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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:	Facility Number: 10475						
Facility Name:	West Anaheim Medical Center						
Address:	3033 West Orange Ave.						
City:	Anaheim						
Hospital Owner/Lice	nsee: Prime Healthcare Anaheim, LLC						
Year of Repo	orting: 2016						
Contact 1 e-mail Ado	Confidential data left blank intentionally.]						
Contact 2 e-mail Ado	dress: [Confidential data left blank intentionally.]						
Contact 3 e-mail Add	ress:: [Confidential data left blank intentionally.]						
Name of Subr	nitter: Puchlik Design Associates						
Submission	Date: 10/31/2016 9:35:12 AM						

eport Y	'ear: 2016 10475	West Anaheim Medical Center		Anaheim		Page:2 of 23
For buildings For buildings which are planned for rebuild, retrofit or replacement this report shall identify; Whether the hospital owner intends to ebuild, retrofit or replace the building to SPC2, SPC3, SPC4, SPC4D or SPC5 per 130061(c)(1)(A). The deadline, as described in Section 30060 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)						
dg.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
D- 141	Main Hospital	3033 West Orange Ave.	Retrofit	SPC2	01/01/2016	07/01/2016
HPD F	DD SB499 Report	Data Last Update: 10/26/2016	Submissio	n Date: 10/31/2016	Printed: 1	1/2/2016 6:30 AM

Projected Status CEQA Review 06/01/2016 FIEL No
06/01/2016 FIEL No

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Provide the number of inpatien	Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)					
Building Number: BLD-02441	Building Name: M	ain Hospital				
Type of Service Provided						
X Nursing Inpatien Beds	nt 33 Inpatient 5049 Days		bstetrical ecovery			
IntensiveCare Inpatien Beds	nt 0 Inpatient Days 0		ewborn/ /ellBaby			
X Pediatric/Adol Inpatien escent Beds	nt 22 Inpatient Days 3331	X Clinical Lab	mergency			
Psychiatric Inpatien Nursing Beds	nt 0 Inpatient Days 0	Imaging	uclear ledicine			
Obstetrical Inpatien Ante/Postprtum Beds	nt 0 Inpatient Days 0		ehabilitation herapy			
Intermediate Inpatier Care Beds	nt 0 Inpatient Days 0		enal Dialysis			
Skilled Nursing Inpatien Beds	nt 0 Inpatient Days 0		utpatient urgery			
	Total Beds this <b>55</b> Building	Obstetrical Cesarean/Deliv	entral Plant			
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Provide the number of Inpatient beds	Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)						
Building Number: BLD-02441	Building Name: Main Hospital						
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 33 Inpatient 5049 Bed Days	Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days					
Perinatal (excluse Newborn / GYN)	Burn	Skilled Nursing					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days					
Pediatric	intensive Care Newborn Nursery	Intermediate Card					
Inpatient 22 Inpatient 3331 Bed Days	Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days					
Intensive Care	Rehabilitation Center	Int. Care / development Disabled					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0 Inpatient 0 Inpatient 0 Bed Days					
Coronary Care	Chemical Dependency	Total Beds this Total Beds this Building Per Building Per Unit Service					
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient Bed Days	0 55 55					
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For all building	is at the facility, indicate which ones are scheduled for ge	eneral acute service removal.	
Building Number	Building Name	Building to be Removed / Replaced / Rebuilt	
BLD-02441	Main Hospital	Retrofit	
BLD-02675	Phase I - Tower Addition	Remain	
BLD-02886	Phase I - 1 Story Addition	Remain	

BLD-03118

Entry Canopy

Remain

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No proposed new buildings to be constructed at this or another site.

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No data reporte	d for Sectio	n 130061 (c	)(2)(A) , (B), or (C)			

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lo data reporte	ed for Sectio	n 130061(o	e)(2)(D).		

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lo data reported for Sectio	n 130061(c	e)(2)(D).		

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No data reporte	d for wheth	er the gene	ral acute care services and l numbers for buildings with a	beds will be relocated to a Building Resolution of "	a new, existing or r	etrofitted building a	and any 061(c)(2)(E)

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lo data reporte	ed for Section	n 130061(c	)(3).		

