



# SAN FRANCISCO PLANNING DEPARTMENT

---

## Executive Summary CPMC Long Range Development Plan: Initiation of General Plan Amendments HEARING DATE: APRIL 11, 2013

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

Reception:  
**415.558.6378**

Fax:  
**415.558.6409**

Planning  
Information:  
**415.558.6377**

- Date:* April 4, 2013
- Case No.:* **Cathedral Hill Campus:** 2009.0885MTZCBRSK  
**St. Luke's Campus:** 2009.0886MTZCBRSK  
**Davies Campus:** 2004.0603C  
**All Campuses:** 2005.0555E; 2012.0403W
- Project Address:* **Cathedral Hill Campus:** 1100 & 1101 Van Ness Avenue; 1255 Post Street; 1020, 1028-1030, 1034-1036, 1040-1052, 1054-1060, and 1062 Geary Street; 1375 Sutter Street  
**St. Luke's Campus:** 3555 Cesar Chavez Street; 3615 Cesar Chavez Street; 1580 Valencia Street  
**Davies Campus:** 601 Duboce Avenue
- Zoning/Ht. & Blk.* **Cathedral Hill Campus:** RC-4, Van Ness Special Use District/130-V; NC-3/130-E  
**St. Luke's Campus:** RH-2/105-E, 65-A  
**Davies Campus:** RH-3/65-D, 130-E
- Proposed Zoning/  
Height & Bulk:* **Cathedral Hill Campus:** RC-4, Van Ness Special Use District, Van Ness Avenue Medical Use Subdistrict/230-V (Hospital site), 130-V (MOB site); NC-3/130-E (1375 Sutter Street site)  
**St. Luke's Campus:** RH-2, Cesar Chavez-Valencia Streets Medical Use Special Use District/105-E/145-E  
**Davies Campus:** No Change
- Assessor's Block/Lot:* **Cathedral Hill Campus:** 0695/005, 006; 0694/005, 006, 007, 008, 009, 009A, 010; 0690/016  
**St. Luke's Campus:** 6575/001, 002; 6576/021 and a portion of San Jose Avenue between Cesar Chavez Street and 27th Street  
**Davies Campus:** 3539/001
- Project Sponsor:* Geoffrey Nelson, CPMC  
633 Folsom Street, 5th Floor  
San Francisco, CA 94107  
(415) 600-7206  
[NelsonGK@Sutterhealth.org](mailto:NelsonGK@Sutterhealth.org)
- Staff Contact:* Elizabeth Watty – (415) 558-6620  
[Elizabeth.Watty@sfgov.org](mailto:Elizabeth.Watty@sfgov.org)
- Recommendation:* **Initiate Amendments to the General Plan**

The action before the Commission is initiation of amendments to the General Plan in order to facilitate near-term projects outlined in California Pacific Medical Center's revised Long Range Development Plan (LRDP), described below in more detail. Near-Term Projects at the Cathedral Hill, St. Luke's and Davies Campuses are described below for context, but no General Plan amendments are required for the Near-Term Projects at the Davies Campus. Initiation of these amendments does not involve a decision on the substance of the amendments; it merely introduces the amendments and allows the Planning Department to send out public notice for the subsequent action hearing, which is currently scheduled for May 16, 2013. On or after May 16, the Planning Commission may hold a public hearing and take action on the proposed amendments.

## **BACKGROUND**

On April 5, 2012, the Planning Commission initiated General Plan amendments in connection with the original CPMC LRDP Project. Mayor Lee introduced the Planning Code Text and Map Amendments proposed as part of CPMC's LRDP at the Board of Supervisors' hearing on April 10, 2012.<sup>1</sup> On April 26, 2012, the Commission certified the Final EIR (FEIR) for the LRDP Project by Motion No. 18588, adopted CEQA findings, and adopted other Motions and Resolutions with respect to the LRDP Project, including a Development Agreement. On May 16, 2012, an appeal of Planning Commission Motion No. 18588 was filed with the Board. On March 12, 2013, by adoption of Motion No. M13-042, the Board rejected the appeal and affirmed the decision of the Planning Commission to certify the FEIR. Also on March 12, 2013, the Board adopted Resolution 77-13, endorsing a term sheet for an amended Development Agreement concerning a revised CPMC LRDP Project ("Term Sheet"), which includes an increase in size of the new hospital at the St. Luke's Campus (from 80 to 120 beds), and a decrease in the size of the new hospital at the Cathedral Hill Campus (from 555 beds to 274-304 beds). The Resolution urged City staff to make the preparation of revised planning approval documents among its highest priorities and to present to the Planning Commission the revised documents and approvals necessary for the revised LRDP Project.<sup>2</sup>

Staff subsequently worked with the project sponsor to identify revisions to the April 26, 2012, Planning Commission approvals necessary to reflect the revised CPMC LRDP Project, including the following:

### **St. Luke's Campus**

- Increased the height limit (previously proposed to be 105', now proposed to be 145') for a portion of the Replacement Hospital site where the hospital tower is located;
- Increased the maximum plan and diagonal plan dimensions for the Hospital site (previously proposed to be 227' and 270', now proposed to be 229' and 285', respectively); and,
- Increased the maximum FAR (previously proposed to be 2.5:1, now proposed to be 2.6:1).

---

<sup>1</sup> The Planning Commission is the only body that may initiate amendments to the General Plan.

<sup>2</sup> Pursuant to Charter Section 4.105, when the Planning Commission recommends General Plan Amendments to the Board, the Amendments are deemed approved if they are not acted upon by the Board within 90 days of receipt. Accordingly, on April 8, 2013, the Land Use and Economic Development Committee of the Board will recommend that the Board reject the Amendments for the original LRDP Project recommended by the Planning Commission on April 26, 2012. The Land Use Committee and full Board will consider the General Plan amendments for the Revised Project if initiated and subsequently recommended for approval by the Planning Commission.

### Cathedral Hill Campus

- Decreased the proposed height limit (previously proposed to be 265', now proposed to be 230') for the Hospital site;
- Decreased the proposed FAR for the Hospital site, and thereby eliminated the need to amend Map 1 of the Van Ness Area Plan (previously proposed to be 9:1, now no increase required as it complies with the Map's allowable FAR of 7.1:1).

