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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 Owner and Year of Report per Section 130061(e)

Facility Number:	11242							
Facility Name:	Children's Hospital and Research Center at Oakland							
Address:	747 52nd St.							
City:	Oakland							
Hospital Owner/Lice	ensee: Childrens Hosp Med Ctr of No California							
Year of Rep	orting: 2014							
Contact 1 e-mail Ad	dress:							
Contact 2 e-mail Ad	dress:							
Contact 3 e-mail Add	Iress::							
Name of Sub	mitter: Doug Nelson							
Submission	Date: 12/18/2014 9:22:44 AM							

Report `	Year: 2014 112	Children's Hospital and Resea	rch Center at	Oakland		Page:2 of 41		
rebuild, 1 130061.	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- 01298	B/C Wing	747 52nd Street	Replace	SPC2	01/01/2020	06/30/2019		
BLD- 01299	A/B Wing	747 52nd Street	Replace	SPC2	01/01/2020	06/30/2019		

Report Year: 2014 112	242 Children's Hospital and Research Oakland	h Center at	Oakland			Page:3 o	f 41
For each building which is plan projected construction start dat status and approvals per Section	nned for rebuild, retrofit or replacement, particular te or dates and projected Completion date for $130061(c)(1)(E)$.	rovide the pro e or dates per	ject numbers, per Section 130061(c	Section 13 c)(1)(D) and	0061(c)(1)(C) I the most rec	. The ent projec	:
Building No: BLD-01299	A/B Wing		Retrofit/Replac Project:	ement	Hazus-S	ubmitted]
Facility Project Sub Number Number Num S	Scope	Date In	Plan Approved s Date	Start Date	Project Complete d	Status	CEQA Review
11242 IS110643-0 0		4/6/2011 12:00:00 AM	05	5/08/2017	05/31/2019	ACTI	No

Report Year: 2014 11242	Children's Hospital and Research Center	er at Oakland	Page:4 of 41					
Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)								
Building Number: BLD-01298 Building Name: B/C Wing								
Type of Service Provided								
Nursing Inpatien Beds	nt 0 Inpatient 0 Days	Surgical	Obstetrical Recovery					
IntensiveCare Inpatien Beds	nt 0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby					
X Pediatric/Adol Inpatier escent Beds	nt 9 Inpatient Days 2027	Clinical Lab	Emergency					
Psychiatric Inpatier Nursing Beds	nt 0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine					
Obstetrical Inpatien Ante/Postprtum Beds	nt 0 Inpatient Days 0	X Pharmaceutical	X Rehabilitation Therapy					
Intermediate Inpatier Care Beds	nt 0 Inpatient Days 0		Renal Dialysis					
Skilled Nursing Inpatien	nt 0 Inpatient Days 0	Support Services	Outpatient Surgery					
	Total Beds this 9 Building	Obstetrical Cesarean/Deliv	Central Plant					
OSHPD FDD SB499 Report	Data Last Update: 12/16/2014 Su	ubmission Date: 12/18/2014	Printed: 12/20/2014 6:25 AM					

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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: BLD-01299 Building Name: A/B Wing								
Type of Service Provided								
Nursing Inpatient Beds	0 Inpatient 0 Days		Obstetrical Recovery					
IntensiveCare Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby					
Pediatric/Adol Inpatient escent Beds	0 Inpatient Days 0	Clinical Lab	Emergency					
Psychiatric Inpatient Nursing Beds	0 Inpatient Days 0		Nuclear Medicine					
Obstetrical Inpatient Ante/Postprtum Beds	0 Inpatient Days 0		Rehabilitation Therapy					
Intermediate Inpatient Care Beds	0 Inpatient Days 0		Renal Dialysis Outpatient					
Skilled Nursing Inpatient Beds	0 Inpatient Days 0		Surgery					
	Total Beds this 0 Building		Central Plant					
OSHPD FDD SB499 Report	Data Last Update: 12/16/2014 So	ubmission Date: 12/18/2014 Prin	nted: 12/20/2014 6:25 AM					