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	Report any general acute care hospital inpatient service that is provided in any general acute care hospital building that is rated SPC-1 per Section 130061(c)(4)								
Building Number:	BLD-02441 Buildin	g Name: Main Hospital							
Type of Service	e Provided								
		X Surgical	Obstetrical Cesarean/Deliv	X Rehabil Therap					
X	Nursing	X Anesthesia			Netroio				
	IntensiveCare	X Clinical Lab	Obstetrical Recovery	Renal D	JIAIYSIS				
X	Pediatric/Adol escent		Newborn/ WellBaby	X Outpation					
	Psychiatric Nursing	Imaging		_					
	J.	X Pharmaceutical	X Emergency	X Central	Plant				
	Obstetrical Ante/Postprtum	X Dietetic	X Nuclear Medicine	X Suppor Service	t S				
	Intermediate Care	X 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 acute care hospital building per Section 130061(c)(5)								
Building Number:	BLD-02441	Building Nar	ne: Main Hospital					
Configuration: Retrofit Non-Conforming building to SPC 2 and NPC 3 and remove from service by 2030								
Type of Service	Provided							
X Nu	ırsing	X	Surgical		Obstetrical Cesarean/Deliv		ehabilitation herapy	
	ensiveCare	X	Anesthesia		Obstetrical Recovery	R	enal Dialysis	
	ediatric/Adol cent	X	Clinical Lab		Recovery			
	ychiatric Irsing	X	Radiological/ Imaging		Newborn/ WellBaby		utpatient urgery	
	ostetrical ite/Postprtum	X	Pharmaceutical	X	Emergency	X C	entral Plant	
Inte Ca	ermediate	X	Dietetic					
	illed Nursing		Administration	X	Nuclear Medicine		upport ervices	
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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-02675	Building Na	me: Phase I - Tower A	ddition					
Configuration:	N/A								
Type of Service	e Provided								
X Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
X Int	tensiveCare		Anesthesia		Obstetrical Recovery	X	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						
	killed 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-02886	Building Na	me: Phase I - 1 Story A	Addition					
Configuration:	N/A								
Type of Service	e Provided								
	ursing		Surgical		Obstetrical Cesarean/			Rehabilitation Therapy	
Int	tensiveCare		Anesthesia		Obstetrical Recovery	I		Renal Dialysis	
	ediatric/Adol scent		Clinical Lab		Receivery				
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby			Outpatient Surgery	
	ostetrical hte/Postprtum		Pharmaceutical		Emergenc	y		Central Plant	
	termediate are		Dietetic						
	killed Nursing	X	Administration		Nuclear M	edicine	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-03118	Building Na	me: Entry Canopy						
Configuration:	N/A								
Type of Service	Provided								
Nu	ırsing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy		
	ensiveCare		Anesthesia		Obstetrical Recovery		Renal Dialysis		
-	diatric/Adol cent		Clinical Lab		Recovery				
	ychiatric Irsing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery		
	ostetrical te/Postprtum		Pharmaceutical		Emergency		Central Plant		
	ermediate		Dietetic						
Ca	illed Nursing		Administration		Nuclear Medicine		Support Services		
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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, SPC-4, AD and SPC-5 per Section 130061(e)							
Building Number: BLI	D-02675	Building N	lame: Ph	ase I - Tower Addition			]
Type of Service Prov	<u>vided</u>						
X Nursing	Inpatient Beds	114		Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
X IntensiveCare	Inpatient Beds	20		Anesthesia			
Pediatric/Adol	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	X Rei	nal Dialysis
Psychiatric X Nursing	Inpatient Beds	30		Radiological/ Imaging	Newborn/ WellBaby		patient gery
Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	Cer	ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine	X Sup Ser	oport vices
Skilled Nursing	Inpatient Beds	0	X	Administration			
Total Beds this Building		164					
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	tion on the number per Section 130061		by type of Service provided by	v buildings that are classified	as SPC-2, SI	PC-3, SPC-4, SPC-
Building Numbe	er: BLD-02886	Building N	Name: Phase I - 1 Story Add	ition		]
Type of Servio	ce Provided					
Nursing	Inpatient Beds	0	Surgical	Obstetrical Cesarean/Deliv		nabilitation erapy
Intensive	Care Inpatient Beds	0	Anesthesia			
Pediatric, escent	/Adol Inpatient Beds	0	Clinical Lab	Obstetrical Recovery	Rer	nal Dialysis
Psychiatr Nursing	ric Inpatient Beds	0	Radiological/ Imaging	Newborn/ WellBaby		tpatient gery
Obstetric Ante/Pos		0	Pharmaceutical	Emergency	Cer	ntral Plant
Intermed Care	liate Inpatient Beds	0	Dietetic	Nuclear Medicine		oport vices
Skilled N	lursing Inpatient Beds	0	Administration			
Total Beo Building	ds this	0				
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Include information o 4D and SPC-5 per So			by type of S	Service provided by b	uildings that are classified	l as SPC-2, S	PC-3, SPC-4, SPC-
Building Number: B	LD-03118	Building N	lame: En	try Canopy			]
Type of Service Pre	ovided						
Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv		habilitation erapy
IntensiveCare	Inpatient Beds	0		Anesthesia			
Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Re	nal Dialysis
Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby		itpatient rgery
Obstetrical Ante/Postprtur	Inpatient n Beds	0		Pharmaceutical	Emergency		ntral Plant
Intermediate	Inpatient Beds	0		Dietetic	Nuclear Medicine		pport rvices
Skilled Nursing	l Inpatient Beds	0		Administration			
Total Beds this Building	;	0					
OSHPD FDD SB499 Repo	t Data	a Last Undate	10/26/2016	Submission	Date: 10/31/2016	Printed: 11/2/2	2016 6:30 AM
Care Skilled Nursing Total Beds this	Beds Inpatient Beds	0	10/26/2016	Administration	L Medicine		rvices