The changes to the LRDP outlined above necessitate changes to the General Plan Amendments. As described below, the changes to the General Plan Amendments are substantially the same as those recommended by the Commission on April 26, 2012 (in Resolutions 18590 and 18591), with the following modifications:

### St. Luke's Campus

- (1) General Plan Amendments, Urban Design Element Amendments. Currently, the maximum height allowed under the Urban Design Element Height Map is 88' for the St. Luke's Campus. The Commission's original recommendation would amend the map to reflect a proposed height maximum of 105' for the entire St. Luke's Campus (all of Assessor's Block 6575, Lot 021 in Block 6576, and a portion of San Jose Avenue between Cesar Chavez Street and 27th Street that will be vacated as part of the project, and their successor Blocks and Lots). The amendment has been revised to reflect a height limit of 145' for a portion of the Replacement Hospital site where the hospital tower is located, and 105' for the balance of the Campus.

### Cathedral Hill Campus

- (1) General Plan Amendments, Urban Design Element. The hospital is now proposed to be approximately 226' tall. Therefore, the previously recommended Amendment to Map 4 to increase the allowable height at the Hospital site from 240' to 265' is no longer required.
- (2) General Plan Amendments, Van Ness Area Plan. The FAR for the hospital site is now within the 7.1:1 maximum specified in VNAP Map 1. As under the previously recommended Amendment, that Map will be modified to reflect an FAR increase to 7.5:1 for the MOB site, but the FAR increase to 9:1 for the Hospital site is no longer required. VNAP Map 2 and VNAP Policy 5.1 would be revised to reflect an increase from the current maximum building height of 130 feet, as originally proposed, but the maximum permitted height would be reduced from 265' to 230'.

## PROJECT DESCRIPTION

### Ordinances

The following amendments are now being requested as part of CPMC's revised LRDP Project; however, only the **General Plan Amendments** are before the Planning Commission for initiation. The other project approvals are scheduled to be before the Commission on May 16, 2013 as proposed actions amending and superseding the prior April 26, 2012 approvals.

CATHEDRAL HILL CAMPUS<sup>3</sup>

(1) General Plan Amendments:

a. Van Ness Area Plan

- i. **Van Ness Area Plan Text:** The Van Ness Area Plan's Objectives and Policies would be amended to support a high density medical center that is consistent with the City's Better Streets Plan at the intersection of Van Ness Avenue and Geary Boulevard and to reflect various elements of this use.
- ii. **Map 1 (Generalized Land Use and Density Plan):** Currently, medical centers are not identified in the land use objectives for Van Ness Avenue under the Van Ness Area Plan. The project would amend the Van Ness Area Plan Map 1 to:
  1. Designate the sites proposed for the new hospital and medical office building ("MOB") as "The Van Ness Medical Use Subdistrict,"
  2. Increase the allowable Floor Area Ratio (FAR) for the MOB site (Block 0694/Lots 005, 006, 007, 008, 009, 009A, 010 and their successor Blocks and Lots bounded by Van Ness Avenue, Geary Street, one property west of Polk Street, and Cedar Street) from 7.1:1 to 7.5:1.
- iii. **Map 2 (Height and Bulk Districts):** Currently the height/bulk district in the project area is 130-V. The project would amend the Van Ness Area Plan Map 2 to create a 230-V District coterminous with the Hospital site, in order to amend the height limit for the Hospital site from 130' to 230'.

b. Urban Design Element

- i. **Bulk Map (Map 5):** Currently, the maximum plan dimensions and the maximum diagonal plan dimensions allowed under the Urban Design Element Bulk Map are 110' and 140', respectively, for the Cathedral Hill Hospital site and 110' and 125', respectively, for the Cathedral Hill MOB site. This map would be amended to reflect the proposed maximum plan dimensions and maximum diagonal plan dimensions of 385' and 466', respectively, for the Cathedral Hill Hospital site and 265' and 290', respectively, for the Cathedral Hill MOB site.

(2) Planning Code Text Amendments:

- a. **Section 243:** To amend the Van Ness Special Use District to create the Van Ness Medical Use Subdistrict (encompassing the proposed hospital and MOB blocks and the connecting underground pedestrian Tunnel), which would include the following provisions:
  - i. Allow an FAR of up to 7.5:1 for the Cathedral Hill MOB site;
  - ii. **Section 136.1** – Allow modification of otherwise applicable standards for building projections to allow for coverage of drop-off and entry areas required by medical facilities;
  - iii. **Section 136(c)(1)(B)** – Allow modification of otherwise applicable standards for obstructions over streets or alleys to allow architectural features that achieve appropriate articulation of building facades and that reduce pedestrian level wind currents;
  - iv. **Section 145.1** – Allow modification through Conditional Use Authorization of otherwise applicable street frontage requirements as necessary for large-plate medical facilities on sloping sites with multiple frontages;

---

<sup>3</sup> The Cathedral Hill Campus has been at times referred to as the Van Ness & Geary Campus.



- v. **Section 151 and 204.5** – Allow modification through Conditional Use Authorization of otherwise applicable parking standards for medical uses, provided that the amount of parking shall not exceed the lesser of 990 total spaces or 125% of the Planning Code minimum number of spaces for the Cathedral Hill Campus;
  - vi. **Section 154(b)** – Allow modification through Conditional Use authorization of otherwise applicable loading standards to allow appropriate loading facilities unique to medical centers;
  - vii. **Section 270 and 271** – Allow modification through Conditional Use Authorization of otherwise applicable bulk standards to allow for the unique massing requirements of medical facilities.
- b. **Section 124(d)**: To amend section 124(d) to allow an FAR of up to 7.5:1 for the Cathedral Hill MOB site.

(3) **Planning Code Map Amendments:**

- a. **Map SU02**: to show the boundaries of the Van Ness Special Use District, Van Ness Medical Use Subdistrict (hospital site, MOB site, and underground tunnel).
- b. **Map HT02**: to reclassify the height and bulk district for the Cathedral Hill Hospital site from 130-V to 230-V, in order to allow a height of 230' for the Hospital site.

**ST. LUKE'S CAMPUS**

(1) **General Plan Amendments:**

a. Urban Design Element

- i. **Map 4 (Height Map)**: Currently, the maximum height allowed under the Urban Design Element Height Map is 88'-0" for the St. Luke's Campus. This map would be amended to reflect the proposed maximum height of 145'-0" for the a portion of the Replacement Hospital site where the hospital tower is located, and 105'-0" for the balance of the Campus (the Campus includes all of Assessor's Block 6575, Lot 021 in Block 6576, and a portion of San Jose Avenue between Cesar Chavez Street and 27th Street that will be vacated as part of the project, and their successor Blocks and Lots). The existing St. Luke's Hospital is zoned for a height of 105'-0", and is built to a height of 158'-0", both of which are not in conformity with this Map.
- ii. **Map 5 (Bulk Map)**: Currently, the maximum plan dimensions and the maximum diagonal plan dimensions allowed under the Urban Design Element Bulk Map are 110' and 125', respectively, for the St. Luke's Campus. This map would be amended to reflect the proposed maximum plan dimensions and maximum diagonal plan dimensions of 229' and 285', respectively, for the St. Luke's Replacement Hospital site and 204' and 228', respectively, for the medical office building site.

