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 Ye	ear of Report per Section 130061(e)	
Facility Number:	11210		
Facility Name:	Alameda H	ospital	
Address:	2070 Clinto	n Ave	
City:	Alameda		
Hospital Owner/Lice	ensee:	Alameda Health System	
Year of Rep	oorting:	2015	
Contact 1 e-mail Ad	ldress:	Confidential data left blank intentionally.]	
Contact 2 e-mail Ad	ldress:	Confidential data left blank intentionally.]	
Contact 3 e-mail Address::		Confidential data left blank intentionally.]	
Name of Sub	mitter:	Kristen Thorson	
Submission	Date:	10/15/2015 9:52:11 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- 01278	Original Hospital	2070 Clinton Ave	Replace	SPC2	01/01/2020	03/31/2018
BLD- 01279	Stephens Wing	2070 Clinton Ave	Retrofit	SPC2	01/01/2019	04/01/2019

Report Year: 11210 Alameda Hospital Page:3 of 36 2015 Alameda 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). Original Hospital Yes-Submitted Building No: BLD-01278 Retrofit/Replacement Project: Facility Project CEQA Plan Approved Projected Projected Sub Completion Date Status Number Number Date Start Date Review Num Scope Date In 11210 IS101131-0 0 SPC-2 UPGRADE & KITCHEN 6/30/2010 01/01/2015 ACTI No RELOCATION 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). Yes-Submitted BLD-01279 Stephens Wing Building No: Retrofit/Replacement Project: CEQA Facility Project Sub Plan Approved Projected Projected Completion Date Status Date Start Date Review Number Number Num Scope Date In 11210 IS101131-0 0 SPC-2 UPGRADE & KITCHEN 6/30/2010 01/01/2015 01/01/2018 ACTI No RELOCATION

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Provide the number of	f inpatient bed	ds and patient days per type of service pe	er building per Section 13006	1(c)(1)(F)
Building Number: BL	.D-01278	Building Name: Ori	iginal Hospital	
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 X Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services	Outpatient Surgery
	Deus	Total Beds this Building	Obstetrical Cesarean/Deliv	Central Plant

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Provi	de the number of	inpatient bed	Is and patient days per type of s	service per building per	Section 130061(c)(1)(F)	
	ing Number: BL		Building Name:	Stephens Wing		
X	Nursing	Inpatient Beds	31 Inpatient 49	Surgi	ical Obste	etrical very
	IntensiveCare	Inpatient Beds	0 Inpatient Days	0 Anest	thesia Newb	
	Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days	0 Clinica	al Lab Emer	gency
	Psychiatric Nursing	Inpatient Beds	0 Inpatient Days	0 Radio Imagii	ological/ Nucle ing	
	Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days	0 Pharm	naceutical Reha tic Thera	bilitation apy
	Intermediate Care	Inpatient Beds	0 Inpatient Days	╝ <u>□</u>		ll Dialysis
X	Skilled Nursing	Inpatient Beds	23 Inpatient Days 77	X Suppo Service	ces Surge	
		Dodo	Total Beds this Building	54 Obste Cesar	roon/Doliv	ral Plant

Report Year: 2015 11210 Alameda Hospital Alameda Page:6 of 36 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-01278 **Building Number: Building Name:** Original Hospital 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

Report Year: 2015 11210 Alameda Hospital Alameda Page:7 of 36 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) **Building Number:** BLD-01279 **Building Name:** Stephens Wing Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient 31 Inpatient 4922 Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient | 7757 Inpatient Inpatient Inpatient Inpatient 0 Inpatient 23 Bed Days Days Bed Days Bed **Pediatric** intensive Care Newborn **Intermediate Card** Nursery Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Days Bed Days Bed Days **Intensive Care** Rehabilitation Int. Care / development **Disabled** Center Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Bed Bed Days Days Bed Days **Total Beds this Total Beds this Coronary Care** Chemical **Building Per Building Per** Dependency Unit Service 54 Inpatient 54 Inpatient Inpatient Inpatient Days Days Bed 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-01278	Original Hospital	Replace
BLD-01279	Stephens Wing	Retrofit
BLD-01280	West Wing	Remain
BLD-01281	South Wing	Remain
BLD-01282	Radiology Addition	Remain
BLD-01283	Medical Gas Storage	Remain
BLD-02630	Compactor Shed	Remain
BLD-03120	Emergency Room Relocation	Remain

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No proposed ne	ew buildings	s to be const	ructed at this or another site.		

