Office of Statewide Health Planning and Development Facilities Development Division

Senate Bill 499 (SB 499) Hospital Report

As submitted to California's Office of Statewide Health Planning and Development in accordance with Senate Bill 499 (SB 499) requirement for all general acute care hospitals with Structural Performance Category 1 (SPC-1) buildings to report annually with seismic safety compliance status, beds and services.

Provide the Hospital	I Owner and Year of Report per Section 130061(e)
Facility Number:	10208
Facility Name:	Kern Medical Center
Address:	1700 Mt. Vernon Avenue
City:	Bakersfield
Hospital Owner/Lic	censee: Kern County
Year of Rep	eporting: 2014
Contact 1 e-mail Ad	address:
Contact 2 e-mail A	address:
Contact 3 e-mail Ad	ddress::
Name of Sub	bmitter: Kern Medical Center
Submission	on Date: 12/19/2014 11:12:29 AM

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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-	Wing G / Laundry /	1700 Mt. Vernon Avenue	Rebuild	SPC5	01/01/2018	09/05/2017

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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-00807 Wing G / Laundry / Boiler Room		Retrofit/Re Project:	placement	No		
Facility Project Sub Number Number Num Scope	Date In	Plan Approved Date	Start Date	Project Complete d	Status	CEQA Review
10208 HS022427-0 0	9/16/2002 12:00:00 AM	11/28/2007 12:00:00 AM	11/19/2012		CLOS	No

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Provide the number of	f inpatient bed	ds and patient days per type of service p	per building per Section 130061((c)(1)(F)	
Building Number: BL	D-00807	Building Name: W	/ing G / Laundry / Boiler Room		_
Type of Service Prov	<u>/ided</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	Radiological/ Imaging	Nuclear Medicine	
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitat Therapy	ion
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialy	ysis
Skilled Nursing	Inpatient	0 Inpatient Days 0	Support Services	Outpatient Surgery	
	Beds	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Pla	nnt

Report Year: 2014 10208 **Kern Medical Center** Bakersfield Page:5 of 35 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-00807 **Building Number: Building Name:** Wing G / Laundry / Boiler Room Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn 0 Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days **Pediatric** intensive Care Newborn **Intermediate Card Nursery** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Days Bed Days Bed **Intensive Care** Rehabilitation Int. Care / development Center **Disabled** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Days Days Days Bed Bed Bed **Total Beds this** Total Beds this **Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Days Bed

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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-00803	Wing B/C - North	Remain
BLD-00804	Wing D	Remain
BLD-00805	Wing E	Remain
BLD-00806	Infill at E Wing	Remain
BLD-00807	Wing G / Laundry / Boiler Room	Rebuild
BLD-00808	Wing G/Dietary	Remain
BLD-00809	Central Utilities Plant	Remain
BLD-03806	Wing B/C - South	Remain

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List ALL propose	ed new buildings to be constructed at this or another si	te.	
Building Number	Building Name	New Site	
N_1	Building 9 New Central Plant		

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The proje replaced of The plant replaced of	cted date or dates or rebuild building ned uses of the bu or rebuild building	s the building was well. Sidding or building sas well. Sidding or building sas well.	vill be removed from service p	oer <mark>Sec</mark> e care s	service, provide the following: tion 130061 (c)(2)(A) and pro- service per Section 130061(c) n 130061(c)(20(C)	ovide said date or da	
Building N	Number: BLD-0	0807	Wing G / Laundry / E	Boiler R	oom Removal Date:	09/05/2017	
Planned l	Jses for the buildi	ng to be remov	ved from acute care service:				
Planned	use for building:						
Inpatient s	Nursing IntensiveCare Pediatric/Adol escent Psychiatric Nursing Obstetrical Ante/Postprtum Intermediate Care Skilled Nursing	delivered in the	e building: 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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No data reporte	d for Section	n 130061(c)	(2)(D).		

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No data reporte	ed for Section	n 130061(c)(2)(D.		

