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

Facility Number:	11547	
Facility Name:	Kindred Hospital South Bay	
Address:	1246 W. 155th St.	
City:	Gardena	
Hospital Owner/Lice	ensee: KND Development 53, LLC	
Year of Rep	orting: 2012	
Contact 1 e-mail Ac	dress:	
Contact 2 e-mail Ac	dress:	
Contact 3 e-mail Ad	dress::	
Name of Sub	mitter: Kevin Chavez	
Submission	Date: 10/30/2012 4:23:58 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- 00658	Original Building	1246 W. 155th St.	Retrofit	SPC2	01/01/2015	12/01/2014

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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-006	Building Name	e: Original Building	
Type of Service Provided			-
X Nursing Inpat Beds	ent 39 Inpatient Days	13482 X Surgical	Obstetrical Recovery
X IntensiveCare Inpat Beds	ent 4 Inpatient Days	1434 X Anesthesia	Newborn/ WellBaby
Pediatric/Adol Inpat escent Beds	ent 0 Inpatient Days	0 Clinical Lab	Emergency
Psychiatric Inpat Nursing Beds	ent 0 Inpatient Days	Radiological/ Imaging	Nuclear Medicine
Obstetrical Inpat Ante/Postprtum Beds	ent 0 Inpatient Days	N Pharmaceutical X Dietetic	Rehabilitation Therapy
Intermediate Inpat Care Beds	ent 0 Inpatient Days	0 Administration	X Renal Dialysis
Skilled Nursing Inpat	ent 0 Inpatient Days	Support Services Obstetrical	X Outpatient Surgery
	Total Beds this Building	43 Cesarean/Deliv	X 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-00658	Building Name:	Original Building		
Medical / Surgical (I	Include GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 39 Bed	Inpatient 1348 Days 2	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse N	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	e Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	ent
	Inpatient 1434 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	43	43

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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-00658	Original Building	Retrofit
BLD-00659	South Addition	Remain
BLD-00660	North Addition	Remain
BLD-00661	Laboratory Addition	Remain

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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-00658 Building	g Name: Original E	Building							
Type of Service Provided										
		X Surgio	cal	Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
X	Nursing	X Anest	hesia							
X	IntensiveCare			Obstetrical Recovery	X	Renal Dialysis				
	Pediatric/Adol	Clinic	al Lab	·	Х	Outpatient				
	escent		logical/	Newborn/ WellBaby		Surgery				
	Psychiatric Nursing	Imagi X Pharr	naceutical	Emergency	abla	Central Plant				
	Obstetrical	A Fliair			X	Gentral Flant				
	Ante/Postprtum	X Dieter	tic	Nuclear Medicine		Support Services				
	Intermediate Care	Admii	nistration							
	Skilled Nursing									

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number	ding Number: BLD-00658 Building Name: Original Building								
Configuration:	Retrofit Non-Confo	orming buildi	ng to SPC 2 and NI	PC 3 and rem	ove from service by 203	30			
Type of Servi	ice Provided								
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
X	IntensiveCare	X	Anesthesia		Obstetrical	X	Renal Dialysis		
	Pediatric/Adol escent		Clinical Lab		Recovery				
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	X	Outpatient Surgery		
	Obstetrical Ante/Postprtum	Х	Pharmaceutical		Emergency	X	Central Plant		
	Intermediate Care	X	Dietetic						
	Skilled Nursing		Administration	Ц	Nuclear Medicine		Support Services		

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number	: BLD-00659	Building Na	1				
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Servi	ce Provided						
X I	Nursing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical	X	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 Care		Dietetic				
	Skilled Nursing		Administration		Nuclear Medicine		Support Services

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number	r: BLD-00660	Building Na	me: North Addition	l			
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
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	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	П	Emergency	П	Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing		Administration	X	Nuclear Medicine		Support Services

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number: BLD-00661 Building Name: Laboratory Addition							
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Serv	ice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent	X	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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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:	LD-00659	Building I	Name: South Addition					
Type of Service Provided								
X Nursing	Inpatient Beds	11	Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy			
IntensiveCare	Inpatient Beds	0	Anesthesia					
Pediatric/Adol escent	Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	X Renal Dialysis			
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postprtun	Inpatient n Beds	0	Pharmaceutica	Emergency	Central Plant			
Intermediate Care	Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services			
Skilled Nursing	I Inpatient Beds	0	Administration					
Total Beds this Building	;	11						

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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: BL	D-00660	Building N	Name: No	rth Addition		
Type of Service Prov	<u>/ided</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	X	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Central Plant
Intermediate Care	Inpatient Beds	0		Dietetic	X 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)

Buildir	Building Number: BLD-00661 Building Name: Laboratory Addition									
<u>Type</u>	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	X	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							

Report Status: Data Last Update: 10/30/2012 Submission Date: 10/30/2012 Print Date: 11/5/2012 1:25 PM

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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-00659	Building Name:	South Addition				
Medical / Surgical (I	nclude GYN)	Acute Res	piratory Care		Acute Psychiatric		
Inpatient 11 Bed	Inpatient Days	3467 Inpatient Bed	0 Inpatient 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 Days	· • • •	Inpatient 0	Inpatient 0 Days	
Pediatric		intensive (Nursery	Care Newborn		Intermediate Card		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	
Intensive Care		Rehabilita Center	tion		Int. Care / developr Disabled	nent	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days		Inpatient 0 Bed	Inpatient 0 Days	
Coronary Care		Chemical Dependen	су		Total Beds this Building Per Unit	Total Beds this Building Per Service	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient Days	0	11	11	

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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-00660	Building Name:	North Addition				
Medical / Surgical (I	nclude GYN)	Acute Resp	iratory Care	Acute Psychiatric	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse N	ewborn / GYN)	Burn		Skilled Nursing			
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0	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 / develop	ment		
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0	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	¬	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-00661	Building Name: Labo	oratory Addition				
Medical / Surgical (I	nclude GYN)	Acute Respiratory	Care	Acute Psychiatric	Acute Psychiatric		
Inpatient 0 Bed	Inpatient Days	0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0	Inpatient 0 Days		
Perinatal (excluse N	lewborn / 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 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	nent		
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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