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The proje replaced The planr replaced	cted date or dates or rebuild building ned uses of the bu or rebuild building	s the buildings as well. wilding or building as well.	aced, rebuilt, removed g will be removed from ildings to be removed to the introduced in the building or bui	n service per Section service per service	on 130061 (c)(2 ervice per Section	2)(A) and provide on 130061(c)(2)(B		
Building N	Number: BLD-0	1278	Original Ho	ospital		Removal Date:	03/31/2018	
Planned l	Jses for the buildi	ng to be rei	moved from acute care	service:				
Planned	use for building:	Other		Jurisdiction:				
	Other Usage:	non genera	al acute care services					
Inpatient :	services currently	delivered in	n the building:					
	Nursing		Surgical		Obstetrical Cesarean/Deliv	,	Rehabilitation Therapy	
	IntensiveCare		Anesthesia		0			
	Pediatric/Adol escent		Clinical Lab		Obstetrical Recovery		Renal Dialysis	3
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	П	Central Plant	
	Intermediate Care	X	Dietetic					
	Skilled Nursing	X	Administration		Nuclear Medicine	X	Support Services	

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No data reporte	ed 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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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 "Re	ng or retrofitted building and any cor eplace" per Section 130061(c)(2)(E)	responding
Building Number: BLD-01278 Building Name: Original Hospital		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted Dietetic Relocated to retrofitted building	building? 1	
Dietetic Relocated to retrofitted 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 "Re		
Building Number: BLD-01278 Building Name: Original Hospital		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Administration Relocated to retrofitted 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 "Re		
Building Number: BLD-01278 Building Name: Original Hospital		
Will general acute care services and beds will be relocated to a new, Existing or retrofitted	building?	
Support Services Relocated to retrofitted building		

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

ng Number:	BLD-01278 Buildi	ng Name: O	riginal Hospital			
pe of Servic	e Provided	I 🗆	Surgical	Obstetrical		Rehabilitation
	Nursing		Accellence	 Cesarean/Deliv		Therapy
	IntensiveCare		Anesthesia	Obstetrical Recovery		Renal Dialysis
П	Pediatric/Adol escent		Clinical Lab	Newborn/		Outpatient Surgery
	Psychiatric		Radiological/ Imaging	WellBaby		Gurgery
Ц	Nursing		Pharmaceutical	Emergency		Central Plant
	Obstetrical Ante/Postprtum	X	Dietetic	Nuclear Medicine	X	Support Services
	Intermediate Care	X	Administration			
	Skilled Nursing					

Report Year: 201	5 11210 Alame	eda Hospital		Alameda		Page:16 of 36
Report any general per Section 130061		atient service that is provided in any	general ad	cute care hospital	building t	hat is rated SPC-1
Building Number:	BLD-01279 Buildin	g Name: Stephens Wing				
Type of Service	Provided					
		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	Nursing	Anesthesia				Danal Dialysia
	IntensiveCare		L (Obstetrical Recovery		Renal Dialysis
	Pediatric/Adol escent	Clinical Lab		Newborn/		Outpatient Surgery
	Psychiatric	Radiological/ Imaging		VellBaby		
	Nursing	Pharmaceutical	E	Emergency		Central Plant
	Obstetrical Ante/Postprtum	Dietetic		Nuclear Medicine	X	Support Services
	Intermediate Care	Administration				
X	Skilled Nursing					

ding Number: BLD-01278	Building Name: Original Hospi	tal										
Configuration: Replace with existing SPC2 and NPC3 building and remove from service in 2030.												
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 Ante/Postprtum	Pharmaceutical	- Emergency	Central Plant									
Intermediate	X Dietetic	Emergency	Central Flant									
Care Skilled Nursing	X 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 acute care hospital building per Section 130061(c)(5)												
Building Number: BLD-01279 Building Name: Stephens Wing												
Configuration: Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030												
Type of Service Provided												
X	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 Ante/Postprtum		Pharmaceutical		Emergency		Central Plant					
	Intermediate Care		Dietetic	_	Nuclear Medicine		Comment					
	Skilled Nursing		Administration		Nucleal Medicine		Support Services					