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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-01298 Building Name: B/C Wing								
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 Nursing				
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card				
Inpatient 9 Bed	Inpatient 2027 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days			
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	nent			
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	9	9			
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Report Year: 2014 1	Children's Hospital and Rese Oakland	earch Center at Oal	kland	Page:7 of 41			
Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number: BLD-01299 Building Name: A/B Wing							
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric							
Inpatient 0 Inpatie Bed Days	ent 0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp Bed Da	oatient 0 ys			
Perinatal (excluse Newbor	n / GYN) Burn		Skilled Nursing				
Inpatient 0 Inpatie Bed Days	ent 0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp Bed Da	patient 0 ys			
Pediatric	intensive Care N Nursery	lewborn	Intermediate Card				
Inpatient 0 Inpatien Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp Bed Da	atient 0 ys			
Intensive Care	Rehabilitation Center		Int. Care / development Disabled	t			
Inpatient 0 Inpatier Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Inp Bed Day	atient 0 ys			
Coronary Care	Chemical Dependency		Building Per Bu	tal Beds this illding Per rvice			
Inpatient 0 Inpatier Bed Days	nt 0 Inpatient 0 Bed	Inpatient 0 Days	0	0			

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Oakland

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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-01293	Cardiac Cath Lab	Remain
BLD-01294	Patient Tower	Remain
BLD-01295	West Site Plant	Remain
BLD-01296	Cafeteria Addition	Remain
BLD-01297	Diagnostic & Treatment Building	Remain
BLD-01298	B/C Wing	Replace
BLD-01299	A/B Wing	Replace
BLD-03121	Loading Dock	Remain
BLD-05214	Western Expansion Building	Remain

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No proposed ne	ew buildings	to be cons	structed at this or another site.		
	0				

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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)									
Building Number: BLD-01298	B/C Wing		Removal Date:	06/30/2019					
	Planned Uses for the building to be removed from acute care service:								
Inpatient services currently delive	ered in the building:	Obstetrical Cesarean/D	eliv	Rehabilitation Therapy					
IntensiveCare X Pediatric/Adol escent	Anesthesia	Obstetrical Recovery		Renal Dialysis					
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby		Outpatient Surgery					
Obstetrical Ante/Postprtum	X Pharmaceutical	Emergency		Central Plant					
Care Skilled Nursing	Administration	Nuclear Medicine		Support Services					
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For the building or buildings to be replaced, rebuilt, removed from acute care service, provide the following: The projected date or dates the building will be removed from service per Section 130061 (c)(2)(A) and provide said date or dates for replaced or rebuild buildings as well. The planned uses of the building or buildings to be removed from acute care service per Section 130061(c)(2)(B) and provide said uses for replaced or rebuild buildings as well. The inpatient service currently delivered in the building or buildings per Section 130061(c)(20(C)										
Building Number: BLD-0129	A/B Wing		Removal 06/30/2019 Date:							
Planned Uses for the building	to be removed from acute care se	rvice:								
Planned use for building:	edical Office Building Ju	risdiction: OSHPD								
Inpatient services currently del	livered in the building:									
Nursing	Surgical	Obstetrical Cesarean/De	eliv Rehabilitation	on						
IntensiveCare Pediatric/Adol escent	Anesthesia	Obstetrical Recovery	Renal Dialy	sis						
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery							
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Pla	nt						
Intermediate Care	Dietetic	2								
Skilled Nursing	Administration	Nuclear Medicine	X Support Services							
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No data reported	d for Section	on 130061(c	c)(2)(D).		

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No data reported	d for Sectio	n 130061(c))(2)(D.		

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Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rep		
Building BLD-01299 Building Name: A/B Wing Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted be	uilding?	
Support Services Relocated to other building		
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rep	g or retrofitted building and any cor blace" per Section 130061(c)(2)(E)	responding
Building BLD-01298 Building Name: B/C Wing Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted be	uilding?	
Pharmaceutical Relocated to other building		
Report whether the general acute care services and beds will be relocated to a new, existing building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Rep		
Building BLD-01298 Building Name: B/C Wing Number:		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted be	uilding?	
Rehabilitation Therapy Relocated to other building		
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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 Number: Will general act		-	B/C Wing located to a new, Exi	isting or retrofitted	building?					

