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 Name:	11776 Kindred Hospital - San Gabriel Valley						
Address:	845 N. L	45 N. Lark Ellen Ave.					
City:	West Co	ovina					
Hospital Owner/Lic	ensee:	Southern California Specialty Care,Inc					
Year of Reporting:		2017					
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 Submitter:		William Alexander, Facility Representative					
Submission Date:		10/9/2017 2:19:25 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, 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- 01722	Building I (Acute Care	845 N. Lark Ellen Ave.	Retrofit	SPC2	01/01/2020	02/15/2019

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Provide the number of inpatient beds and patient days per type of service per building per Section 130061(c)(1)(F)							
Building Number: Bl	_D-01722	Building Name:	Building I (Acute Care Facility)				
Type of Service Provided							
X Nursing	Inpatient Beds	70 Inpatient 21684 Days	X Surgical	Obstetrical Recovery			
X IntensiveCare	Inpatient Beds	6 Inpatient Days 2028	X Anesthesia	Newborn/ WellBaby			
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	X Clinical Lab	Emergency			
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging	X Nuclear Medicine			
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Pharmaceutical X Dietetic	Rehabilitation Therapy			
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	X Administration	X Renal Dialysis			
Skilled Nursing	Inpatient	0 Inpatient Days 0	X Support Services	Outpatient Surgery			
	Beds	Total Beds this Building 76	Obstetrical Cesarean/Deliv	X Central Plant			

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Provide the number of Inpatient beds and patient days per type of unit per building per Section 130061(c)(1)(F)							
Building Number:	BLD-01722 Buil	ding Name: Build	ding I (Acute Care Facility)				
Medical / Surgical	(Include GYN)	Acute Respiratory	/ Care	Acute Psychiatric			
Inpatient 70 Bed	Inpatient 2168 Days 4	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Pediatric		intensive Care Ne Nursery	wborn	Intermediate Card			
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Intensive Care		Rehabilitation Center		Int. Care / develop Disabled	ment		
Inpatient 6 Bed	Inpatient 2028 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days		
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service		
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	76	76		

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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-01722	Building I (Acute Care Facility)	Retrofit

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Report Year: Kindred Hospital - San Gabriel Valley West Covina 2017 11776 Page:9 of 16 No data reported for Section 130061(c)(2)(D).

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No data reporte	ed for whethe	er the genera	al acute care services and	d beds will be relocated to a	new, existing or retrofitted building a ebuild" or "Replace" per Section 130	and any
oorrooporiding	ballaling offoc	or project in	iamboro for ballanigo with	ra Ballallig Rosolation of Te	obalia di Ropiado poi occioni rec	001(0)(2)(2).

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Building Number: BLD-01722 Building Name: Building I (Acute Care Facility)							
Type of Service	e Provided		Surgical		Obstetrical		Rehabilitation
			Surgical	Ш	Cesarean/Deliv		Therapy
X	Nursing	X	Anesthesia				
X	IntensiveCare				Obstetrical Recovery	X	Renal Dialysis
	Pediatric/Adol	X	Clinical Lab				Outpatient
	escent	X	Radiological/		Newborn/ WellBaby	Ш	Surgery
	Psychiatric		Imaging		•		
	Nursing	X	Pharmaceutical		Emergency	X	Central Plant
	Obstetrical Ante/Postprtum			Х	Nuclear	X	Support
	, uncon Corpitalin	X	Dietetic		Medicine		Services
	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-01722 Building Name: Building I (Acute Care Facility)								
Configuration: Retrofit Non-Co	onforming building to SPC 2 and NPC	3 and remove from service by 203	0					
Type of Service Provided								
X Nursing	X Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy					
X IntensiveCare	X Anesthesia	Obstetrical	X Renal Dialysis					
Pediatric/Adol escent	X Clinical Lab	Recovery						
Psychiatric Nursing	X Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery					
Obstetrical Ante/Postprtum	X Pharmaceutical	Emergency	X Central Plant					
Intermediate Care	X Dietetic	X Nuclear Medicine	X Support					
Skilled Nursing	X Administration	A Madical Medicine	Services					

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