiser Foundation Hospital - Hayward

vard Hayward

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)

Buildi	ng Number: BLI	D-01326	Building I	Name: Ea	st Wing, Low Rise			
Туре	Type of Service Provided							
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	X 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		Administration			
	Total Beds this Building		0					

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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)

Buildi	ng Number: BLC	0-01327	Building N	lame: Eas	st Wing, Tower				
Туре	Type of Service Provided								
Х	Nursing	Inpatient Beds	34		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
	IntensiveCare	Inpatient Beds	0		Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X Obstetrical Recovery	Renal Dialysis		
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
X	Obstetrical Ante/Postprtum	Inpatient Beds	3		Pharmaceutical	X Emergency	Central Plant		
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Support Services		
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		37						

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Kaiser Foundation Hospital - Hayward

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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)

Buildi	ng Number: BLI	0-01328	Building I	Name: Lo	bby			
Туре	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		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					

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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)

Buildi	ng Number: BLI	D-01329	Building I	Name: Ho	spital Addition			
Туре	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		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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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:	BLD-01330	Building N	lame: Pl	narmacy Addition		
Type of Service	Provided					
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
IntensiveCa	are Inpatient Beds	0		Anesthesia		
Pediatric/Ad escent	dol Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postpi	Inpatient tum Beds	0	X	Pharmaceutical	Emergency	Central Plant
Intermediat	e Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services
Skilled Nurs	sing Inpatient Beds	0		Administration		
Total Beds Building	this	0				

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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:	BLD-01323	Building Name:	Storeroom		
Medical / Surgical (	Include GYN)	Acute Respi	iratory Care	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	
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	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	) Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitatio Center	on	Int. Care / developr Disabled	nent
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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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:	BLD-01324	Building Na	ame: Wes	t Wing Addition		
Medical / Surgical (	Include GYN)	Acu	Acute Respiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpa Bed	tient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Bur	n		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpa Bed	tient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		inte Nur:	nsive Care Nev sery	wborn	Intermediate Card	
Inpatient 20 Bed	Inpatient Days	1929 Inpa Bed	tient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Reh Cen	abilitation ter		Int. Care / develop Disabled	ment
Inpatient 16 Bed	Inpatient Days	4197 Inpa Bed	tient 0	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care			mical endency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0 Inpa Bed	tient 0	Inpatient 0 Days	36	36

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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:	BLD-01325	Buildir	ng Name: Cent	ral Plant		
Medical / Surgical (	Include GYN)		Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	Newborn / GYN)		Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric			intensive Care Nev Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care			Rehabilitation Center		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient Days	0	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 Days	0	Inpatient 0 Bed	Inpatient 0 Days	0	0

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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:	BLD-01326 B	uilding Name: East Wing, Low Rise	
Medical / Surgical (I	nclude GYN)	Acute Respiratory Care	Acute Psychiatric
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Perinatal (excluse N	lewborn / GYN)	Burn	Skilled Nursing
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days
Pediatric		intensive Care Newborn Nursery	Intermediate Card
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed 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 Bed Days
Coronary Care		Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding PerUnitService
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpatient 0 Bed Days	1 <u> </u>

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Kaiser Foundation Hospital - Hayward

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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:	BLD-01327	Building Name: East	t Wing, Tower		
Medical / Surgical (	nclude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 34 Bed	Inpatient 696 Days	65 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 3 Bed	Inpatient 51 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Ne Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment
Inpatient 0 Bed	Inpatient Days	0 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 Days	0 Inpatient 0 Bed	Inpatient 0 Days	37	37

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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:	BLD-01328	Building Name:	Lobby			
Medical / Surgical (	Include GYN)	Acute Re	espiratory Care		Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse I	Newborn / GYN)	Burn		S	Skilled Nursing	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	-	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Nursery	e Care Newborn	I	Intermediate Card	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilit Center	ation		Int. Care / developm Disabled	nent
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		npatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemica Depende		I	Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0	0	0

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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:	BLD-01329	Building Name:	Hospital Addition		
Medical / Surgical (	Include GYN)	Acute Respi	ratory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	Newborn / GYN)	Burn		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	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitatio Center	on	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	1	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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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:	BLD-01330	Buildi	ing Name:	Phar	macy Addition				
Medical / Surgical (	Include GYN)		Acute Respir	atory	Care	Αςι	ite Psychiatric		
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0	Inpatient 0 Days	Inpa Bec	atient 0	Inpatient Days	0
Perinatal (excluse N	Newborn / GYN)		Burn			Ski	lled Nursing		
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0	Inpatient 0 Days	Inpa Bec	atient 0	Inpatient Days	0
Pediatric			intensive Car Nursery	re Nev	vborn	Inte	ermediate Card		
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0	Inpatient 0 Days	Inpa Bec	atient 0	Inpatient Days	0
Intensive Care			Rehabilitation Center	n			Care / develop abled	ment	
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0	Inpatient 0 Days	Inpa Bec	atient 0	Inpatient Days	0
Coronary Care			Chemical Dependency				al Beds this Iding Per t	Total Be Building Service	
Inpatient 0 Bed	Inpatient Days	0	Inpatient Bed	0	Inpatient 0 Days		0		0

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