Memo to the Planning Commission

HEARING DATE: JUNE 9. 2011

1650 Mission St. Suite 400 San Francisco, CA 94103-2479

Reception: 415.558.6378

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Project Name: CPMC LONG-RANGE DEVELOPMENT PROGRAM

Project Sponsor: Geoffrey Nelson, CPMC

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June 2, 2011

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Outlined in this memo is a list of CPMC's required land use approvals at all three campuses, responses to the questions raised by Commissioners during the May 12, 2011 informational hearing on CPMC's proposed LRDP project, and an overview of the Development Agreement topics that will be presented by City staff at the June 9, 2011 informational hearing.

REQUIRED LAND USE APPROVALS

Date:

Case No.:

1. Van Ness and Geary Campus

- a. General Plan Amendments ("M"):
 - i. To support a high density medical center consistent with the City's Better Streets Plan – at the transit nexus of Van Ness & Geary
 - ii. Conforming Map Amendments, including height increase to 265'-0"
- b. General Plan Referral ("R"):
 - i. General Plan Referral & Major Encroachment Permit (tunnel, reconfiguration, sidewalk widening, underground oxygen tanks)
- Creation of Van Ness Medical Subdistrict within existing Van Ness SUD: ("T")
 - i. FAR: from 7:1 to 9:1 at hospital; 7:1 to 7.5:1 at medical office building (MOB)
 - ii. Allow canopy projection over street (exceeds §136 allowances)
 - iii. Street Frontages: allow minor deviations from 145.1 through a CU
 - iv. Loading standards: reduce required height clearance from 14' to 12' (MOB only)
 - v. Bulk modifications through a CU

d. Planning Code Map Amendments ("Z"):

- i. Height and Bulk Map (HT02): change from 130-V to 265-V at hospital site
- ii. Special Use District (SUD) Map (SU02): conforming map amendment

e. Conditional Use Authorization ("C"):

- i. Medical Center over 6,000sf in RC-4
- ii. Building over 50'-0" in VNSUD

- iii. Residential Demolition (5 dwelling units)
- iv. Street frontage modifications active uses, curb cut width
- v. Wind >11mph in VNSUD
- vi. Bulk modifications
- vii. Modify 3:1 VNSUD housing requirement
- f. Large Project Authorization Office Allocation ("B")
- g. Misc. Approvals:
 - i. Permit to Convert (demolition of twenty residential hotel units)
 - ii. Tunnel CalTrans
 - iii. Various streetscape/pedestrian improvements (MTA, DPW)
 - iv. Lot mergers

2. St. Luke's Campus

- a. General Plan Referral ("R"):
 - i. San Jose Street Vacation
 - ii. Major Encroachment Permits (canopy, other streetscape)
- b. Creation of St. Luke's Special Use District ("T"):
 - i. FAR: from 2.25:1 to 2.5:1
 - ii. Allow canopy projection over street (exceeds §136 projection)
- c. Planning Code Map Amendments ("Z"):
 - i. Height and Bulk Map (HT07): change from 105-E/65-A to 105-E for entire campus.
 - ii. SUD Map (SU07): conforming map amendment to reflect new SUD
- d. Conditional Use Authorization ("C"):
 - i. Medical Center in RH-2
 - ii. Building over 40'-0" in RH-2
 - iii. PUD Modification
 - 1. Rear Yard
 - 2. Parking
 - 3. Bulk
- e. GP Amendments ("M"):
 - i. Conforming Map Amendments (Ht. Map 4)
- f. Large Project Authorization Office Allocation ("B")
- g. Misc. Approvals:
 - i. Street vacation and conveyance
 - ii. Lot Merger
 - iii. Major Encroachment Permits

3. Davies Campus

- a. Conditional Use Authorization ("C"):
 - i. Amend existing CU (PUD) to include the proposed
 - ii. Authorize rear yard and independently accessible parking exceptions.

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- b. General Plan Referral ("R"):
 - i. Sidewalk Improvements (curb bulbs, etc.)
- c. Misc. Approvals:
 - i. Encroachment permits
 - ii. Streetscape improvements

RESPONSES TO COMMISSION QUESTIONS

1. Q: Show how the proposed project at Van Ness & Geary compares with the Van Ness SUD requirements. (A graphic comparison will be provided at the public hearing on June 9, 2011.)

