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

Facility Number:	11847
Facility Name:	Mission Community Hospital - Panorama Campus
Address:	14850 Roscoe Blvd.
City:	Panorama City
Hospital Owner/Lice	ensee: San Fernando Community Hospital
Year of Rep	porting: 2013
Contact 1 e-mail Ad	ldress:
Contact 2 e-mail Ad	ldress:
Contact 3 e-mail Add	dress::
Name of Sub	mitter: Rick York
Submission	Date: 12/18/2013 8:02:15 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- 00352	Building A - Tower	14850 Roscoe Blvd.	Retrofit	SPC2	01/01/2015	01/01/2015

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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-00352	Building A - Tower		Retrofit/Re Project:	eplacement	Yes	s-Submitted	d
Facility Pro	oject Sub nber Num	Scope	Date Plan <i>i</i> in		ij. Start Proj. Date	. Completed Date	Status	CEQA Review
11847 P-2 022	012- 69	0 VSI for SPC-2 Reclassification of Buildin A/1 (00352) Using HAZUS 2010	ng 10/24/2012 12:00:00 AM	4/11/2013 0 12:00:00 AM	07/01/2013 1	2/01/2014	OPEN	No

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

Building Number: BL	.D-00352		Building Name:		Build	ding A - Tower		
Type of Service Prov	<u>rided</u>							
X Nursing	Inpatient Beds	25	Inpatient 13	329		Surgical		Obstetrical Recovery
IntensiveCare	Inpatient Beds	0	Inpatient Days	0		Anesthesia		Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0	Inpatient Days	0		Clinical Lab		Emergency
Psychiatric Nursing	Inpatient Beds	0	Inpatient Days	0		Radiological/ Imaging  Pharmaceutical		Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0	Inpatient Days	0		Dietetic		Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0	Inpatient Days	0		Administration		Renal Dialysis
Skilled Nursing	Inpatient Beds	0	Inpatient Days	0		Support Services  Obstetrical	Ц	Outpatient Surgery
		Total E Buildir	Beds this g	25		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)

Medical / Surgical (Include GYN)       Acute Respiratory Care       Acute Psychiatric         Inpatient 25 Bed       Inpatient 1329 Days       Inpatient 0 Inpatient 0 Days       Inpati	Building Number:	BLD-00352	Building Name:	Building A - Tower		
Perinatal (excluse Newborn / GYN)   Burn   Skilled Nursing	Medical / Surgical (	(Include GYN)	Acute Respir	atory Care	Acute Psychiatric	
Inpatient 0 Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Inpati						
Bed       Days       Bed       Days         Pediatric       intensive Care Newborn Nursery       Intermediate Card         Inpatient       0       25       25         Inpatient       0       Inpatient       0       Inpatient       0       Inpatient       0       25       25	Perinatal (excluse l	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient   0   Inpatient			•		• • • • • • • • • • • • • • • • • • • •	
Intensive Care   Rehabilitation   Center   Inpatient   O   Inpatient   O   Days   Days   Bed   Days   Days   Days   Int. Care / development   O   Inpatient   O   Inpatient   O   Inpatient   O   Days   O   O   O   O   O   O   O   O   O	Pediatric			e Newborn	Intermediate Card	
Center   Disabled	· · · · · · · · · · · · · · · · · · ·					
Bed Days  Bed Days  Bed Days  Chemical Dependency  Chemical Dependency  Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 Inpatient 0 25 25	Intensive Care			1	<u>-</u>	ent
Dependency  Building Per Unit  Building Per Service  Inpatient 0 Inpatient 0 Inpatient 0 25 25						
	Coronary Care				<b>Building Per</b>	<b>Building Per</b>
					25	

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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-00352	Building A - Tower	Retrofit
BLD-00354	Building C - Emergency Department B	Remain
BLD-03891	Building D - South Tower	Remain

