## 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:	11441							
Facility Name:	Beverly Hosp	tal						
Address:	309 W. Bever	ly Blvd.						
City:	Montebello							
			<del></del>					
Hospital Owner/Lice	ensee: Ali	ce Cheng						
Year of Rep	oorting: 20	15						
Contact 1 e-mail Ac	dress:	onfidential data left blank intentionally.]						
Contact 2 e-mail Ac	dress:	onfidential data left blank intentionally.]						
Contact 3 e-mail Add	dress::	onfidential data left blank intentionally.]						
Name of Sub	mitter:	ad Hawn						
Submission	Date: 10	/21/2015 6:35:15 PM						

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For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to rebuild, retrofit or replace the building to SPC2, SPC3, SPC4 or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for rebuild, retrofit or replacement of the building that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)

Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
BLD- 00613	Service Building & Additions (Block I)	309 W. Beverly Blvd.	Retrofit	SPC2	01/01/2017	05/01/2016
BLD- 03872	Main/Utility/Tower (Block VI)	309 W. Beverly Blvd.	Retrofit	SPC2	01/01/2016	12/01/2015

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For each building which is planned for rebuild, retrofit or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

Building No: BLD-00613 Service Building & Additions (Block I) Retrofit/Replacement Project: Hazus-Submitted

Facility Numbe	Project r Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
11441	S131367-19 -00	0		6/19/2013	7/28/2014 12:00:00 AM	12/01/2014	05/01/2015	FIEL	No

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).

Main/Litility/Tower (Block VI)

Building No: BLD-03872

Dallaling	NO. BLD 0		Walling Tower (Block VI)		Project:	Spiacomoni	114243 00	Diffitted	l
Facility Number	Project Number	Sub Num	Scope	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review
11441	HL021378-0	0		10/22/200 2	7/16/2008 12:00:00 AM	08/28/2009	12/31/2014	CLOS	No
11441	HL111174-0	0		5/6/2011	8/27/2013 12:00:00 AM	10/01/2014	07/01/2015	FIEL	No

Retrofit/Replacement

Hazus-Submitted

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Provide the number of	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)					
Building Number: BL	_D-00613	Building Name: Se	ervice Building & Additions (Bloc	k I)		
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	Rehabilitation Therapy		
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis		
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services Obstetrical	Outpatient Surgery		
		Total Beds this Building	Cesarean/Deliv	Central Plant		

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Provide the number of	inpatient beds	and patient days per type	of service per b	ouilding per Section 130061(	c)(1)(F)	
Building Number: BLD	D-03872	Building Name	e: Main/	Utility/Tower (Block VI)		_
Type of Service Provi	<u>ided</u>					
X Nursing	Inpatient Beds	92 Inpatient Days	26131	X Surgical	Obstetrical Recovery	
IntensiveCare	Inpatient Beds	0 Inpatient Days	0	X Anesthesia	Newborn/ WellBaby	
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days	0	Clinical Lab	Emergency	1
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days	0	X Radiological/ Imaging	Nuclear Medicine	
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days	0	<ul><li>X Pharmaceutical</li><li>X Dietetic</li></ul>	Rehabilitat Therapy	ion
Intermediate Care	Inpatient Beds	0 Inpatient Days	0	<ul><li>X Administration</li><li>X Support</li></ul>	Renal Dialy	/sis
Skilled Nursing	Inpatient Beds	0 Inpatient Days	0	Services	X Outpatient Surgery	
	-	Fotal Beds this Building	92	Obstetrical Cesarean/Deliv	Central Pla	nt

Report Year: 2015 11441 **Beverly Hospital** Montebello Page:6 of 42 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) BLD-00613 **Building Number: Building Name:** Service Building & Additions (Block I) 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 11441 **Beverly Hospital** Montebello Page:7 of 42 Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F) Main/Utility/Tower (Block VI) **Building Number:** BLD-03872 **Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient 92 Inpatient 2613 Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Bed Days Bed Days Perinatal (excluse Newborn / GYN) **Skilled Nursing** Burn Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient 0 Bed Days Days Days Bed 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 92 Inpatient Inpatient 92 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-00613	Service Building & Additions (Block I)	Retrofit
BLD-00614	Home Health (Block II) Nursing & Lab	Remain
BLD-00615	Nursing Administration (Block III)	Remain
BLD-00616	Accounting & Respiratory Therapy (IV)	Remain
BLD-00618	Main Building North (Block VI)	Remain
BLD-00619	Canopy (Block VII)	Remain
BLD-00620	OB Addition (Block VIII)	Remain
BLD-00621	MRI Facility (Block IX)	Remain
BLD-03872	Main/Utility/Tower (Block VI)	Retrofit
BLD-05504	Central Plant and Ambulance Area	Remain