(2) **Planning Code Text Amendments:**

- a. **Add Section 249.68**: to establish the Cesar Chavez/Valencia Streets Medical Use Special Use District and to allow an FAR of up to 2.6:1 for a medical center within this new Medical Use Special Use District.
- b. **Amend Section 124**: to add subsection "k" to increase the FAR from 2.25:1.0 to 2.6:1.0 within the boundaries of the St. Luke's Campus.

**(3) Planning Code Map Amendments:**

- a. **Map SU07:** to show the boundaries of the Cesar Chavez/Valencia Streets Medical Use SUD (St. Luke's Campus boundaries, as described above).
- b. **Map HT07:** to show a change from 65-A to 145-E a portion of the Replacement Hospital where the hospital tower is located and 105-E for the remainder of the St. Luke's Campus.

CPMC also seeks approval by the Board of Supervisors of a revised proposed Development Agreement ("DA"), the contents of which are described generally in the Term Sheet described below.

**Project Summary**

Like the original project, the Near-Term Projects outlined in CPMC's revised LRDP will result in a five campus system with three acute care hospitals – on the Davies, St. Luke's, and Cathedral Hill campuses – providing approximately 692 licensed beds and three full-service emergency departments (one at each of the acute care hospitals). As described below, the Davies Hospital North Tower was retrofitted in 2008 to remain operational to 2030. The St. Luke's Hospital will be replaced by a new hospital built on campus, adjacent to the existing hospital, followed by construction of a Medical Office Building after the demolition of the existing Hospital Tower. The California and Pacific Campuses will remain operational as acute care hospitals until the proposed Cathedral Hill Hospital is constructed and operational. Once the proposed Cathedral Hill Hospital is built, as part of the Near-Term Project implementation activities, most of the acute care services at California and Pacific Campuses will be transferred to the Cathedral Hill Hospital, and the Pacific Campus's existing 2333 Buchanan Street Hospital would undergo renovation and reuse as an ambulatory care center.<sup>4</sup> In the long-term, the Pacific Campus will become an outpatient center, and CPMC proposes an additional medical office building on the Davies Campus.<sup>5</sup> The specific Near-Term Projects are summarized below and described in greater detail in the following sections (updated plans and renderings will be provided in packets for the "action" hearing, scheduled for May 16, 2013):

- Construction of a new 274-304-bed acute care hospital on the west side of Van Ness Avenue between Geary Boulevard and Post Street, including 274 beds at initial buildout, as well as "shelled" space to accommodate an additional 30 beds;
- Construction of a new MOB on the east side of Van Ness Avenue between Geary and Cedar Streets;
- Construction of a new 120-bed general acute-care hospital with comprehensive emergency services on the St. Luke's Hospital campus (requiring the vacation of a portion of San Jose Avenue);

---

<sup>4</sup> 2333 Buchanan Street is an Existing Use under the proposed Development Agreement and is distinguished from the new construction proposed for the Long-Term Project at the Pacific Campus. The renovation and reuse may include, but is not limited to, the following uses: outpatient care, diagnostic and treatment services, Alzheimer's residential care, medical support services such as pre- and post-ambulatory surgery, outpatient laboratory services, physical and occupational therapy, hospital administration, and cafeteria uses.

<sup>5</sup> Long-Term Projects at the Davies and Pacific Campuses were evaluated at a program-level as part of CPMC's LRDP EIR. There are no pending Near-Term Projects under review for the Pacific Campus, and CPMC has not proposed any Near-Term or Long-Term Projects at the California Campus, which CPMC plans to sell after the majority of the services at that campus have been relocated to the Cathedral Hill and Pacific Campuses.

- Demolition of the existing St. Luke's Hospital (only after occupancy of the new hospital) and the subsequent construction of a new MOB/expansion building at the general location of the existing hospital; and
- Construction of a new Neuroscience Institute/MOB at the Davies Campus.

### **Cathedral Hill Campus**

The Cathedral Hill Medical Center will include a new acute care hospital, a new MOB, and a pedestrian tunnel under Van Ness Avenue to connect the two facilities.

The proposed Cathedral Hill Hospital will be a 226'-0" tall, 12-story, approximately 730,888 gsf, acute care hospital with up to 304 beds. It may include, but is not limited to inpatient medical care, labor and delivery, and post-partum care; specialized programs such as organ transplantation, interventional cardiology and newborn intensive care; and an emergency department. The hospital's initial build out would be 274 beds, with "shelled" space to accommodate an additional 30 beds. It would also include retail space, cafeteria, education and conference space, a central utility plant and parking on three levels, with approximately 276 parking spaces, and loading areas<sup>6</sup>. All vehicular access to the main drop-off and parking levels will be from Geary Boulevard and Post Street, with emergency vehicle (ambulance) access from Post Street. Large vehicle loading and private vehicle access to the emergency department will be from Franklin Street.

Although the proposed hospital is not subject to San Francisco Building Code and the Green Building Ordinance, CPMC has committed to "building green", and is seeking LEED Certified status for the Cathedral Hill Hospital.

The proposed MOB will be across Van Ness Avenue from the hospital, on a site bound by Van Ness Avenue, Geary Street, Cedar Street, and one property west of Polk Street. The MOB will be nine stories tall, approximately 130'-0" in height, and will contain approximately 261,691 gsf of floor area and 542 off-street parking spaces on seven underground levels. The MOB will provide office space to physicians who will admit patients to the hospital, and other ancillary services, such as retail space along Van Ness Avenue and Geary Street. The MOB will be internally connected to the hospital through a pedestrian tunnel below Van Ness Avenue. The MOB's main vehicular access will be from Cedar Street (ingress and egress) and Geary Street (ingress only). The primary patient drop off and one-of-two main pedestrian entrances will occur on Cedar Street at the west end of the block, near the corner of Van Ness Avenue. The other main pedestrian entrance will be mid-block on Van Ness Avenue.

The MOB is subject to San Francisco's Green Building Ordinance, and will achieve a minimum of LEED Silver certification.

Additional medical office space will be provided within the existing building at 1375 Sutter Street, which is currently a mixture of retail, office, and medical office space. That building will be renovated, retaining the existing retail and parking spaces. An additional 60 parking spaces are required as the result of increased medical office use within the building and will be provided off-site within the Cathedral Hill Hospital's underground parking garage.

---

<sup>6</sup> CPMC is studying the best way to achieve the reduction of 237 spaces from the original proposal of 1,055 spaces on the campus and may ultimately propose to remove some or all of this parking from the proposed MOB instead of/in addition to the hospital.