Report Year:	2015 11210	Alameda Hosp	ital		Alameda		Page:19 of 36							
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 acute care hospital building per Section 130061(c)(5)														
Building Num	Building Number: BLD-01280 Building Name: West Wing													
Configuration: Replace with existing SPC3, SPC4 or SPC5 and NPC4 or NPC5 building.														
Type of Service Provided														
	Nursing	X	Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy							
X	IntensiveCare	X	Anesthesia		Obstetrical Recovery	R	enal Dialysis							
	Pediatric/Adol escent		Clinical Lab		Recovery									
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery							
	Obstetrical Ante/Postprtum		Pharmaceutical		_									
	Intermediate		Dietetic		Emergency	X C	entral Plant							
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services							
_		I												

eport Year:	2015 11210	Alameda Hos	pital		Alameda		Page:20 of 36
	al configuration of all bu whether by retrofit or by 30061(c)(5)						
Building Num	ber: BLD-01281	Building Nai	me: South Wing				
Configuration	on: N/A						
Type of Se	ervice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy
X	IntensiveCare		Anesthesia		Obstetrical Recovery	X	Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical		_		0
	randar dotpitam		Dietetic	Ш	Emergency		Central Plant
	Intermediate Care		Dietetic	X	Nuclear Medicine	X	Support Services
X	Skilled Nursing	X	Administration				Services

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	ner by retrofit or by i				ach building will comply woe provided in each gener								
Building Number:	BLD-01282	Building Nar	ne: Radiology Addition	n									
Configuration:	Configuration: N/A												
Type of Service	Provided												
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy						
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	F	Renal Dialysis						
	diatric/Adol cent		Clinical Lab		recovery								
	ychiatric Irsing	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Gurgery						
	estetrical te/Postprtum		Pharmaceutical		Emergency	По	Central Plant						
	ermediate		Dietetic										
Ca	illed Nursing		Administration		Nuclear Medicine		Support Services						
		•											

eport Year: 20	15 11210	Alameda Hos	pital		Alameda		Page:22 of 36
	ner by retrofit or by				ach building will comply be provided in each gene		
uilding Number:	BLD-01283	Building Na	me: Medical Gas Stor	age			
Configuration:	N/A						
Type of Service	Provided						_
Nu	rsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	diatric/Adol cent		Clinical Lab		Recovery		
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	stetrical te/Postprtum		Pharmaceutical		_		0
	·		Dietetic		Emergency	Ш	Central Plant
Ca	ermediate re				Nuclear Medicine	X	Support Services
Ski	illed Nursing		Administration				Corvidos

eport Year:	2015	210	Alameda Hos	pital		Alameda		Page:23 of 36
	whether by retr					ach building will comply be provided in each ger		
Building Num	ber: BLD-026	30	Building Nar	ne: Compactor She	d			
Configuration	on: N/A							
Type of Se	ervice Provided	i						
	Nursing			Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCar	e		Anesthesia		Obstetrical Recovery	F	Renal Dialysis
	Pediatric/Add escent	ol		Clinical Lab		Recovery		
	Psychiatric Nursing			Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical			Pharmaceutical	_			
	Ante/Postprt	um				Emergency		Central Plant
	Intermediate Care			Dietetic		Nuclear Medicine		Support
	Skilled Nursi	ng		Administration			,	Services

eport Year: 201	5 11210 Ala	meda Hos _l	oital		Alameda		Page:24 of 36
	er by retrofit or by rep				ach building will comply we provided in each gener		
Building Number:	BLD-03120 Bu	uilding Nan	ne: Emergency Room	Relocat	on		
Configuration:	N/A						
Type of Service F	Provided						
Nurs	sing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation erapy
Inter	nsiveCare		Anesthesia		Obstetrical Recovery	Re	enal Dialysis
Ped esce	iatric/Adol ent		Clinical Lab		Recovery		
Psyc Nurs	chiatric sing		Radiological/ Imaging		Newborn/ WellBaby	Ou Su	utpatient Irgery
	tetrical		Pharmaceutical				
— Ante	e/Postprtum			Χ	Emergency	Ce	entral Plant
Inter Care	rmediate e		Dietetic		Nuclear Medicine		upport
Skill	ed Nursing		Administration			<u> </u>	ervices