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No data reported	d for Sectio	on 130061(c)			

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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-01298 Building	Name: B/C Wing								
Type of Service	Provided									
		Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy						
	Nursing	Anesthesia		Renal Dialysis						
	IntensiveCare	Clinical Lab	Obstetrical Recovery							
X	Pediatric/Adol escent	Radiological/	Newborn/ WellBaby	Outpatient Surgery						
	Psychiatric Nursing	Imaging [X] Pharmaceutical	Emergency	Central Plant						
	Obstetrical Ante/Postprtum	Dietetic	Nuclear Medicine	Support Services						
	Intermediate Care	Administration								
	Skilled Nursing									
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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-01299 Building Name: A/B Wing												
Type of Service	Provided											
		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy						
	Nursing	Anesthesia										
	IntensiveCare			Obstetrical Recovery		Renal Dialysis						
	Pediatric/Adol escent	Clinical Lab				Outpatient						
		Radiological/ Imaging		Newborn/ WellBaby		Surgery						
	Psychiatric Nursing	Pharmaceutical		Emergency		Central Plant						
	Obstetrical Ante/Postprtum	Dietetic		Nuclear Medicine	X	Support Services						
	Intermediate Care	Administration										
	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: BLD-01293 Building Name: Cardiac Cath Lab											
Configuration: Retrofit Conforming building to NPC 4 or NPC 5											
Type of Service Provided											
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy								
IntensiveCare	X Anesthesia	Obstetrical Recovery	Renal Dialysis								
Pediatric/Adol escent	Clinical Lab	Receivery									
Psychiatric Nursing	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery								
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Central Plant								
Intermediate Care	Dietetic										
Skilled Nursing	Administration	Nuclear Medicine	Support Services								
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	nfiguration of all buil her by retrofit or by	dings on the			ach building will comply wi be provided in each genera		
Building Number:	BLD-01294	Building Na	me: Patient Tower				
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Service	e Provided						
	ursing	X	Surgical		Obstetrical Cesarean/Deliv	Х	Rehabilitation Therapy
X Int	tensiveCare	X	Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol scent		Clinical Lab				
	sychiatric ursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	bstetrical hte/Postprtum	X	Pharmaceutical	X	Emergency		Central Plant
	termediate are		Dietetic				
	killed Nursing		Administration	X	Nuclear Medicine	X	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-01295	Building Na	me: West Site Plant							
Configuration: Retrofit Conforming building to NPC 4 or NPC 5										
Type of Service	e Provided									
	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	bstetrical nte/Postprtum		Pharmaceutical		Emergency	X	Central Plant			
	termediate are		Dietetic		Nuclear Medicine		Support			
Sk	killed Nursing		Administration				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-01296	Building Na	me: Cafeteria Addition							
Configuration: Retrofit Conforming building to NPC 4 or NPC 5										
Type of Service	e Provided									
	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis			
	ediatric/Adol scent		Clinical Lab							
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery			
	bstetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant			
	termediate are	X	Dietetic		Nuclear Medicine		Support			
Sk	killed Nursing		Administration				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-01297	Building Na	me: Diagnostic & Treat	tment Bu	uilding							
Configuration: Retrofit Conforming building to NPC 4 or NPC 5												
Type of Service	e Provided											
	ursing		Surgical		Obstetrical Cesarean/Deliv	Х	Rehabilitation Therapy					
X Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis					
-	ediatric/Adol scent	X	Clinical Lab									
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery					
	bstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant					
	termediate are		Dietetic									
	killed Nursing	X	Administration		Nuclear Medicine	X	Support Services					
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	uration of all buildings by retrofit or by repla	s on the			ach building will comply with be provided in each general								
Building Number: Bl	LD-01298 Buil	ding Nai	me: B/C Wing										
Configuration:													
Type of Service Pr	ovided												
Nursir	ng		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy						
Intens	siveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis						
X Pedia escen	tric/Adol t		Clinical Lab										
Psych Nursir			Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery						
Obste Ante/F	trical Postprtum	X	Pharmaceutical		Emergency		Central Plant						
Interm Care	nediate		Dietetic										
	d Nursing		Administration		Nuclear Medicine	X	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-01299	Building Na	me: A/B Wing									
Configuration: Replace with existing SPC3, SPC4 or SPC5 and NPC4 or NPC5 building.												
Type of Service	e Provided											
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis					
	ediatric/Adol scent		Clinical Lab									
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery					
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant					
	termediate are		Dietetic				Quarter					
	killed Nursing	X	Administration		Nuclear Medicine		Support Services					
OSHPD FDD SB499 F	Report Da	ita Last Updat	e: 12/16/2014	Submiss	ion Date: 12/18/2014	Printed:	12/20/2014 6:25 AM					