### **St. Luke's Campus**

The proposal for St. Luke's Hospital includes the construction of a new 214,061 gsf, seven-story and approximately 142' tall, 120-bed acute care hospital, sited on the campus' existing surface parking lot and over a portion of the to-be-vacated San Jose Avenue that has been closed for use as a street since 1968 (and is currently used for parking for the St. Luke's Campus under an encroachment permit). As part of the construction of the Replacement Hospital, CPMC will construct an entry plaza adjacent to the hospital entrance on Cesar Chavez Street, along with a courtyard and public pedestrian pathway in the former San Jose Avenue right-of-way between Cesar Chavez Street and 27th Street. Based on the recommendations of the Blue Ribbon Panel<sup>7</sup>, the new hospital will be sited such that the existing hospital can remain in continuous operation during the new hospital's construction. The Replacement Hospital will include an expanded Emergency Department, and will include, but is not limited to, inpatient medical care, diagnostic and treatment space, surgical care, critical care, labor and delivery, and post-partum care. It will also include a cafeteria and an enclosed loading area. The Emergency Department at the Replacement Hospital will be approximately 13,940 gsf, which is an increase of approximately 6,880 gsf over the existing Emergency Department in the 1957 Building. The St. Luke's Campus will also include Centers of Excellence in Senior and Community Health.

Although the proposed hospital is not subject to San Francisco Building Code and the Green Building Ordinance, CPMC has committed to "building green", and is seeking LEED Certified status for the St. Luke's Replacement Hospital.

Following demolition of the existing hospital, CPMC will also construct a new 98,959<sup>8</sup> gsf, five-story and approximately 100'-tall MOB located approximately in the existing hospital's place. The MOB would include medical office space for doctors admitting patients to the hospital, and would include retail, educational, and conference space, along with a four level underground garage with approximately 220 parking spaces. Vehicular access to the underground parking garage will be from Cesar Chavez and Valencia Streets.

The MOB will be entitled at the same time as the hospital, but the design will continue to be refined with planning staff while the new hospital is being built since the medical office building cannot be built until the existing hospital is demolished. Once built, the new MOB will connect internally with the new hospital.

The MOB is subject to San Francisco's Green Building Ordinance, and will achieve a minimum of LEED Gold certification.

### **Davies Campus**

In 2004, CPMC submitted plans with the City outlining the creation of a 46,006 gsf, four-story medical office building (aka Neuroscience Institute), on a portion of the campus that is currently occupied by

---

<sup>7</sup> In 2008, a Blue Ribbon Panel was established in recognition of the importance of St. Luke's in order to advise the planning efforts for the campus. The panel was charged with creating a viable plan for an acute care hospital and outpatient services at St. Luke's that would meet the health care needs of the communities it serves. The Blue Ribbon Panel recommended that CPMC continue to provide critical services to the community, including (1) Building a new acute-care community hospital on the site of the St. Luke's Campus that will allow for the continuation of care within the existing hospital until construction is completed; (2) Demolishing the existing hospital after services are transferred into the new hospital; (3) Integrating the medical staffs at St. Luke's and CPMC; and, (4) Maintaining critical services at St. Luke's including an emergency department, OB/GYN unit, medical/surgical unit, urgent care unit, primary and urgent pediatrics, an intensive care unit, and a new Center of Excellence on Senior Health.

<sup>8</sup> The size of the MOB is unchanged from the original LRDP Project. The approximately 5,049 reduction in gsf is due to the fact that the connector building will now be constructed as part of the Replacement Hospital rather than the MOB.

sections of two surface parking lots containing 64 surface parking spaces. The new Neuroscience Institute would consolidate CPMC's neuroscience programs in a new building at the Davies Campus. The Neuroscience Institute will contain approximately 19,077 gsf of medical office space, 18,207 gsf of outpatient clinic space, 11,795 gsf of circulation/mechanical/support space, and 1,021 gsf of retail space (pharmacy). The Neuroscience Institute Project also includes a screened exterior generator located to the south of the proposed building, which was not part of the proposal in 2004.

At the time of this original application, the project was not considered part of the proposed CPMC Seismic Compliance Hospital Replacement program (also called the Four Campus Master Plan). The Planning Commission approved the Neuroscience Institute project in June 2007; however, in September 2007 the Board of Supervisors heard the environmental appeal (Case No. 2004.0603E), overturned the environmental document (Final Mitigated Negative Declaration), and voted to require that the Neuroscience Institute project be evaluated in the context of CPMC's LRDP.

## **SITE DESCRIPTION AND PRESENT USE**

CPMC currently operates a four-campus hospital system with four acute care hospitals – Davies, California, Pacific, and St. Luke's Campuses – providing a total of 1,174 licensed beds and four full-service emergency departments (one at each hospital). The number of beds and average daily inpatient census is the highest of all hospitals in San Francisco. The CPMC system handles approximately one-third of the City's total hospital discharges, about half of the babies born in the City, and almost one-third of the City's emergency department visits.

### **Cathedral Hill Campus**

The site of the proposed Cathedral Hill Hospital currently contains the Cathedral Hill Hotel and Office Building. The site occupies a full city block – bounded by Van Ness Avenue, Geary Boulevard, Franklin Street, and Post Street – and contains approximately 106,000 sf of lot area. The site slopes downward to the east along Post Street and Geary Boulevard, and slopes downward to the south along Franklin Street and Van Ness Avenue. The hotel is 10 stories above grade and 176', and the adjacent office building is 11 stories above grade and 180'; these buildings are both vacant, and together they contain approximately 381,791 gsf of floor area.

The site of the proposed Cathedral Hill Medical Office Building (MOB) is located on the east side of Van Ness Avenue, between Geary and Cedar Streets (Geary Boulevard becomes Geary Street east of Van Ness Avenue). The site contains approximately 36,200 sf of lot area, and slopes downward to the east along Cedar and Geary Streets, and slopes downward to the south along Van Ness Avenue and the eastern edge of the project site near Polk Street. The site currently contains seven parcels with a variety of ground floor commercial uses, five residential dwelling units, and 20 residential hotel units on upper floors. All of these spaces are vacant.

The sites of the future Cathedral Hill Hospital and MOB are located within the RC-4 Zoning District (Residential-Commercial, High Density), Van Ness Special Use District, Van Ness Automobile Special Use District, and 130-V Height and Bulk District.

The RC-4 Zoning District is intended to provide a mixture of high-density dwellings with supporting commercial uses. Hospitals are permitted in this District with Conditional Use Authorization.