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

Report Year: Beverly Hospital Montebello 2015 11441 Page:10 of 42 No data reported for Section 130061 (c)(2)(A), (B), or (C)

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

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

No data reported for 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).	Report Year:	2015	11441	Beverly Hospital		Montebello	Page:13 of 42
corresponding building sites or project numbers for buildings with a Building Resolution of "Rebuild" or "Replace" per Section 130061(c)(2)(E).	No data reported	d for whethe	er the genera	al acute care services and beds wil	be relocated to a	new, existing or retrofitted building a	and any
	corresponding b	uliding sites	s or project n	umbers for buildings with a Buildin	g Resolution of "R	ebuild or "Replace" per Section 130	JU61(C)(Z)(E).

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

ding Number:	BLD-00613 Buildi	ng Name: S	ervice Building & Add	itions (B	lock I)		
Type of Service	e Provided		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia		Obstetrical		Renal Dialysis
	IntensiveCare		Clinical Lab	Ш	Recovery		Ronal Biaryolo
	Pediatric/Adol escent		Radiological/		Newborn/ WellBaby		Outpatient Surgery
	Psychiatric Nursing		Imaging  Pharmaceutical		Emergency		Central Plant
	Obstetrical Ante/Postprtum		Dietetic		Nuclear Medicine	X	Support Services
	Intermediate Care		Administration				
	Skilled Nursing						

lding Number:		ng Name: M	ain/Utility/Tower (Blo	ck VI)				
Type of Service	e Provided	X	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
X	Nursing	X	Anesthesia		Obstetrical		Renal Dialysis	
	IntensiveCare Pediatric/Adol		Clinical Lab		Recovery	X	Outpatient	
	escent Psychiatric	X	Radiological/ Imaging		Newborn/ WellBaby		Surgery	
	Nursing	X	Pharmaceutical		Emergency		Central Plant	
	Obstetrical Ante/Postprtum	X	Dietetic		Nuclear Medicine	X	Support Services	
	Intermediate Care	X	Administration					
	Skilled Nursing							

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Report the final configuration of all bu requirements whether by retrofit or by per Section 130061(c)(5)	ildings on the hospital campus show replacement and the type of service	ving how each building will comply w e that will be provided in each gener	rith the SPC-5/NPC-4 or 5 al acute care hospital building
Building Number: BLD-00613	Building Name: Service Building	& Additions (Block I)	
Configuration: Retrofit Non-Configuration	forming building to SPC 2 and NPC	3 and remove from service by 2030	
Type of Service 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	Emergency	Central Plant
Intermediate Care	Dietetic		
Skilled Nursing	Administration	Nuclear Medicine	Support Services

L	2015 11441	Beverly Hospital			Montebello	Page:18 of 42
	whether by retrofit or b				ach building will comply be provided in each ger	
Building Numl	ber: BLD-00614	Building Name	Home Health (B	lock II) Nu	rsing & Lab	
Configuratio	n: N/A					
Type of Se	rvice Provided					_
	Nursing	S	urgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	AI AI	nesthesia		Obstetrical	Renal Dialysis
	Pediatric/Adol escent	c	linical Lab		Recovery	
	Psychiatric Nursing		adiological/ naging		Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	P	harmaceutical		Emergency	Central Plant
	Intermediate		ietetic		Lineigency	Central Flant
	Care Skilled Nursing	A	dministration		Nuclear Medicine	Support Services

eport Year:	2015 11441	Beverly Hospi	tal ————————————————————————————————————		Montebello	Page:19 of 42
	whether by retrofit or b				ach building will comply be provided in each gen	
Building Numb	ber: BLD-00615	Building Nan	ne: Nursing Admini	stration (Bl	ock III)	
Configuratio	n: 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		Emergency	Central Plant
	Intermediate		Dietetic			Central Franc
	Care Skilled Nursing		Administration		Nuclear Medicine	Support Services