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No data reporte	ed for whether	er the general	al acute care services and beds will be relo	ocated to a	new, existing or retrofi	tted building and any
corresponding	bullaring sites	s or project i	numbers for buildings with a building freson	duon or iv	ebulla of Replace Pe	51 Occilon 130001(c)(2)(L).

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No data reporte	d for Section	n 130061(c)	(3).		

ing Number:	BLD-00807 Buildin	ng Name: W	/ing G / Laundry / Boil	ler Room	1	
ype of Service	e Provided		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	Nursing		Anesthesia			
	IntensiveCare				Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Newborn/	Outpatient Surgery
	Psychiatric Nursing		Radiological/ Imaging		WellBaby	
	-		Pharmaceutical		Emergency	Central Plant
	Obstetrical Ante/Postprtum		Dietetic		Nuclear Medicine	Support Services
	Intermediate Care		Administration			
	Skilled Nursing					

equirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building er Section 130061(c)(5) Ruilding Number: RLD 00803 Ruilding Name: Wing R/C North												
ding Number: BLD-00803	Building Name: Wing B/C - Nor	th										
onfiguration: N/A												
ype of Service Provided												
X Nursing	Surgical	X Obstetrical Cesarean/Deliv	X Rehabilitation Therapy									
IntensiveCare	Anesthesia	X Obstetrical Recovery	Renal Dialysis									
Pediatric/Adol escent	Clinical Lab	,										
X Psychiatric Nursing	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery									
X Obstetrical	Pharmaceutical											
Ante/Postprtum		Emergency	Central Plant									
Intermediate Care	Dietetic	X Nuclear Medicine	X Support									
Skilled Nursing	Administration	Nucleal Medicine	X Support Services									

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	whether by retrofit o				ach building will comply be provided in each gen	
uilding Num	ber: BLD-00804	Building Na	me: Wing D			
Configuratio	on: N/A					
Type of Se	ervice Provided					
X	Nursing	X	Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical Recovery	Renal Dialysis
X	Pediatric/Adol escent	X	Clinical Lab		Recovery	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical		Pharmaceutical			
	Ante/Postprtum			Ш	Emergency	Central Plant
	Intermediate Care		Dietetic		Nuclear Medicine	Support
	Skilled Nursing		Administration			Services

port Year:	2014 10208	Kern Medica	l Center		Bakersfield	Page:16 of 35
	whether by retrofit or by				ach building will comply be provided in each gen	
uilding Numb	er: BLD-00805	Building Na	me: Wing E			
Configuration	n: N/A					
Type of Ser	rvice Provided					
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	X	Anesthesia		Obstetrical Recovery	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing	X	Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical			
	Ante/i ostpitum		Distatis	X	Emergency	Central Plant
	Intermediate Care		Dietetic		Nuclear Medicine	Support
	Skilled Nursing		Administration			Services

eport the final configuration of all bui	Unlinear are than be a witch a conserve above											
quirements whether by retrofit or by er Section 130061(c)(5)	replacement and the type of service	ring how each building will comply that will be provided in each gen	with the SPC-5/NPC-4 or 5 peral actue care hospital building									
uilding Number: BLD-00806	Building Name: Infill at E Wing											
Configuration: N/A												
Type of Service Provided												
Nursing	X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy									
IntensiveCare	X Anesthesia	Obstetrical Recovery	Renal Dialysis									
Pediatric/Adol escent	Clinical Lab	recovery										
Psychiatric Nursing	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery									
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant									
Intermediate	Dietetic											
Care Skilled Nursing	Administration	Nuclear Medicine	Support Services									
Skilled Nursing	Administration		Services									

eport Year:	2014 10208	Kern Medica	Center		Bakersfield		Page:18 of 35					
	whether by retrofit or b				ach building will comply be provided in each gen							
Building Numl	ber: BLD-00807	Building Na	me: Wing G / Laund	Iry / Boiler	Room							
Configuration: N/A												
Type of Se	rvice Provided											
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis					
	Pediatric/Adol escent		Clinical Lab		Recovery							
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery					
	Obstetrical Ante/Postprtum		Pharmaceutical		_							
	Intermediate		Dietetic		Emergency	X	Central Plant					
	Care				Nuclear Medicine	X	Support Services					
	Skilled Nursing		Administration				Services					