The Van Ness Special Use District controls help to implement the objectives and policies of the Van Ness Avenue Plan, which is a part of the General Plan. The key goals of the Van Ness Avenue Plan are to (i) create of a mix of residential and commercial uses along Van Ness Avenue, (ii) preserve and enhance of

the pedestrian environment, (iii) encourage the retention and appropriate alteration of architecturally and historically significant and contributory buildings, (iv) conserve the existing housing stock, and (v) enhance the visual and urban design quality of the street. The controls of the special use district include a requirement that new residential uses be provided at a 3:1 ratio to net new nonresidential uses. With a Conditional Use Authorization, this requirement can be modified or waived for institutional uses that serve an important public need that cannot reasonably be met elsewhere in the area.

### **St. Luke's Campus**

St. Luke's Hospital is located in the southeastern quadrant of the City and occupies a full city block, totaling approximately 3.6 acres. It is bounded by Cesar Chavez Street, Valencia Street, Duncan Street, San Jose Avenue, and 27<sup>th</sup> Street. The campus currently contains eight buildings, totaling approximately 451,868 gsf of floor area and 329 parking spaces. It is licensed for 229 beds.

More specifically, the campus includes the following facilities:

- The **St. Luke's Hospital Tower** has 12 stories above ground and one story below ground, is approximately 197,983 gsf, and is primarily used for inpatient care, skilled nursing, and administrative support. There are eight surface parking spaces north of the Hospital Tower.
- The **1957 Building** has four stories above ground and is approximately 31,724 gsf. It is primarily used for the Emergency Department, diagnostic and treatment space, and support space. There are 106 parking spaces associated with this building; 74 spaces on a surface parking lot; and 32 street spaces along San Jose Avenue.
- The **1912 Building** has four stories above ground, is approximately 26,280 gsf, and is primarily used for hospital administration, outpatient care, diagnostic and treatment space, support space, and the chapel.
- The **Monteagle Medical Center** has eight stories above ground and one story below ground and is approximately 90,005 gsf which includes medical office space, outpatient care space, diagnostic and treatment space, and support space.
- The **Redwood Administration Building** is a portable one-story building containing approximately 2,400 gsf which is used for hospital administration.
- The **Hartzell Building** has two stories above ground and one story below ground and has approximately 18,506 gsf primarily used for office and educational uses for the Samuel Merritt School of Nursing.
- The **Duncan Street Parking Garage** is two stories above ground and contains approximately 83,370 gsf for 215 parking spaces. There are an additional 114 off-street surface parking spaces on the St. Luke's Campus, including in a surface parking lot to the west of San Jose Avenue, for a total of 329 parking spaces.
- The one story **MRI Trailer** provides 1,600 gsf and is used for diagnostic and treatment space.

Several buildings on the campus are connected to each other: the Hospital Tower, the 1957 Building, the 1912 Building, and the Monteagle Medical Center connect north to south through internal corridors at various levels; and the MRI Trailer is connected via an enclosed passageway to the 1912 Building.

The St. Luke's Campus is located in the RH-2 Zoning District (Residential House, Two-Family), which allows a hospital with a Conditional Use Authorization. The RH-2 Districts are devoted to one-family and two-family houses. In some cases, group housing and institutions are found in these areas, although nonresidential uses tend to be limited.

### **Davies Medical Center**

The Davies Campus is an entire city block, comprising approximately 7.2 acres, bounded by Duboce Avenue, Noe, 14<sup>th</sup>, and Castro Streets. The Campus includes approximately 501,000 gsf of floor area within five buildings: the Davies Hospital North Tower, the Davies Hospital South Tower, the Rehabilitation Center, the 45 Castro Medical Office Building, and a 283-space parking garage. The Campus also includes 207 additional off-street surface parking spaces, for a campus total of 490 off-street parking spaces.

The Davies Campus is located in the RH-3 Zoning District (Residential House, Three-Family), which allows a hospital with a Conditional Use Authorization. The RH-3 Districts have many similarities to RH-2 Districts, but structures with three units are common in addition to one-family and two-family houses. Nonresidential uses are more common in these areas than in RH-2 Districts.

CPMC has completed several construction projects over the last few years at the Davies Campus, including the seismic strengthening of the North Tower, which contains the acute care hospital facilities. Rehabilitation of Davies' acute care hospital to an "SPC-2" level (described below) meets the requirements of SB 1953, allowing it to operate until 2030.

## **SURROUNDING PROPERTIES AND NEIGHBORHOOD**

### **Cathedral Hill Campus**

The neighborhoods surrounding the Cathedral Hill Medical Center site include Cathedral Hill, the Tenderloin, the Polk Street NCD, the Western Addition, Civic Center, Little Saigon, Japantown and Lower Pacific Heights. Although the surrounding neighborhoods contain predominately low- and mid-rise structures, there are a number of large-scale high-rise apartment buildings<sup>9</sup> and several large commercial buildings<sup>10</sup> in the Van Ness Avenue corridor. The Cathedral Hill neighborhood is also known for its prominent houses of worship, including St. Mary's Cathedral, St. Mark's Lutheran Church, First Unitarian Universalist Church of San Francisco, and Hamilton Square Baptist Church.

### **St. Luke's Campus**

The St. Luke's Campus is in the greater Mission neighborhood, surrounded by the Inner Mission, Outer Mission, Glen Park, Bernal Heights, Precita Valley, Diamond Heights and Noe Valley neighborhoods. The neighborhood contains a mix of residential uses, including single-family dwellings, duplexes and small apartment buildings. Retail uses are scattered through the area, mainly on Cesar Chavez, Mission, and Valencia Streets. On Mission Street, retail stores and other commercial uses form a continuous corridor of commercial activity. Mission Street draws shoppers, customers and business clients from beyond the immediate neighborhood of the St. Luke's Campus.

### **Davies Medical Center**

The neighborhoods surrounding the Davies Campus are predominantly zoned RH-3 (Residential, House, Three-Family) and P (Public). The general character of the surrounding area is a mixture of two- and three-family dwellings ranging in height between three and four stories tall. Duboce Park is directly across Duboce Avenue and to the north of the Davies Medical Center.

---

<sup>9</sup> Including the Cathedral Hill Towers building at 1200 Gough Street, the Sequoias Apartment building at 1400 Geary Boulevard, and the Daniel Burnham Court complex at 1 Daniel Burnham Court.

<sup>10</sup> Including the AMC Theaters at 1000 Van Ness Avenue, the Holiday Inn at 1500 Van Ness Avenue, and the former Ellis Brooks Chevrolet Dealership at the corner of Van Ness Avenue and Bush Street.

