## 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/Licensee: San Fernando Community Hospital

Year of Reporting: 2013

Contact 1 e-mail Address: 

Contact 2 e-mail Address: 

Contact 3 e-mail Address:: 

Name of Submitter: Rick York

Submission Date: 12/18/2013 8:02:15 PM

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 |

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/Replacement Project: Yes-Submitted

| Facility Number | Project Number | Sub Num | Scope | Date in | Plan Approved Date | Proj. Start Date | Proj. Completed Date | Status | CEQA Review |
|---|---|---|---|---|---|---|---|---|---|
| 11847 | P-2012-02269 | 0 | VSI for SPC-2 Reclassification of Building A/1 (00352) Using HAZUS 2010 | 10/24/2012 12:00:00 AM | 4/11/2013 12:00:00 AM | 07/01/2013 | 12/01/2014 | OPEN | No |

Report Status:  **Data Last Update:** 12/18/2013    **Submission Date:** 12/18/2013    **Print Date:** 12/20/2013 1:50 PM

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

Building Number: **BLD-00352**     Building Name: **Building A - Tower**

**Type of Service Provided**

| | | | | | |
|---|---|---|---|---|---|
| [X] Nursing | Inpatient Beds | 25 | Inpatient Days | 1329 | |
| [ ] IntensiveCare | Inpatient Beds | 0 | Inpatient Days | 0 | |
| [ ] Pediatric/Adolescent | Inpatient Beds | 0 | Inpatient Days | 0 | |
| [ ] Psychiatric Nursing | Inpatient Beds | 0 | Inpatient Days | 0 | |
| [ ] Obstetrical Ante/Postprtum | Inpatient Beds | 0 | Inpatient Days | 0 | |
| [ ] Intermediate Care | Inpatient Beds | 0 | Inpatient Days | 0 | |
| [ ] Skilled Nursing | Inpatient Beds | 0 | Inpatient Days | 0 | |

Total Beds this Building     **25**

[ ] Surgical

[ ] Anesthesia

[ ] Clinical Lab

[ ] Radiological/Imaging

[ ] Pharmaceutical

[ ] Dietetic

[ ] Administration

[ ] Support Services

[ ] Obstetrical Cesarean/Deliv

[ ] Obstetrical Recovery

[ ] Newborn/WellBaby

[ ] Emergency

[ ] Nuclear Medicine

[ ] Rehabilitation Therapy

[ ] Renal Dialysis

[ ] Outpatient Surgery

[ ] Central Plant

**Report Status:** **Data Last Update:** 12/18/2013     **Submission Date:** 12/18/2013     **Print Date:** 12/20/2013 1:50 PM

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

**Building Number:** BLD-00352    **Building Name:** Building A - Tower

**Medical / Surgical (Include GYN)**

Inpatient Bed: 25    Inpatient Days: 1329

**Acute Respiratory Care**

Inpatient Bed: 0    Inpatient Days: 0

**Acute Psychiatric**

Inpatient Bed: 0    Inpatient Days: 0

**Perinatal (exclude Newborn / GYN)**

Inpatient Bed: 0    Inpatient Days: 0

**Burn**

Inpatient Bed: 0    Inpatient Days: 0

**Skilled Nursing**

Inpatient Bed: 0    Inpatient Days: 0

**Pediatric**

Inpatient Bed: 0    Inpatient Days: 0

**intensive Care Newborn Nursery**

Inpatient Bed: 0    Inpatient Days: 0

**Intermediate Card**

Inpatient Bed: 0    Inpatient Days: 0

**Intensive Care**

Inpatient Bed: 0    Inpatient Days: 0

**Rehabilitation Center**

Inpatient Bed: 0    Inpatient Days: 0

**Int. Care / development Disabled**

Inpatient Bed: 0    Inpatient Days: 0

**Coronary Care**

Inpatient Bed: 0    Inpatient Days: 0

**Chemical Dependency**

Inpatient Bed: 0    Inpatient Days: 0

**Total Beds this Building Per Unit**

25

**Total Beds this Building Per Service**

25

**Report Status:**    **Data Last Update:** 12/18/2013    **Submission Date:** 12/18/2013    **Print Date:** 12/20/2013 1:50 PM

**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 |

**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-00352　Building Name: Building A - Tower

**Type of Service Provided**

[X] Nursing

[ ] IntensiveCare

[ ] Pediatric/Adolescent

[ ] Psychiatric Nursing

[ ] Obstetrical Ante/Postprtum

[ ] Intermediate Care

[ ] Skilled Nursing

[ ] Surgical

[ ] Anesthesia

[ ] Clinical Lab

[ ] Radiological/Imaging

[ ] Pharmaceutical

[ ] Dietetic

[ ] Administration

[ ] Obstetrical Cesarean/Deliv

[ ] Obstetrical Recovery

[ ] Newborn/WellBaby

[ ] Emergency

[ ] Nuclear Medicine

[ ] Rehabilitation Therapy

[ ] Renal Dialysis

[ ] Outpatient Surgery

[ ] Central Plant

[ ] Support Services

Report Status:　**Data Last Update:** 12/18/2013　**Submission Date:** 12/18/2013　**Print Date:** 12/20/2013 1:50 PM

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

Building Number: BLD-00352    Building Name: Building A - Tower

Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.