Report Year: 20	11441 E	Beverly Hospi	tal		Montebello		Page:20 of 42
	ner by retrofit or by				ach building will comply wi ee provided in each genera		
Building Number:	BLD-00616	Building Nan	ne: Accounting & Resp	oiratory <sup>-</sup>	Therapy (IV)		
Configuration:	N/A						
Type of Service	Provided						
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
Inte	ensiveCare		Anesthesia		Obstetrical Recovery	☐ R	Renal Dialysis
	diatric/Adol cent		Clinical Lab		Todovory		
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	ostetrical te/Postprtum		Pharmaceutical		Emergency	Пс	Central Plant
Into Ca	ermediate		Dietetic				_
	illed Nursing		Administration		Nuclear Medicine		Support Services
		•					

eport Year: 20	15 11441 Be	verly Hospi	tal		Montebello		Page:21 of 42
	ner by retrofit or by rep				ach building will comply ve provided in each gene		
Building Number:	BLD-00618 B	uilding Nar	ne: Main Building Nort	h (Block	VI)		
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		Necovery		
	ychiatric rsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Gurgery
	stetrical		Pharmaceutical				
— Ant	te/Postprtum				Emergency		Central Plant
Inte	ermediate re		Dietetic		Nuclear Medicine		Support
Ski	illed Nursing		Administration				Services

	and the type of service th	nat will b	ach building will comply with be provided in each general a		
	ne: Canopy (Block VII)				
ided					
ided					
					<del></del>
	Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
eCare	Anesthesia		Obstetrical Page 1971		Renal Dialysis
:/Adol	Clinical Lab		Recovery		
ric	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
cal stprtum	Pharmaceutical		Emergency		Central Plant
liate	Dietetic				
lursing	Administration	Ш	Nuclear Medicine		Support Services
	/Adol	/Adol Clinical Lab  ric Radiological/ Imaging  Pharmaceutical  iate Dietetic  Administration	/Adol Clinical Lab  ric Radiological/ Imaging  Pharmaceutical  iate Dietetic  Administration	Anesthesia  Obstetrical Recovery  Adol  Clinical Lab  Radiological/ Imaging  Pharmaceutical  Emergency  Dietetic  Administration	Anesthesia  Obstetrical Recovery  Clinical Lab  Radiological/ Newborn/ WellBaby  Pharmaceutical  al stprtum  Dietetic  Administration

L	2015 11441	Beverly Hos	oital		Montebello	Page:23 of 42
	whether by retrofit or				ach building will comply be provided in each gen	
Building Numl	ber: BLD-00620	Building Na	me: OB Addition (B	lock VIII)		
Configuratio	on: N/A					
Type of Se	ervice 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			Central Plant
	Intermediate		Dietetic		Emergency	Central Plant
	Care Skilled Nursing		Administration		Nuclear Medicine	Support Services

2015 11441	Beverly Hosp	ital		Montebello		Page:24 of 42
er: BLD-00621	Building Na	me: MRI Facility (Blo	ock IX)			
: N/A						
vice 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		Pharmaceutical				
Ante/r ostpitum		Diototio		Emergency		Central Plant
Intermediate Care		Dietetic		Nuclear Medicine		Support
Skilled Nursing		Administration				Services
'l :	hether by retrofit or by 10061 (c) (5)  er: BLD-00621  N/A  vice Provided  Nursing  IntensiveCare  Pediatric/Adol escent  Psychiatric Nursing  Obstetrical Ante/Postprtum  Intermediate Care	hether by retrofit or by replacement 0061(c)(5)  er: BLD-00621 Building Nar  N/A  vice Provided  Nursing  IntensiveCare  Pediatric/Adol escent  Psychiatric Nursing  Obstetrical Ante/Postprtum  Intermediate Care	hether by retrofit or by replacement and the type of service (2061(c)(5))  er: BLD-00621 Building Name: MRI Facility (Bloom (Blo	hether by retrofit or by replacement and the type of service that will by 10061(c)(5)  er: BLD-00621 Building Name: MRI Facility (Block IX)  N/A  vice Provided  Nursing Surgical IntensiveCare Anesthesia  Pediatric/Adol escent Clinical Lab  Psychiatric Nursing Radiological/ Imaging  Obstetrical Ante/Postprtum  Intermediate Care Administration	hether by retrofit or by replacement and the type of service that will be provided in each generation (c)(5)  Building Name: MRI Facility (Block IX)  N/A  Vice Provided  Nursing Surgical Obstetrical Cesarean/Deliv  IntensiveCare Anesthesia Obstetrical Recovery  Pediatric/Adol escent Clinical Lab  Psychiatric Nursing Radiological/ Imaging Newborn/ WellBaby  Obstetrical Ante/Postprtum Emergency  Intermediate Care Nuclear Medicine  Administration	BLD-00621 Building Name: MRI Facility (Block IX)    N/A