## **ENVIRONMENTAL REVIEW**

An Environmental Impact Report (EIR) was prepared on CPMC's LRDP. A hearing on the Draft EIR was held on September 30, 2010, and Comments and Responses to the Draft EIR were published and distributed to the Commission on March 29, 2012. On April 26, 2012, by Motion No. 18588, the Commission certified as adequate, accurate and complete the FEIR for the LRDP Project. On May 16, 2012, an appeal of Planning Commission Motion No. 18588 certifying the FEIR was filed with the Board of Supervisors, and on March 12, 2013, by Motion No. M13-042, the Board rejected the appeal and affirmed the decision of the Planning Commission to certify the FEIR, finding the FEIR to be complete, adequate, and objective, reflecting the independent judgment of the City in compliance with CEQA, the CEQA Guidelines and Chapter 31. Planning Department staff has reviewed the revised LRDP Project and determined that a subsequent or supplemental EIR is not required, and is preparing an Addendum to the FEIR to reflect the revised LRDP Project. The Addendum will be provided to the Commission as part of the Department's case report for the scheduled May 16, 2013 hearing.

## **HEARING NOTIFICATION REQUIREMENTS**

Initiation of General Plan Amendments does not require public notice, although the date of this initiation hearing has been posted on the Department's website since March 29, 2013. In addition, notices were sent by email to members of the public who have requested such notification on April 4, 2013.

## **PUBLIC COMMENT**

- The Department has received hundreds of written communications in support of and in opposition to the LRDP Project from individuals, business owners, labor organizations, and non-profit organizations, as well as expressions of support and opposition at various public meetings, including the DEIR hearing on September 23, 2010; informational hearings at the Planning Commission on March 10, 2011, May 12, 2011, and June 9, 2011; at the Initiation hearing on April 5, 2012; at the FEIR Certification hearing and action hearing on April 26, 2012; and at numerous hearings before the Board of Supervisors over the last year.

## **ISSUES AND OTHER CONSIDERATIONS**

- **CPMC's Seismic Safety Requirements:** CPMC's LRDP is driven by California's strict seismic standards for hospitals. Currently, CPMC operates a four campus hospital system with four acute care hospitals: Davies, California, Pacific, and St. Luke's. Due to state law, specifically the 1972 Alquist Priolo Act, as amended by Senate Bill (SB) 1953 and subsequent legislation, all acute care hospitals must meet or exceed performance standards intended to result in the hospitals being life-safe or operational after a major earthquake. CPMC is one of four hospital systems in the City currently planning to build new facilities to comply with Structural Performance Category (SPC) 5, the most stringent seismic requirements of SB 1953; UCSF and SF General Hospital are under construction (both expected to be open in 2015), Chinese Hospital has received approvals from the City and has begun demolition, and CPMC has applications pending with the Planning Department.

The SPCs are ratings of seismic safety. They range from SPC-1, the lowest possible structural performance category (wherein buildings pose a significant risk of collapse and a danger to the public after a strong earthquake), to SPC-5, the highest category (wherein buildings are in compliance with



the structural provisions of SB 1953 and are projected to be able to remain not just life-safe but operational following strong ground motion).

SPC ratings 4, 3, and 2 are assumed to remain life-safe after a major seismic event, but not necessarily fully operational. Acute care hospitals with SPC ranking 1, considered a collapse hazard, must have been retrofitted by 2008, or have elected to rebuild their hospital to an SPC-5 standard by 2013. Successor legislation to SB 1953, including SB 1661, SB 608, and most recently SB 90, have added progress reporting requirements and allowed for compliance extensions to accommodate, among other things, the time required to receive local approvals to build. Via SB 90, for example, an extension beyond 2013 is available, but a final deadline (with completion no later than 2020) is not set until hospitals can evidence a reliable funding and construction plan for compliance.

None of CPMC's existing hospitals are comprised entirely of SPC-5 –rated buildings. Only the Davies Campus was able to be retrofitted to SPC-2 by the 2008 deadline, allowing CPMC to provide acute care services in the rehabilitated buildings until 2030. The remaining three campuses – California, Pacific, and St. Luke's Campuses – have some or all component facilities currently rated SPC-1 and are required to be retrofitted or rebuilt as described above. Below is a list of CPMC's current acute-care hospitals' SPC ratings (and number of respective buildings on campus at each rating):

- California: SPC-1 (10 buildings), SPC-4 (1 building), SPC-5 (1 building);
  - Pacific: SPC-1 (2 buildings);
  - St. Luke's: SPC-1 (1 building), SPC-2 (1 building), SPC-4 (1 building);
  - Davies: SPC-1 (2 buildings), SPC-2 (2 buildings)
- **Development Agreement (“DA”):** A DA is in general terms a contract between the City and the developer that provides greater security and flexibility to both parties, and that can result in greater public benefits in exchange for developer certainty. Development Agreements are typically used for large-scale projects with substantial infrastructure investment and multi-phase build outs. Should the Commission decide to approve/recommend approval of the revised project, the intent is for the City and CPMC to enter into a DA. The Term Sheet endorsed by the Board of Supervisors on March 12, 2013 setting forth the proposed terms of the DA for the revised LRDP Project is included in this packet.
  - **Process:** The following provides an outline of the process and proposed timeline for the Planning Commission's upcoming review of CPMC's revised LRDP Project:
    - **April 4, 2013:** The Planning Commission packet is issued and includes the following documents: this Executive Summary; draft ordinances for the proposed General Plan amendments; a draft Motion to initiate the aforementioned General Plan amendments; exhibits that include all proposed General Plan map changes; and the Term Sheet endorsed by the Board of Supervisors.

Copies of the revised plans and renderings will be distributed to the Commission in the packets for the Action Hearing, and are therefore not included in this initiation packet. The design changes are limited to the Cathedral Hill Hospital and the St. Luke's Hospital, to reflect the decrease in number of beds at Cathedral Hill and the increase in number of beds at St. Luke's, in accordance with the Board of Supervisors endorsed Term Sheet.

- **April 11, 2013 (Initiation Hearing):** A hearing to initiate the revised amendments to the General Plan. Initiation of these amendments enables the Planning Commission to act on the project

entitlements requested as part of CPMC's revised LRDP Project and the Development Agreement at a future hearing.

- **May 16, 2013 (Action Hearing):** A hearing to act on the entitlements for the revised LRDP Project is scheduled for May 16, 2013.

## **REQUIRED COMMISSION ACTION**

The proposed draft Motion is before the Commission so that it may approve or disapprove the initiation of amendments to the General Plan.