		ch building will comply with e provided in each general											
me: Wing G/Dietary													
	Configuration: N/A												
Surgical				Rehabilitation Therapy									
Anesthesia				Renal Dialysis									
Clinical Lab		Recovery											
Radiological/ Imaging				Outpatient Surgery									
Pharmaceutical													
		Emergency	Ш	Central Plant									
Dietetic		Nuclear Medicine	X	Support									
Administration	<u>_</u>		-	Services									
	Anesthesia Clinical Lab Radiological/ Imaging Pharmaceutical Dietetic	Anesthesia Clinical Lab Radiological/ Imaging Pharmaceutical Dietetic	Cesarean/Deliv Anesthesia Obstetrical Recovery Clinical Lab Radiological/ Newborn/ WellBaby Pharmaceutical Emergency Dietetic Nuclear Medicine	Cesarean/Deliv Anesthesia Obstetrical Recovery Clinical Lab Radiological/ Newborn/ WellBaby Pharmaceutical Emergency Dietetic Nuclear Medicine									

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Report the final configuration of all bu requirements whether by retrofit or by per Section 130061(c)(5)												
Building Number: BLD-00809	Building Name: Central Utilities I	Plant										
Configuration: N/A												
Type of Service 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	Pharmaceutical											
Ante/Postprtum	_	Emergency	X Central Plant									
Intermediate Care	Dietetic	Nuclear Medicine	X Support									
Skilled Nursing	Administration	<u> </u>	Services									

eport Year:	2014 10208	Kern Medica	Center		Bakersfield		Page:21 of 35					
	whether by retrofit of				ach building will comply e provided in each ger							
uilding Numl	ber: BLD-03806	Building Na	me: Wing B/C - Sou	uth								
Configuration: N/A												
Type of Se	ervice Provided											
X	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation herapy					
	IntensiveCare		Anesthesia		Obstetrical Recovery	R	tenal Dialysis					
	Pediatric/Adol escent		Clinical Lab		Recovery							
	Psychiatric Nursing	X	Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Ourgery					
Х	Obstetrical Ante/Postprtum	X	Pharmaceutical		_							
	Ante/i Ostpitum		Dietetic		Emergency		entral Plant					
	Intermediate Care		Dietetic		Nuclear Medicine		Support Services					
	Skilled Nursing	X	Administration			Š	bervices					

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Include and S	de information on SPC-5 per Section	the number of i 130061(e)	npatient beds b	y type of S	Service provided by bui	lding	gs that are classified as	SPC-	2, SPC-3, SPC-4,			
Buildi	Building Number: BLD-00803 Building Name: Wing B/C - North											
Тур	e of Service Prov	<u>rided</u>										
X	Nursing	Inpatient Beds	28		Surgical	X	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy			
	IntensiveCare	Inpatient Beds	0		Anesthesia							
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	X	Obstetrical Recovery		Renal Dialysis			
X	Psychiatric Nursing	Inpatient Beds	25	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
X	Obstetrical Ante/Postprtum	Inpatient Beds	18		Pharmaceutical		Emergency		Central Plant			
	Intermediate Care	Inpatient Beds	0		Dietetic	X	Nuclear Medicine	X	Support Services			
	Skilled Nursing	Inpatient Beds	0		Administration							
	Total Beds this Building		71									

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	le information on PC-5 per Section		f inpatient beds I	oy type of S	Service provided by	building	s that are classified a	s SPC-2, SI	PC-3, SPC-4,
Buildi	ng Number: BLE	D-00804	Building Na	ame: Wi	ng D				
Туре	of Service Prov	<u>rided</u>							
X	Nursing	Inpatient Beds	26	X	Surgical		Obstetrical Cesarean/Deliv		nabilitation erapy
X	IntensiveCare	Inpatient Beds	52		Anesthesia	_	_		
X	Pediatric/Adol escent	Inpatient Beds	24	X	Clinical Lab		Obstetrical Recovery	Rer	nal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		patient gery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	Cer	ntral Plant
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine		oport vices
	Skilled Nursing	Inpatient Beds	0		Administration				
	Total Beds this Building		102						