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	nether by retrofit or by				ach building will comply w be provided in each gener		
Building Number	r: BLD-03872	Building Nar	ne: Main/Utility/Tower	(Block \	<b>/</b> I)		
Configuration:	Retrofit Non-Conf	orming buildin	g to SPC 2 and NPC 3	and rem	ove from service by 2030		
Type of Serv	ice Provided						
	Nursing		Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy
	IntensiveCare		Anesthesia		Obstetrical Recovery	R	enal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		outpatient urgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	c	entral Plant
	Intermediate Care		Dietetic		Nuclear Medicine		Support
	Skilled Nursing		Administration				Services

port Year:	2015 11441	Beverly Hos	pital 		Montebello		Page:26 of 42
	whether by retrofit or				ach building will comply be provided in each gen		
Building Numb	er: BLD-05504	Building Na	ame: Central Plant a	nd Ambular	nce Area		
Configuration	n: N/A						
Type of Ser	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		<b>.</b>		Octobel Plant
	Intermediate		Dietetic	Ш	Emergency	Ш	Central Plant
	Care		Administration		Nuclear Medicine		Support Services
	Skilled Nursing						

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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	Building Number: BLD-00614 Building Name: Home Health (Block II) Nursing & Lab												
Type of Service Provided													
X	Nursing	Inpatient Beds	64		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	IntensiveCare	Inpatient Beds	0		Anesthesia								
X	Pediatric/Adol escent	Inpatient Beds	15	X	Clinical Lab		Obstetrical Recovery	F	Renal Dialysis				
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
X	Obstetrical Ante/Postprtum	Inpatient Beds	18		Pharmaceutical		Emergency		Central Plant				
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine	X	Support Services				
	Skilled Nursing	Inpatient Beds	0	X	Administration								
	Total Beds this Building		97										

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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-00615 Building Name: Nursing Administration (Block III)													
Type of Service Provided													
Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		ehabilitation erapy					
IntensiveCare	Inpatient Beds	0		Anesthesia									
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	Re	enal Dialysis					
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby		utpatient Irgery					
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	Ce	entral Plant					
Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine	X Su Se	apport ervices					
Skilled Nursing	Inpatient Beds	0		Administration									
Total Beds this Building		0											

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)														
Buildi	Building Number: BLD-00616 Building Name: Accounting & Respiratory Therapy (IV)													
Туре	Type of Service Provided													
	Nursing	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		ehabilitation nerapy					
	IntensiveCare	Inpatient Beds	0		Anesthesia									
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	R	enal Dialysis					
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby	OS	utpatient urgery					
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency	C	entral Plant					
	Intermediate Care	Inpatient Beds	0		Dietetic		Nuclear Medicine	X Si	upport ervices					
	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-00618 Building Name: Main Building North (Block VI)												
Type of Service Provided												
Nursing	Inpatient Beds	0	Surgio	cal	Obstetrical Cesarean/Deliv	Reha Thera	bilitation apy					
X Intensive	Care Inpatient Beds	25	Anesti	hesia								
Pediatric,	/Adol Inpatient Beds	0	Clinica	al Lab	Obstetrical Recovery	Rena	l Dialysis					
Psychiatr Nursing	ric Inpatient Beds	0	Radio Imagir	logical/ ng	Newborn/ WellBaby	Outpa Surge						
Obstetric Ante/Pos		0	Pharm	naceutical X	Emergency	Centi	al Plant					
Intermed Care	iate Inpatient Beds	0	Dieteti	ic	Nuclear Medicine	X Supp Servi	ort ces					
Skilled N	ursing Inpatient Beds	0	Admin	istration								
Total Bed Building	ds this	25										