## **BASIS FOR RECOMMENDATION**

- The Department believes the Commission should initiate the amendments to the General Plan, which are necessary to implement CPMC's revised LRDP Project. Initiation of these amendments enables the Planning Commission to recommend approval or disapproval of the amendments and other necessary project approvals regarding the Near-Term Projects in CPMC's revised LRDP Project and the Development Agreement at a future hearing, which is tentatively scheduled for May 16, 2013.

<b>RECOMMENDATION:</b> <b>Approve Initiation of the General Plan Amendments</b>
---

### **Attachments:**

Draft Motion

Draft Ordinances:

- Cathedral Hill Campus
  - General Plan Text Amendments
  - General Plan Map Amendments
- St. Luke's Campus
  - General Plan Map Amendments

Term Sheet

Board of Supervisors' Resolution No. 77-13 (Term Sheet)



# SAN FRANCISCO PLANNING DEPARTMENT

## Planning Commission Motion No. \_\_\_\_\_

HEARING DATE: APRIL 11, 2013

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

Reception:  
**415.558.6378**

Fax:  
**415.558.6409**

Planning  
Information:  
**415.558.6377**

*Date:* April 4, 2013

*Case No.:* **Cathedral Hill Campus:** 2009.0885MTZCBRSK  
**St. Luke's Campus:** 2009.0886MTZCBRSK  
**All Campuses:** 2005.0555E; 2012.0403W

*Project Address:* **Cathedral Hill Campus:** 1100 & 1101 Van Ness Avenue; 1255 Post Street; 1020, 1028-1030, 1034-1036, 1040-1052, 1054-1060, and 1062 Geary Street; 1375 Sutter Street  
**St. Luke's Campus:** 3555 Cesar Chavez Street; 3615 Cesar Chavez Street; 1580 Valencia Street

*Zoning/Ht. & Blk.* **Cathedral Hill Campus:** RC-4, Van Ness Special Use District/130-V; NC-3/130-E  
**St. Luke's Campus:** RH-2/105-E, 65-A

*Proposed Zoning/Height & Bulk:* **Cathedral Hill Campus:** RC-4, Van Ness Special Use District, Van Ness Avenue Medical Use Subdistrict/230-V (Hospital site), 130-V (MOB site); NC-3/130-E (1375 Sutter Street site)  
**St. Luke's Campus:** RH-2/Cesar Chavez/Valencia Streets Medical Use Special Use District/145-E/105-E

*Assessor's Block/Lot:* **Cathedral Hill Campus:** 0695/005, 006; 0694/005, 006, 007, 008, 009, 009A, 010; 0690/016  
**St. Luke's Campus:** 6575/001, 002; 6576/021, and a portion of San Jose Avenue between Cesar Chavez Street and 27<sup>th</sup> Street

*Project Sponsor:* Geoffrey Nelson, CPMC  
633 Folsom Street, 5th Floor  
San Francisco, CA 94107  
(415) 600-7206  
[NelsonGK@Sutterhealth.org](mailto:NelsonGK@Sutterhealth.org)

*Staff Contact:* Elizabeth Watty – (415) 558-6620  
[Elizabeth.Watty@sfgov.org](mailto:Elizabeth.Watty@sfgov.org)

*Recommendation:* **Initiate Amendments to the General Plan**

**MOTION OF INTENT TO INITIATE AMENDMENTS TO THE GENERAL PLAN, PURSUANT TO PLANNING CODE SECTION 340, IN ORDER TO FACILITATE THE NEAR-TERM PROJECTS OUTLINED IN CALIFORNIA PACIFIC MEDICAL CENTER'S LONG RANGE DEVELOPMENT PLAN, INCLUDING: (1) AMENDMENTS TO THE TEXT AND MAPS 1 AND 2 OF THE GENERAL PLAN'S VAN NESS AREA PLAN IN ORDER TO SUPPORT A HIGH DENSITY MEDICAL CENTER AT VAN NESS AVENUE AND GEARY BOULEVARD; AND (2) AMENDMENTS OF MAP 4 AND MAP 5 OF THE GENERAL PLAN'S URBAN DESIGN ELEMENT.**

## PREAMBLE

WHEREAS, California Pacific Medical Center (hereinafter "CPMC") currently operates four acute care medical centers in San Francisco, which are the California Campus, the Pacific Campus, the St. Luke's Campus, and the Davies Campus; and

WHEREAS, CPMC is a significant part of the health care service sector in San Francisco, providing health care services in connection with approximately 30% of the hospitalizations in the City and County of San Francisco. CPMC is San Francisco's second largest non-public employer, and fourth largest employer overall, with over 6,000 employees; and

WHEREAS, CPMC's current acute care facilities at the California, Pacific, and St. Luke's Campuses are comprised largely of buildings with a Structural Performance Category (SPC) rating of 1 – the lowest possible Structural Performance Category – meaning they pose a significant risk of collapse and a danger to the public after a strong earthquake; and

WHEREAS, California State Law (the Alquist Priolo Act of 1972, as amended by Senate Bill 1953 and successor legislation) requires that acute care hospital facilities that are rated SPC-1 be either retrofitted to at least an SPC-2 rating or rebuilt (to SPC-5, the highest level of seismic readiness) by certain deadlines mandated by the State; and

WHEREAS, CPMC would face great difficulty and significant delay in rebuilding their acute care facilities on-site at the California and Pacific Campuses due to site constraints that would preclude them from undertaking new construction while continuing operation of the existing inpatient service at the same time; and

WHEREAS, the Cathedral Hill Hotel and 1255 Post Street office building sites were selected for the location of a new acute care hospital because these aggregated parcels met CPMC's site selection objectives, including: (1) being available for sale; (2) being large enough to accommodate the co-location of acute care services from the California and Pacific Campuses; (3) preventing the interruption of existing services at the California and Pacific Campuses during the construction of seismically compliant replacement facilities; (4) being located on geologically stable soil; (5) being at a major transit nexus; and (6) the availability of adjacent properties for the construction of a medical office building (MOB); and

WHEREAS, construction of a new acute care hospital to replace the St. Luke's Hospital can occur on the existing St. Luke's Campus without interruption to existing acute care services, so long as the City vacates the portion of San Jose Avenue between Cesar Chavez and 27<sup>th</sup> Streets that is currently closed to through traffic pursuant to an encroachment permit issued by the City in 1968 and is used by CPMC for surface parking; and

WHEREAS, on June 10, 2010, CPMC filed applications requesting amendments to the General Plan, Planning Code, and Zoning Maps in order to facilitate the construction of two new acute care hospitals and three new MOBs, all of which are part of CPMC's Long Range Development Plan (LRDP); and