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port Year: 20	Missio Camp	on Community Hospital - Panorama	Panorama City	Page:11 of 18
Report any general SPC-1 per Section	eral acute care hospita ion 130061(c)(4)	I inpatient service that is provided	I in any genaral acute care h	nospital building that is rate
Building Number	: BLD-00352 Build	ling Name: Building A - Tower		
Type of Serv	rice Provided			
		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	Nursing	Anesthesia		
	IntensiveCare	_	Obstetrical Recovery	Renal Dialysis
Г	Pediatric/Adol escent	Clinical Lab		Outpatient Surgery
_	_	Radiological/ Imaging	Newborn/ WellBaby	Surgery
L	Psychiatric Nursing	Pharmaceutical	Emergency	Central Plant
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Services
	Intermediate Care	Administration		
Г	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	r: BLD-00352	Building Na	me: Building A - To	wer		
Configuration:	Rebuild (Per SB90	Definition fo	or Rebuild) with new	SPC5 and N	IPC4 or NPC5 building.	
Type of Servi	ice Provided					
X	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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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-00354 Building Name: Building C - Emergency Department B									
Configuration:	Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.								
Type of Service	e Provided								
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
In	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
	ediatric/Adol scent		Clinical Lab		Recovery				
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	bstetrical nte/Postprtum		Pharmaceutical	X	Emergency		Central Plant		
	itermediate		Dietetic		Emergency		Ochtiai Flant		
	are killed 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 Numbe	er: BLD-03891	Building Na	me: Building D - S	South Tower			
Configuration:	N/A						
Type of Serv	vice Provided						
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare	X	Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
X	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical		Emergency	X	Central Plant
	Intermediate Care	X	Dietetic				
	Skilled Nursing	X	Administration		Nuclear Medicine	X	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: BLD-00354 Building Name: Building C - Emergency Department B							
Type of Service Prov	<u>vided</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	Pharmaceutica	X 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: BLD	D-03891	Building I	Name: Bu	Building D - South Tower				
Type of Service Provided									
X	Nursing	Inpatient Beds	50	X	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy		
X	IntensiveCare	Inpatient Beds	10	X	Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis		
X	Psychiatric Nursing	Inpatient Beds	60		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery		
	Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical	Emergency	X Central Plant		
	Intermediate Care	Inpatient Beds	0	X	Dietetic	Nuclear Medicine	X Support Services		
	Skilled Nursing	Inpatient Beds	0	X	Administration				
	Total Beds this Building		120						

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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-00354	Building Name:	Building C - Emergency Dep	partment B	
Medical / Surgical (I	nclude GYN)	Acute Respira	tory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (Exclude 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 Care Nursery	Newborn	Intermediate Care	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled	
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dep	endency	Total Beds this Building Per	Total Beds this Building Per
Inpatient 0 Bed	Inpatient Days	0 Inpatient Bed	0 Inpatient 0 Days	Unit 0	Service 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-03891 <b>Buil</b>	ding Name: Building D	- South Tower		
Medical / Surgical (I	nclude GYN)	Acute Respiratory Care		Acute Psychiatric	
Inpatient 50 Bed	Inpatient 12831 Days	Inpatient 0 Inpat Bed Days		Inpatient 60	Inpatient 19868 Days
Perinatal (Exclude N	lewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpat Bed Days		Inpatient 0	Inpatient 0 Days
Pediatric		Intensive Care Newborn Nursery		Intermediate Care	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inpat Bed Days		Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / Developmentally Disabled	
Inpatient 5 Bed	Inpatient 2127 Days	Inpatient 0 Inpat Bed Days		Inpatient 0 Bed	Inpatient 0 Days
<b>Coronary Care</b>		<b>Chemical Dependency</b>		Total Beds this Building Per	Total Beds this Building Per
Inpatient 5 Bed	Inpatient 0 Days	Inpatient 0 Inpat Bed Days		Unit 120	Service 120