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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-01280 Building Name: West Wing											
Type of Servi	ce Provided										
Nursing	Inpatient Beds	0	X	Surgical		Obstetrical Cesarean/Deliv		abilitation rapy			
X Intensive	eCare Inpatient Beds	8	X	Anesthesia							
Pediatric escent	c/Adol Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	Ren	al Dialysis			
Psychiat Nursing	ric Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		patient gery			
Obstetric Ante/Po		0		Pharmaceutical		Emergency	X Cen	tral Plant			
Intermed Care	liate Inpatient Beds	0	Ш	Dietetic		Nuclear Medicine	X Sup Ser	port vices			
Skilled N	lursing Inpatient Beds	0		Administration							
Total Be Building	ds this	8									

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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: BLE	D-01281	Building Nam	e: So	outh Wing					
Туре	e of Service Prov	ided								
X	Nursing	Inpatient Beds	53		Surgical		Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy	
X	IntensiveCare	Inpatient Beds	8		Anesthesia		_			
	Pediatric/Adol escent	Inpatient Beds	0	X	Clinical Lab		Obstetrical Recovery	X	Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	0	X	Pharmaceutical		Emergency		Central Plant	
	Intermediate Care	Inpatient Beds	0		Dietetic	X	Nuclear Medicine	X	Support Services	
X	Skilled Nursing	Inpatient Beds	12	X	Administration					
	Total Beds this Building		73							

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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	g Number: BLD)-01282	Building Name	: Ra	adiology Addition					
Type o	of Service Prov	ided								
	Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
	ntensiveCare	Inpatient Beds	0		Anesthesia					
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery		Renal Dialysis	
	Psychiatric Nursing	Inpatient Beds	0	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency		Central Plant	
	ntermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services	
	Skilled Nursing	Inpatient Beds	0		Administration					
	Fotal 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-01283 Building Name: Medical Gas Storage								
Type of Service Provided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
IntensiveCa	re Inpatient Beds	0	Anesthesia					
Pediatric/Ac	lol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis			
Psychiatric Nursing	Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrical Ante/Postpr	Inpatient tum Beds	0	Pharmaceutical	Emergency	Central Plant			
Intermediate Care	e Inpatient Beds	0	Dietetic	Nuclear Medicine	X Support Services			
Skilled Nurs	ing Inpatient Beds	0	Administration					
Total Beds t Building	this	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-02630 Building Name: Compactor Shed								
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	Dietetic	Nuclear Medicine	X Support Services			
Skilled Nursing	Inpatient Beds	0	Administration					
Total Beds this Building		0						

Report Year:	2015 11210	11210 Alameda Hospital			Page:30 of 36			
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-03120 Building Name: Emergency Room Relocation								
Type of Service Provided								
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy			
Intensive(Care Inpatient Beds	0	Anesthesia					
Pediatric/	Adol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Renal Dialysis			
Psychiatr Nursing	ic Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery			
Obstetrica Ante/Posi		0	Pharmaceutical	X Emergency	Central Plant			
Intermedi Care	ate Inpatient Beds	0	Dietetic	Nuclear Medicine	Support Services			
Skilled Nu	ursing Inpatient Beds	0	Administration					
Total Bed Building	s this	0						

Report Year: 2015 11210 Alameda Hospital Alameda Page:31 of 36 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-01280 West Wing **Building Name: Building Number:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 0 0 0 Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient Days Days Bed Bed Bed Days **Intensive Care Newborn Intermediate Care** Pediatric Nursery Inpatient Inpatient Inpatient 0 Inpatient 0 Inpatient 0 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 Building Per** Unit Service Inpatient Inpatient Inpatient 0 Inpatient 0 Days Bed Bed Days 8 8

Report Year: 2015 11210 Alameda Hospital Alameda Page:32 of 36 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-01281 South Wing **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** 53 Inpatient Inpatient Inpatient 0 Inpatient Inpatient Inpatient 4931 Days Days Bed Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing Burn** Inpatient Inpatient Inpatient Inpatient Inpatient Inpatient 0 12 4047 Days Bed Days Days Bed Bed **Intensive Care Newborn Intermediate Care Pediatric** Nursery Inpatient Inpatient 0 Inpatient 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 1667 0 0 Bed Days Bed Days 73 73

Report Year: 2015 11210 Alameda Hospital Alameda Page:33 of 36 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-01282 Radiology Addition **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: 2015 11210 Alameda Hospital Alameda Page:34 of 36 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-01283 Medical Gas Storage **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: 2015 11210 Alameda Hospital Alameda Page:35 of 36 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-02630 Compactor Shed **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: 2015 11210 Alameda Hospital Alameda Page:36 of 36 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-03120 **Emergency Room Relocation 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