	VNSUD § 243 Requirements	CPMC Proposal	
Use	CU required for Medical Center	CU proposed	
Height	130'-0" @ both hospital & MOB	Increase to 265'-0" @ hospital site	
Bulk	"V" Bulk Designation (110' x 140')	Modification from Bulk dimensions through SUD and CU	
FAR	7.0:1	9.0:1 (hospital); 7.5:1 (MOB)	
Housing	3sf residential: 1sf non-residential; =1,376,187sf residential	CU to waive housing requirement City's "asks" includes an in-lieu fee	
Res. Demo	CU required	CU proposed City's "asks" include payment for demolition of 5 dwelling units	
Wind	11mph pedestrians, existing exceedances must be reduced	New intersections w/11mph; not all existing exceedances reduced (no increase in total number of exceedances)	

2. Q: Provide an analysis of the Van Ness & Geary Campus' Code-compliance, as it relates to off-street parking.

A: As outlined in the chart below, CPMC is proposing 1,227 parking spaces in an underground garage at the new Van Ness & Geary Medical Center. Specifically, there will be 685 spaces beneath the hospital on the west side of Van Ness Avenue (172 of which are off-site parking dedicated to 1375 Sutter Street – the conversion from office to medical office results in an increased parking requirement) and 542 spaces beneath the medical office building on the east side of Van Ness Avenue. The Code allows up to 1,323 off-street parking spaces, and the EIR identified a parking demand of 1,389 spaces. **The project is Code-compliant as it relates to off-street parking.**

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Van Ness & Geary Medical Center	Permitted by Code	EIR Parking Demand
1,227 spaces	1,323 spaces	1,389 spaces

3. Q: Compare the parking capacity of the existing Cathedral Hill Hotel to the proposed Van Ness & Geary hospital.

Cathedral Hill Hotel & Office Building	Van Ness & Geary Hospital
382,000 gsf	882,962 gsf
402 guest rooms + 128 office suites	555 patient rooms
405 parking spaces	513 parking spaces

4. Q: Compare the existing and proposed medical service lines at St. Luke's Campus.

A: See the attached Exhibit A, "St. Luke's Campus Service Line Comparison 4/4/2011"

5. Q: Compare the existing medical services lines at the Pacific & California Campuses to the proposed medical service lines at the proposed Van Ness & Geary Campus.

A: The service lines currently available at the California and Pacific Campuses would be merged into the proposed Cathedral Hill Campus or would remain at their existing locations, with the exception of the ALS/Neurosciences-related programs, which would move from the Pacific Campus to the proposed Neurosciences Institute building at the Davies Campus. The service lines that would remain at either the California or Pacific Campuses include inpatient psychiatric and outpatient oncology at Pacific, and skilled nursing at California until it is replaced at a later date elsewhere in the community. Some physician offices would remain at the Pacific or California Campus, depending on individual physician preferences to relocate along with their relevant service line. The merger would eliminate some physical redundancies, such as duplication in admitting, general support functions (e.g., environmental services, linen, food and nutrition, etc.), and clinical support functions (e.g., inpatient pharmacy).

6. Q: What is the plan for the existing inpatient Psychiatric services?

A: There are currently 18 inpatient psychiatric beds as well as outpatient psychiatric services provided at CPMC, all at the Pacific Campus. CPMC plans to retain these services at the Pacific Campus as part of CPMC's Long Range Development Plans.

7. Q: What are the changes that have been made to the Davies project since the previous approval?

A: There are two very minor changes that have occurred since the Commission's previous approval of the Davies Neurosciences Institute: (1) the addition of an emergency generator (screened from Noe Street); and (2) design changes to the new sidewalk along Noe Street from a meandering path to a straight path of travel, consistent with the City's Better Streets Plan.

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8. Q: Provide an update on the status of the BRT along Van Ness and Geary.