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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-00619 Building Name: Canopy (Block VII)														
Type of Ser	Type of Service Provided													
Nursin	g	Inpatient Beds	0		Surgical		Obstetrical Cesarean/Deliv		habilitation erapy					
Intensi	veCare	Inpatient Beds	0		Anesthesia									
Pediati escent	ric/Adol	Inpatient Beds	0		Clinical Lab		Obstetrical Recovery	Re	nal Dialysis					
Psychi Nursin		Inpatient Beds	0		Radiological/ Imaging		Newborn/ WellBaby	Ou Sui	tpatient rgery					
Obstet Ante/P	rical ostprtum	Inpatient Beds	0		Pharmaceutical		Emergency	Ce	ntral Plant					
Intermo	ediate	Inpatient Beds	0		Dietetic		Nuclear Medicine	Su <sub>l</sub> Sei	oport rvices					
Skilled	Nursing	Inpatient Beds	0		Administration									
Total B Buildin	Beds this g		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	0-00620	Building Nam	e: OI	B Addition (Block VIII)							
Type of Service Provided												
N	ursing	Inpatient Beds	0		Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy			
X Int	tensiveCare	Inpatient Beds	10		Anesthesia							
	ediatric/Adol scent	Inpatient Beds	0		Clinical Lab	X	Obstetrical Recovery		Renal Dialysis			
	sychiatric ursing	Inpatient Beds	0		Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery			
	bstetrical nte/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency		Central Plant			
	itermediate are	Inpatient Beds	0		Dietetic		Nuclear Medicine		Support Services			
Sk	killed Nursing	Inpatient Beds	0		Administration							
	otal Beds this uilding		10									

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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-00621 Building Name: MRI Facility (Block IX)												
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	X	Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery				
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical		Emergency		Central Plant				
Intermediate Care	Inpatient Beds	0		Dietetic	X	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-05504 Building Name: Central Plant and Ambulance Area												
Type of Service Provided												
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/De		bilitation apy						
IntensiveCa	re Inpatient Beds	0	Anesthes	ia								
Pediatric/Ad escent	ol Inpatient Beds	0	Clinical La	Obstetrical Recovery	Renal	l Dialysis						
Psychiatric Nursing	Inpatient Beds	0	Radiologi Imaging	cal/ Newborn/ WellBaby	Outpa Surge							
Obstetrical Ante/Postprt	Inpatient tum Beds	0	Pharmace	eutical Emergency	X Centr	al Plant						
Intermediate Care	e Inpatient Beds	0	Dietetic	Nuclear Medicine	Suppo Service							
Skilled Nurs	ing Inpatient Beds	0	Administra	ation								
Total Beds t Building	his	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) Home Health (Block II) Nursing & Lab **Building Number:** BLD-00614 **Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient 64 Inpatient Inpatient Inpatient Inpatient Inpatient 197 0 0 0 0 Days Bed Days Bed Bed Days Perinatal (Exclude Newborn / GYN) **Skilled Nursing** Burn Inpatient 18 Inpatient 2218 Inpatient Inpatient Inpatient Inpatient Days Days Bed Bed Bed Days **Intensive Care Newborn Intermediate Care** Pediatric Nursery Inpatient Inpatient 1771 15 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 97 97

Report Year: 2015 11441 **Beverly Hospital** Montebello Page:36 of 42 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-00615 Nursing Administration (Block III) **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 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 0 0 Bed Days Bed Days 0 0

Report Year: 2015 11441 **Beverly Hospital** Montebello Page:37 of 42 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-00616 Accounting & Respiratory Therapy (IV) **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 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 0 0 Bed Days Bed Days 0 0

Report Year: 2015 11441 **Beverly Hospital** Montebello Page:38 of 42 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-00618 Main Building North (Block VI) **Building Number: Building Name:** Medical / Surgical (Include GYN) **Acute Respiratory Care Acute Psychiatric** Inpatient Inpatient Inpatient Inpatient 0 Inpatient Inpatient Days Days Bed Days 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 Inpatient 0 Inpatient Inpatient Inpatient Inpatient 0 Bed Days Bed Days Bed Days Int. Care / Developmentally Rehabilitation **Intensive Care** Disabled Center Inpatient 12 Inpatient 2499 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 13 2499 Inpatient Inpatient Inpatient Inpatient 0 0 Bed Days Bed Days 25 25

Report Year: 2015 11441 **Beverly Hospital** Montebello Page:39 of 42 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-00619 Canopy (Block VII) **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 11441 **Beverly Hospital** Montebello Page:40 of 42 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-00620 OB Addition (Block VIII) **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 10 Inpatient 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 10 10

Report Year: 2015 11441 **Beverly Hospital** Montebello Page:41 of 42 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-00621 MRI Facility (Block IX) **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 11441 **Beverly Hospital** Montebello Page:42 of 42 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-05504 Central Plant and Ambulance Area **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 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 0 0 Bed Days Bed Days 0 0