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	e information on t PC-5 per Section		inpatient beds by t	ype of	Service provided by bui	lding	s that are classified as	SPC-2	2, SPC-3, SPC-4,
Buildin	g Number: BLD	0-00805	Building Name	e: W	ing E				
<u>Type</u>	of Service Prov	ided							
	Nursing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0	X	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	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		0						

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	e information on t PC-5 per Section		inpatient beds by t	ype of	Service provided by bu	ıilding	s that are classified as	SPC-2,	, SPC-3, SPC-4,
Buildir	ng Number: BLE	D-00806	Building Name	e: Int	fill at E Wing				
<u>Type</u>	of Service Prov	rided							
	Nursing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0	X	Anesthesia				
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	F	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		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)										
Building Number: BLD-00808 Building Name: Wing G/Dietary										
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	X	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-00809 Building Name: Central Utilities Plant										
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	
	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-03806 Building Name: Wing B/C - South										
Type of Service Provided										
X	Nursing	Inpatient Beds	26	X	Surgical	X	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	X	Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	23	X	Pharmaceutical		Emergency		Central Plant	
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine	Х	Support Services	
	Skilled Nursing	Inpatient Beds	0	X	Administration					
	Total Beds this Building		49							

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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) BLD-00803 Wing B/C - North **Building Name: Building Number:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient 28 Inpatient Inpatient Inpatient Inpatient Inpatient 5218 0 0 25 5731 Days Days Bed Days Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient 18 Inpatient 3046 Inpatient Inpatient Inpatient Inpatient Days Days Bed Bed Bed Days **Intensive Care Newborn Intermediate Care** Pediatric Nursery Inpatient Inpatient 0 Inpatient 0 Inpatient 0 Inpatient Inpatient Bed Days Bed Davs Bed Davs Int. Care / Developmentally **Intensive Care** Rehabilitation Disabled Center Inpatient Inpatient Inpatient Inpatient Inpatient 0 Inpatient 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this**

Building Per

71

Service

Building Per

71

Unit

0

0

Inpatient

Days

Inpatient

Bed

Inpatient

Bed

Inpatient

Davs

Report Year: 2014 10208 **Kern Medical Center** Bakersfield Page:30 of 35 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) BLD-00804 Wing D **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** 26 Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 11236 Days Days Days Bed Bed Bed Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Bed Days Days Bed Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient 1419 Inpatient 0 Inpatient 24 Inpatient 28 Inpatient 8664 Inpatient Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center 4264 Inpatient 12 Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service 12 Inpatient Inpatient Inpatient Inpatient 1154 0 0 Bed Days Bed Days 102 102

Report Year: 2014 10208 **Kern Medical Center** Bakersfield Page:31 of 35 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) BLD-00805 Wing E **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 10208 **Kern Medical Center** Bakersfield Page:32 of 35 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) BLD-00806 Infill at E Wing **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 10208 **Kern Medical Center** Bakersfield Page:33 of 35 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) BLD-00808 Wing G/Dietary **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 10208 **Kern Medical Center** Bakersfield Page:34 of 35 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) BLD-00809 Central Utilities Plant **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Days Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 0 0

Report Year: 2014 10208 **Kern Medical Center** Bakersfield Page:35 of 35 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) BLD-03806 Wing B/C - South **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** 26 Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 8596 Days Days Bed Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient 23 Inpatient 4014 Inpatient Inpatient Inpatient Inpatient 0 0 Days Days Bed Bed Bed Days **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 Bed Days Bed Days Bed Days **Coronary Care Chemical Dependency Total Beds this Total Beds this Building Per Building Per** Unit Service Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 49 49