A: MTA staff has indicated that the Van Ness BRT and Geary BRT are both partially funded (Van Ness BRT: \$95M funded out of \$118M estimated budget; Geary BRT: \$105M funded out of \$248M estimated budget) and currently moving through the Environmental Review process. Construction of the Van Ness & Geary BRT is expected to take approximately two years, beginning in mid-2013 and concluding mid-2015. Construction of the Geary BRT is expected to also take approximately two years, beginning mid-2014 and concluding mid-2016.

9. Q: What is the likelihood of the underground Tunnel being approved by Cal Trans?

A: Cal Trans issued a letter to CPMC on Letter May 19, 2011 giving "conceptual approval" for the tunnel based on the Highway Improvement Agreement agreed to by Caltrans and CPMC on January 26, 2011. Caltrans' approval is contingent upon certification of EIR and local approvals, as well as Caltrans review of the final technical design and approval by the California Transportation Commission. The final approval would include the issuance of an Encroachment Permit and a long term lease and maintenance agreement for the tunnel. The tunnel would be owned and maintained (including all associated costs) by CPMC within the State right-of-way under the terms of the Highway Improvement Agreement.

10. Q: Revise the design of the Van Ness & Geary Medical Office Building.

A: CPMC's architects are working on a revised design for the Van Ness & Geary MOB. Staff expects a revised design to be ready for distribution to the Commission in advance of the July 14, 2011 hearing.

SUMMARY OF CITY'S "ASKS" AS PART OF THE DEVELOPMENT AGREEMENT

As noted during the staff presentation on May 12, 2011, in addition to the land use approvals listed above, the City and CPMC are negotiating a Development Agreement for CPMC's Long-Range Development Program. Development Agreements are mutually-agreeable contracts; the negotiations are on-going and CPMC has not agreed to all of the provisions listed below at this time. The following summary outlines the City's current "asks".

1. Healthcare:

Maintain St. Luke's Hospital as an essential and vital part of San Francisco's safety net system of healthcare and ensure that the medical services provided at St. Luke's Hospital are responsive to community needs and designed to ensure its long-term viability.

- Operate St. Luke's as an acute care hospital with an emergency room for at least 20 years.
- Begin construction on the new St. Luke's Hospital concurrent with or prior to the commencement of construction on Cathedral Hill and occupy and operate the new Cathedral Hill Hospital only after the opening of the new St. Luke's Hospital.
- Implement the recommendations of the St. Luke's Blue Ribbon Panel, including creating Centers of Excellence in Community Health and Senior Health.
- Place the new St. Luke's Medical Office Building into operation no later than four years after the new St. Luke's Hospital is opened, and in the meantime continue to refurbish the Monteagle Office Building.

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Ensure that charity care and Medi-Cal services for San Francisco's most vulnerable populations are shared equitably among San Francisco's non-profit hospitals.

- Provide charity care at a level consistent with other private, non-profit hospitals in San Francisco, for as long as CPMC operates acute-care hospitals in the City.
- Provide inpatient and outpatient services to Medi-Cal beneficiaries at a level that is
 consistent with other private, non-profit hospitals in San Francisco, for as long as CPMC
 operates acute-care hospitals in the City.

Focus community benefits to support low-income populations in the communities surrounding the Cathedral Hill and St. Luke's campuses and maintain existing long-standing community partnerships.

- Partner with the San Francisco Community Clinic Consortium to expand access to
 primary care, chronic care, and specialty care for low-income residents of San Francisco,
 with a focus on the neighborhoods surrounding the Cathedral Hill and St. Luke's
 campuses, as well as other low income neighborhoods.
- Continue active and contributory participation in the Community Benefits Partnership
 and focus community benefits to low-income and underserved communities in the
 neighborhoods surrounding the Cathedral Hill and St. Luke's campuses, as well as other
 low income neighborhoods.

Ensure that rates charged by insurers to the City's Health Service System for CPMC's services remain stable over time.

 Agree to hold CPMC's overall rate increases to Blue Shield for the City and County of San Francisco to no more than the annual medical consumer price index inflation rate.

2. Housing:

Replace existing housing units displaced by the new Cathedral Hill medical facilities.

Contribute \$4.5 million to the Mayor's Office of Housing as in-lieu payment for 20 SRO units and five (5) rent controlled units to be displaced by the Cathedral Hill development.

Uphold the housing production policies of the Van Ness Special Use District, with a focus on affordable housing.