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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, SPC-4D and SPC-5 per Section 130061(e)								
Building Number: BLD-026	675 Buildi	ng Name: Phase I - Tower Addition						
Medical / Surgical (Include G	SYN)	Acute Respiratory Care	Acute Psychiatric					
Inpatient 114 Inpati Bed Days		Inpatient 0 Inpatient 0 Bed Days	Inpatient <u>30</u> Inpatien Bed Days	at 9009				
Perinatal (Exclude Newborn	/ GYN)	Burn	Skilled Nursing					
Inpatient 0 Inpati Bed Days		Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	it 0				
Pediatric		Intensive Care Newborn Nursery	Intermediate Care					
npatient 0 Inpati Bed Days		Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	nt 0				
ntensive Care		Rehabilitation Center	Int. Care / Developmentally Disabled					
npatient 10 Inpati Bed Days		Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatien Bed Days	ot O				
Coronary Care		Chemical Dependency		l Beds this ling Per				
npatient 10 Inpati Bed Days		Inpatient 0 Inpatient 0 Bed Days	Unit Serv	164				
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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, SPC-4D and SPC-5 per Section 130061(e)								
Building Number: BLD-02886 Bui	ding Name: Phase I - 1 Story 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						
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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, SPC-4D and SPC-5 per Section 130061(e)			
Building Number: BLD-03118 Build	Iing Name: Entry Canopy		
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0
Perinatal (Exclude Newborn / GYN)	Burn	Skilled Nursing	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0
Pediatric	Intensive Care Newborn Nursery	Intermediate Care	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt 0
Intensive Care	Rehabilitation Center	Int. Care / Developmentally Disabled	
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatier Bed Days	nt O
Coronary Care	Chemical Dependency	Building Per Build	l Beds this ding Per
Inpatient 0 Inpatient 0 Bed Days	Inpatient 0 Inpatient 0 Bed Days	Unit Serv	0
OSHPD FDD SB499 Report Data Last Update: 10/26/2016 Submission Date: 10/31/2016 Printed: 11/2/2016 6:30 AM			