*	
- WWW.	

## 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:	12180		
Facility Name:	West C	ovina Medical Center	
Address:	725 S.	Orange Ave.	
City:	West C	ovina	
Hospital Owner/Lice	ensee:	West Covina Medical Center Inc.	
Year of Reporting:		2016	
Contact 1 e-mail Address:		[Confidential data left blank intentionally.]	
Contact 2 e-mail Address:		[Confidential data left blank intentionally.]	
Contact 3 e-mail Address::		[Confidential data left blank intentionally.]	
Name of Sub	omitter:	Gerald Wallman	
Submissior	n Date:	9/26/2016 10:46:56 AM	

Report `	Year: 2016 12180	West Covina Medical Center		West Covina		Page:2 of 16			
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, SPC4D 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- 02176	Hospital Building / Additions	725 S. Orange Ave.	Retrofit	SPC2	01/01/2020	10/30/2019			

Report Year:         2016         12180	West Covina Medical Center		West	Covina		Page:3 of	16		
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-02176	Hospital Building / Additions		Retrofit/Re Project:	eplacement	No				
Facility Project Sub Number Number Num Scop	e	Date In	Plan Approved Date	Projected Start Date	Projected Completion Date	Status	CEQA Review		
12180 S131854-19 0 -00		8/22/2013	11/26/2013 12:00:00 AM	02/17/2013	03/31/2013	CLOS	No		
OSHPD FDD SB499 Report	Data Last Update: 09/26/2016	Submis	sion Date: 09/2	26/2016	Printed: 10/6/20	16 1:36 PM			

Report Year:         2016         12	2180 West Covina Medical Center	West Covina	Page:4 of 16					
Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)								
Building Number: BLD-02	2176 Building Name:	Hospital Building / Additions						
Type of Service Provided	1							
X Nursing Inpa Bed	atient 13 Inpatient 2235 ds Days		ostetrical ecovery					
IntensiveCare Inpa Bed	atient 0 Inpatient Days 0		ewborn/ ellBaby					
Pediatric/Adol Inpa escent Bed	atient 0 Inpatient Days 0 ds	X Clinical Lab	nergency					
Psychiatric Inpa Nursing Bed	atient 0 Inpatient Days 0		iclear edicine					
Obstetrical Inpa Ante/Postprtum Bed	atient 0 Inpatient Days 0 ds		habilitation erapy					
Intermediate Inpa Care Bed	atient 0 Inpatient Days 0 ds		enal Dialysis					
X Skilled Nursing Inpa Bed	atient 33 Inpatient Days 9922	Services Su	itpatient rgery					
	Total Beds this <b>46</b> Building	Obstetrical Cesarean/Deliv	entral Plant					
OSHPD FDD SB499 Report	Data Last Update: 09/26/2016	Submission Date: 09/26/2016 Printed	d: 10/6/2016 1:36 PM					

Report Year:         2016         12180         W	/est Covina Medical Center	West Covina Page:5 of 16							
Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)									
Building Number: BLD-02176	Building Name: Hospital Building / Ad	dditions							
Medical / Surgical (Include GYN)	Acute Respiratory Care	Acute Psychiatric							
Inpatient 13 Inpatient 2235 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 33 Inpatient 9922 Bed Days							
Pediatric	intensive Care Newborn Nursery	Intermediate Card							
Inpatient 0 Inpatient 0 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 46 46							
OSHPD FDD SB499 Report Dat	a Last Update: 09/26/2016 Submissio	on Date: 09/26/2016 Printed: 10/6/2016 1:36 PM							

port Year: 2	2016 12180 West Covina Med	dical Center	West Covina	Page:6 of 16
or all buildings a	at the facility, indicate which ones are	scheduled for general acute servic	e removal.	
Building Number	Building Name		Building to be Removed / Replaced / Rebuilt	
BLD-02176	Hospital Building / Additions		Retrofit	]
HPD FDD SB499	Report Data Last Update:	09/26/2016 Submission Da	te: 09/26/2016 Printed:	10/6/2016 1:36 PM

Report Year:	2016	12180	West Covina Medical Center	West Covina	Page:7 of 16
No proposed new b	uildings	to be constr	ructed at this or another site.		

Report Year: 2016	12180	West Covina Medical Center	West Covina	Page:8 of 16
No data reported for Secti	on 130061 (	c)(2)(A) , (B), or (C)		

Report Year:	2016	12180	West Covina Medical	Center	West Covina	Page:9 of	16
No data reporte	ed for Sectio	n 130061(c	)(2)(D).				

Report Year:	2016	12180	West Covina Medical	Center	West Covina	Page:10 of 16
No data reported	l for Sectio	n 130061(c	)(2)(D).			

Report Year:	2016	12180	West Covina Medical Cent	er	West Covina	Page:11 of 16
No data reported	d for wheth wilding site	er the gener	al acute care services and b numbers for buildings with a	beds will be relocated to a Building Resolution of "F	new, existing or retrofitted	building and any Section 130061(c)(2)(E).
		e er projeer.				

Report Year:	2016	12180	West Covina Medical Center	West Covina	Page:12 of 16		
No data reported for Section 130061(c)(3).							

Report Year: 201	16 12180 West C	covina Medical Center	West Covina		Page:13 of 16				
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-02176 Building Name: Hospital Building / Additions									
Type of Service	e Provided								
		X Surgical	Obstetrical Cesarean/Deliv	Rehabi Therap					
X	Nursing	X Anesthesia		Repair	Dialysis				
	IntensiveCare	X Clinical Lab	Obstetrical Recovery		Jiaiysis				
	Pediatric/Adol escent	X Radiological/	Newborn/ WellBaby	X Outpati Surger					
	Psychiatric Nursing	Imaging X Pharmaceutical	Emergency	X Central	Plant				
	Obstetrical Ante/Postprtum	X Dietetic	Nuclear Medicine	Suppor Service	t es				
	Intermediate Care	X Administration							
X	Skilled Nursing								
OSHPD FDD SB499 Report Data Last Update: 09/26/2016 Submission Date: 09/26/2016 Printed: 10/6/2016 1:36 PM									

Report Year:         2016         12180	West Covina Medical Center	West Covina		Page:14 of 16				
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-02176       Building Name:       Hospital Building / Additions         Configuration:       N/A								
Configuration: N/A Type of Service Provided								
Nursing	Surgical	Obstetrical Cesarean/Deliv	Rehal Thera	bilitation Ipy				
IntensiveCare	Anesthesia	Obstetrical	Rena	l Dialysis				
Pediatric/Adol escent	Clinical Lab	Recovery						
Psychiatric Nursing	Radiological/ Imaging	Newborn/ WellBaby	Outpa Surge					
Obstetrical Ante/Postprtum	Pharmaceutical	Emergency	Centr	al Plant				
Intermediate Care	Dietetic	Nuclear Medicine		ort				
Skilled Nursing	Administration		Supp Servi					
OSHPD FDD SB499 Report	Data Last Update: 09/26/2016	Submission Date: 09/26/2016	Printed: 10/6/20	 016 1:36 PM				

Report Year:	2016	12180	West Covina Medical Center	West Covina	Page:15 of 16
No data reported	I for Sectio	on 130061(€	9)		

Report Year:	2016	12180	West Covina Medical Co	enter	West Covina		Page:16 of 16	
No data reported for Section 130061(e) .								