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	nfiguration of all build her by retrofit or by r	dings on the			ach building will comply wi be provided in each genera		
Building Number:	BLD-03121	Building Na	me: Loading Dock				
Configuration:	Retrofit Conformin	g building to	NPC 4 or NPC 5				
Type of Service	e Provided						
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Int	tensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis
	ediatric/Adol scent		Clinical Lab				
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant
	termediate		Dietetic				
	are killed Nursing		Administration		Nuclear Medicine	X	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-05214	Building Na	me: Western Expansio	n Buildir	ng							
Configuration: Retrofit Conforming building to NPC 4 or NPC 5												
Type of Service	e Provided											
Nu	ursing	x	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
Int	tensiveCare	X	Anesthesia		Obstetrical Recovery		Renal Dialysis					
	ediatric/Adol scent		Clinical Lab									
	sychiatric ursing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery					
	ostetrical hte/Postprtum		Pharmaceutical		Emergency		Central Plant					
	termediate are		Dietetic									
	killed Nursing		Administration		Nuclear Medicine		Support Services					
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Include information on and SPC-5 per Section		of inpatient beds by	y type of \$	Service provided by t	puildings that are classified	as SPC-2, SPC	C-3, SPC-4,
Building Number: BL	D-01293	Building Na	me: Ca	ardiac Cath Lab			
Type of Service Pro	vided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy
IntensiveCare	Inpatient Beds	0	X	Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena Rena	l Dialysis
Psychiatric Nursing	Inpatient Beds	0	Х	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge	
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Centr	al Plant
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servio	
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Repo	ort	Data Last Update:	12/16/20	014 Submissi	on Date: 12/18/2014	Printed: 12/20/2	2014 6:25 AM

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Include information on the nun and SPC-5 per Section 13006	nber of inpatient beds by typ	be of Service provided by bu	uildings that are classified as	SPC-2, SPC-3, SPC-4,
Building Number: BLD-01294	4 Building Name:	Patient Tower		
Type of Service Provided				
Nursing Inpati Beds	ent 0	X Surgical	Obstetrical Cesarean/Deliv	X Rehabilitation Therapy
X IntensiveCare Inpati Beds	ent 24	X Anesthesia		
Pediatric/Adol Inpati X escent Beds	ent 94	Clinical Lab	Obstetrical Recovery	Renal Dialysis
Psychiatric Inpati	ent 0	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
Obstetrical Inpati Ante/Postprtum Beds	ent 0	X Pharmaceutical	X Emergency	Central Plant
Intermediate Inpati Care Beds	ent 0	Dietetic	X Nuclear Medicine	X Support Services
Skilled Nursing	ent 0	Administration		
Total Beds this Building	118			
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Include information on and SPC-5 per Section			by type of \$	Service provided by b	uildings that are classified a	as SPC-2, SPO	C-3, SPC-4,
Building Number: BL	D-01295	Building Na	ame: Wo	est Site Plant			
Type of Service Pro	vided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Thera	abilitation apy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
Psychiatric	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Cent	ral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Servi	port ices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Repo	ort D	Data Last Update:	12/16/20	014 Submissio	on Date: 12/18/2014	Printed: 12/20/	/2014 6:25 AM