**Type of Service Provided**

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

Report Status:    **Data Last Update:** 12/18/2013    **Submission Date:** 12/18/2013    **Print Date:** 12/20/2013 1:50 PM

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

Building Number: BLD-00354    Building Name: Building C - Emergency Department B

Configuration: Rebuild (Per SB90 Definition for Rebuild) with new SPC5 and NPC4 or NPC5 building.

**Type of Service Provided**

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

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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-03891   Building Name: Building D - South Tower

Configuration: N/A

**Type of Service Provided**

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

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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 Provided

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

Total Beds this Building    0

☐ Surgical

☐ Anesthesia

☐ Clinical Lab

☐ Radiological/Imaging

☐ Pharmaceutical

☐ Dietetic

☐ Administration

☐ Obstetrical Cesarean/Deliv

☐ Obstetrical Recovery

☐ Newborn/WellBaby

☒ Emergency

☐ Nuclear Medicine

☐ Rehabilitation Therapy

☐ Renal Dialysis

☐ Outpatient Surgery

☐ Central Plant

☐ Support Services

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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-03891**     Building Name: **Building D - South Tower**

## Type of Service Provided

| | | | |
|---|---|---|---|
| [X] Nursing | Inpatient Beds | 50 | |
| [X] IntensiveCare | Inpatient Beds | 10 | |
| [ ] Pediatric/Adolescent | Inpatient Beds | 0 | |
| [X] Psychiatric Nursing | Inpatient Beds | 60 | |
| [ ] Obstetrical Ante/Postprtum | Inpatient Beds | 0 | |
| [ ] Intermediate Care | Inpatient Beds | 0 | |
| [ ] Skilled Nursing | Inpatient Beds | 0 | |

[X] Surgical

[X] Anesthesia

[ ] Clinical Lab

[ ] Radiological/Imaging

[X] Pharmaceutical

[X] Dietetic

[X] Administration

[ ] Obstetrical Cesarean/Deliv

[ ] Obstetrical Recovery

[ ] Newborn/WellBaby

[ ] Emergency

[ ] Nuclear Medicine

[ ] Rehabilitation Therapy

[ ] Renal Dialysis

[ ] Outpatient Surgery

[X] Central Plant

[X] Support Services

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 Department B

**Medical / Surgical (Include GYN)**

Inpatient Bed: 0   Inpatient Days: 0

**Acute Respiratory Care**

Inpatient Bed: 0   Inpatient Days: 0

**Acute Psychiatric**

Inpatient Bed: 0   Inpatient Days: 0

**Perinatal (Exclude Newborn / GYN)**

Inpatient Bed: 0   Inpatient Days: 0

**Burn**

Inpatient Bed: 0   Inpatient Days: 0

**Skilled Nursing**

Inpatient Bed: 0   Inpatient Days: 0

**Pediatric**

Inpatient Bed: 0   Inpatient Days: 0

**Intensive Care Newborn Nursery**

Inpatient Bed: 0   Inpatient Days: 0

**Intermediate Care**

Inpatient Bed: 0   Inpatient Days: 0

**Intensive Care**

Inpatient Bed: 0   Inpatient Days: 0

**Rehabilitation Center**

Inpatient Bed: 0   Inpatient Days: 0

**Int. Care / Developmentally Disabled**

Inpatient Bed: 0   Inpatient Days: 0

**Coronary Care**

Inpatient Bed: 0   Inpatient Days: 0

**Chemical Dependency**

Inpatient Bed: 0   Inpatient Days: 0

**Total Beds this Building Per Unit**

0

**Total Beds this Building Per Service**

0

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**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)**

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**Building Number:** BLD-03891    **Building Name:** Building D - South Tower

**Medical / Surgical (Include GYN)**

| Inpatient Bed | 50 | Inpatient Days | 12831 |

**Acute Respiratory Care**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Acute Psychiatric**

| Inpatient Bed | 60 | Inpatient Days | 19868 |

**Perinatal (Exclude Newborn / GYN)**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Burn**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Skilled Nursing**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Pediatric**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Intensive Care Newborn Nursery**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Intermediate Care**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Intensive Care**

| Inpatient Bed | 5 | Inpatient Days | 2127 |

**Rehabilitation Center**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Int. Care / Developmentally Disabled**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Coronary Care**

| Inpatient Bed | 5 | Inpatient Days | 0 |

**Chemical Dependency**

| Inpatient Bed | 0 | Inpatient Days | 0 |

**Total Beds this Building Per Unit**

| 120 |

**Total Beds this Building Per Service**

| 120 |

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