 Contribute \$73 million to the Mayor's Office of Housing, representing the approximate in-lieu fee value for the 20% inclusionary portion of 1,100 units required under the Van Ness Special Use District.

3. Workforce Development

Ensure that City workers and businesses benefit from the jobs generated by this \$2.3 billion construction project.

- Commit to achieve a goal of 30% local hire for the construction of CPMC's new facilities. *Provide access to good-quality permanent jobs for residents of San Francisco, particularly those in neighborhoods surrounding the new facilities.*
 - Make at least 40 permanent entry-level hires per year for five years through the City's Healthcare Academy and local CBOs.

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4. Public Transit:

Ensure that MTA is able to provide adequate transit services to CPMC's new Cathedral Hill Campus.

- Contribute approximately \$10 million toward the construction of future Van Ness and Geary Bus Rapid Transit facilities in the immediate vicinity of its new Cathedral Hill Campus.
- Remit \$0.50 (peak) or \$0.25 (off-peak) to MTA for each entry or exit to its parking garages at Cathedral Hill.
- Each month, provide a Muni Fast Pass to any employee at Cathedral Hill that requests one, with a minimum of 60% of employees each month.

5. Streetscape and Pedestrian Safety:

Protect the neighborhoods surrounding CPMC facilities at Cathedral Hill and St. Luke's from increased traffic.

- Contribute approximately \$11 million toward streetscape and pedestrian safety improvements in the Tenderloin and Lower Polk neighborhoods, to be implemented by the City.
- Contribute approximately \$7 million toward streetscape and pedestrian safety improvements in the St. Luke's neighborhood, to be implemented by the City and by CPMC.

Attachments:

Exhibit A – St. Luke's Campus Service Line Comparison 4/4/2011

St. Luke's Campus Service Line Comparison 4/4/2011

Inpatient Services



Х	Χ
Х	Χ
Χ	Χ
Χ	Χ
Χ	Χ
Χ	Χ
Χ	Χ
Х	Χ
Χ	Χ
[1]	[2]
Χ	Χ
Χ	Χ
Χ	Χ
Χ	Χ
Χ	Χ
Χ	Χ
Х	Χ
Х	X
Χ	[3]
Χ	Χ
Х	Χ
Х	Χ
Χ	[4]
Χ	[5]
Χ	Χ
Х	Χ
	X X X X X X X X X X X X X X

Notes:

- 1) St. Luke's inpatient psychiatry unit was closed in 2006.
- 2) Inpatient psychiatric services system-wide provided at Pacific Campus.
- 3) Pediatric inpatients (<1/day) transferred to CH; Pediatric ER services will remain in new hospital.
- CPMC will provide 100 SNF beds for CPMC patients, whether within CPMC facilities or in new beds in the community.
- 5) Patients will be transferred to appropriate, comparable facilities in the community.

Recently added or expanded = shaded

Outpatient Services



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Ambulatory Surgery	Х	Χ
Opthamology	Χ	Χ
Urology	Χ	Χ
Cardiology	Χ	Χ
Cardipulmonary Services	Χ	Χ
Echocardiogram	Χ	Χ
Electrocardiography	Χ	Χ
Heart Catheterization Lab	Χ	Χ
Diagnostic Imaging	Χ	Χ
CT Scan	Χ	Χ
Mammography	Χ	Χ
MRI	Χ	Χ
Nuclear Medicine		Χ
Ultrasound	Χ	Χ
Gastrointerology	Χ	Χ
Lab Services	Χ	Χ
Obstetrics	Χ	Χ
Antenatal Testing	Χ	Χ
Orthopedics	Χ	Χ
Respiratory Therapy	Χ	Χ
Child Development Center		Χ
Health First		Χ
St. Luke's Health Care Center		Χ
Pediatrics	Χ	Χ
Internal medicine	Χ	Χ
Women's	Χ	Χ
Orthopedics	Χ	Χ
Diabetes Education	Χ	Χ
Multi-specialty clinic	Χ	Χ
Hepatology	Χ	Χ
Neurology		Χ
Oncology	Χ	Χ
Orthopedics	Χ	Χ
Breast Health	Χ	Χ
Retail Pharmacy	Χ	Χ
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