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Include information on and SPC-5 per Sectio		f inpatient beds by	v type of Service provided b	by buildings that are classified a	as SPC-2, SPC-3, SPC-4,
Building Number: BL	D-01296	Building Na	me: Cafeteria Addition		
Type of Service Pro	vided				
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	Support Services
Skilled Nursing	Inpatient Beds	0	Administration		
Total Beds this Building		0			
SHPD FDD SB499 Repo	ort	Data Last Update:	12/16/2014 Subm	ission Date: 12/18/2014	Printed: 12/20/2014 6:25 AM

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Include information and SPC-5 per Se			by type of S	Service provided by	buildings that are classified	as SPC-2, SF	PC-3, SPC-4,
Building Number:	BLD-01297	Building Na	ame: Dia	agnostic & Treatmer	nt Building		
Type of Service	Provided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		abilitation rapy
X IntensiveCa	are Inpatient Beds	43		Anesthesia			
Pediatric/Ac	dol Inpatient Beds	0	X	Clinical Lab	Obstetrical Recovery	Ren	al Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Out Sur	patient gery
Obstetrical Ante/Postpr	Inpatient tum Beds	0		Pharmaceutical	Emergency	Cen	tral Plant
Intermediat	e Inpatient Beds	0		Dietetic	Nuclear Medicine	X Sup Serv	port ⁄ices
Skilled Nurs	sing Inpatient Beds	0	X	Administration			
Total Beds Building	this	43					
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Include information on and SPC-5 per Section			y type of \$	Service provided by b	uildings that are classified a	as SPC-2, SP	C-3, SPC-4,
Building Number: BL	D-03121	Building Na	ime: Lo	ading Dock			
Type of Service Pro	vided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Reha Ther	abilitation apy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
Psychiatric	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	atient ery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	ral Plant
Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Supp Serv	
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Repo	ort D	ata Last Update:	12/16/20	014 Submissic	on Date: 12/18/2014	Printed: 12/20/	/2014 6:25 AM

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Include information on and SPC-5 per Section			y type of \$	Service provided by b	buildings that are classified	as SPC-2, SP	C-3, SPC-4,
Building Number: BL	D-05214	Building Na	me: Wo	estern Expansion Bu	ilding		
Type of Service Pro	vided						
Nursing	Inpatient Beds	0	X	Surgical	Obstetrical Cesarean/Deliv	Reha Ther	abilitation apy
IntensiveCare	Inpatient Beds	0	X	Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Rena	al Dialysis
Psychiatric	Inpatient Beds	0	X	Radiological/ Imaging	Newborn/ WellBaby	Outp Surg	patient ery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cent	ral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	Supp Serv	port ices
Skilled Nursing	Inpatient Beds	0		Administration			
Total Beds this Building		0					
OSHPD FDD SB499 Repo	ort D	ata Last Update:	12/16/20	014 Submissio	on Date: 12/18/2014	Printed: 12/20	/2014 6:25 AM

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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-01293 Building Name: Cardiac Cath Lab			
Medical / Surgical (Include GYN) Acute Respiratory Care Acute Psychiatric			
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 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-01294 Building Name: Patient Tower			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 82 Inpatient 24190 Bed Days	Inpatient 24 Inpatient 4648 Bed Days	Inpatient 0 Inpatient Bed Days	0
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 12 Inpatient 2902 Bed Days	Inpatient 0 Inpatient Bed Days	0
Coronary Care	Chemical Dependency	Building Per Buildi	Beds this ing Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Servie	2 e 118
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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-01295 Build	ding Name: West Site Plant		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 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-01296 Building	Iding Name: Cafeteria Addition		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 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-01297 Building Name: Diagnostic & Treatment Building			
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 20 Inpatient 4268 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 23 Inpatient 5712 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 43 43	
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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-03121 Build	ding Name: Loading Dock		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t 0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t O
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	t O
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ling Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	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-05214 Build	ding Name: Western Expansion Building		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Bed Days	
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	
Coronary Care	Chemical Dependency	Total Beds thisTotal Beds thisBuilding PerBuilding Per	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Service 0 0	
OSHPD FDD SB499 Report Data Last U	pdate: 12/16/2014 Submission Date:	12/18/2014 Printed: 12/20/2014 6:25 AM	