WHEREAS, on April 5, 2012, the Planning Commission initiated General Plan Amendments in connection with the CPMC LRDP Project. Mayor Lee introduced the Planning Code Text and Map Amendments proposed as part of CPMC's LRDP at the Board of Supervisors' hearing on April 10, 2012. On April 26, 2012, the Commission certified the Final Environmental Impact Report (FEIR) for

the LRDP Project by Motion No. 18588, adopted CEQA findings, and adopted other Motions and Resolutions with respect to the LRDP Project, including General Plan Amendments. On May 16, 2012, an appeal of Planning Commission Motion No. 18588 was filed with the Board; and

WHEREAS, on March 12, 2013, by adoption of Motion No. M13-042, the Board rejected the appeal and affirmed the decision of the Planning Commission to certify the FEIR; and

WHEREAS, also on March 12, 2013, the Board adopted Resolution No. 77-13, endorsing a term sheet for a revised CPMC LRDP Project, which includes an increase in size of the new hospital at the St. Luke's Campus (from 80 to 120 beds), and a decrease in the size of the new hospital at the Cathedral Hill Campus (from 555 beds to 274-304 beds); and

WHEREAS, pursuant to Charter Section 4.105, when the Planning Commission recommends General Plan Amendments to the Board, the Amendments are deemed approved if they are not acted upon by the Board within 90 days of receipt. Accordingly, the Commission urges the Board reject the General Plan Amendments for the original LRDP Project and consider the new General Plan Amendments for the Revised Project if initiated and recommended by the Planning Commission; and

WHEREAS, Planning staff worked with the project sponsor to identify revisions to the April 26, 2012, Planning Commission approvals to reflect the revised CPMC LRDP Project, including revised General Plan Amendments. The new proposed General Plan Amendments are substantially the same as those recommended by the Commission on April 26, 2012, with minor modifications to reflect the revised LRDP Project; and

WHEREAS, the construction of two new acute care hospitals and three new MOB's by CPMC in San Francisco, as proposed in the Near-Term under CPMC's LRDP, will significantly benefit the City's economy, by creating approximately 1,500 construction jobs during the peak of construction (anticipating \$2.0 billion in total development costs), retaining and growing over 6,000 existing CPMC jobs and improving health care access for San Franciscans; and

WHEREAS, the General Plan and Planning Code were not created with the new construction of hospitals as a focused land use typology, and thus do not recognize the complexity, site and Building Code constraints, and health care delivery intricacies involved therein; and

WHEREAS, the proposed Ordinances amending the General Plan are intended to resolve the aforementioned issues by amending the Van Ness Area Plan of the General Plan to support a high density medical center at the transit nexus of Van Ness Avenue and Geary Boulevard and amending the Urban Design Element Height and Bulk Maps of the General Plan to facilitate the construction of the Near-Term Projects on the Cathedral Hill and St. Luke's Campuses; and

WHEREAS, should the Planning Commission make and recommend the necessary approvals for the Near-Term Projects, the Commission and the Board of Supervisors will also consider a proposed Development Agreement (DA) by and between the City and County of San Francisco and California Pacific Medical Center regarding certain aspects of the activities outlined in CPMC's LRDP, including the Near-Term Projects; and

WHEREAS, the Commission conducted a duly noticed public hearing at a regularly scheduled meeting to consider the initiation of the proposed Ordinances on April 11, 2013; and

Motion No. \_\_\_\_\_

Case No.'s: 2009.0885, 2009.0886, 2012.0403, 2005.0555

Hearing Date: April 11, 2013

CPMC Long Range Development Plan

WHEREAS, the Commission has heard and considered the testimony presented to it at the public hearing and has further considered written materials and oral testimony presented on behalf of Department staff and other interested parties; and

WHEREAS, all pertinent documents may be found in the files of the Department, as the custodian of records, at 1650 Mission Street, Suite 400, San Francisco; and

WHEREAS, the Commission has reviewed the proposed Ordinances amending the General Plan, which Ordinances are attached hereto and incorporated herein by reference;

**MOVED**, that pursuant to Planning Code Section 340, the Commission Adopts a Motion of Intent to initiate amendments to the General Plan;

**AND BE IT FURTHER MOVED**, that pursuant to Planning Code Section 306.3, the Planning Commission authorizes the Department to schedule a public hearing to consider the above referenced General Plan Amendments contained in the draft Ordinances, approved as to form by the City Attorney in **Exhibit A**.

I hereby certify that the foregoing Motion was ADOPTED by the San Francisco Planning Commission on April 11, 2013.

\_\_\_\_\_  
Jonas P. Ionin  
Acting Commission Secretary

AYES:

NOES:

ABSENT:

[General Plan Amendment – Van Ness Area Plan Amendments – CPMC: Cathedral Hill Campus – Revised LRDP]

**Ordinance amending the San Francisco General Plan by amending the Van Ness Area Plan in order to facilitate the development of a high density medical center at the transit nexus of Van Ness Avenue and Geary Boulevard and reflect various elements of this use; and adopting findings, including environmental findings, Planning Code Section 340 findings, and findings of consistency with the General Plan and the priority policies of Planning Code Section 101.1.**

NOTE: Additions are *single-underline italics Times New Roman*; deletions are ~~*strike through italics Times New Roman*~~. Board amendment additions are double-underlined; Board amendment deletions are ~~strikethrough normal~~.

Be it ordained by the People of the City and County of San Francisco:

Section 1. Findings. The Board of Supervisors of the City and County of San Francisco hereby finds and determines that:

(a) Pursuant to San Francisco Charter Section 4.105 and Planning Code Section 340, any amendments to the General Plan shall first be considered by the Planning Commission and thereafter recommended for approval or rejection by the Board of Supervisors. On May 16, 2013, by Resolution No. \_\_\_\_\_, the Planning Commission conducted a duly noticed public hearing on the General Plan Amendments pursuant to Planning Code Section 340, found that the public necessity, convenience and general welfare required the General Plan Amendments, adopted the General Plan Amendments, and recommended them for approval to the Board of Supervisors. A copy of Planning

1 Commission Resolution No. \_\_\_\_\_ is on file with the Clerk of the Board of Supervisors  
2 in File No. \_\_\_\_\_.

3 (b) The Board finds that this ordinance is, on balance, in conformity with the priority  
4 policies of Planning Code Section 101.1 and consistent with the General Plan as it is  
5 proposed for amendment herein, and in the related ordinances amending Maps 4 and 5 of the  
6 General Plan Urban Design Element, and Maps 1 and 2 of the Van Ness Area Plan to  
7 accommodate the Near-Term Projects at the Cathedral Hill and St. Luke's Campuses  
8 described in California Pacific Medical Center's Long Range Development Plan ("LRDP")  
9 (Ordinances No. \_\_\_\_\_ and \_\_\_\_\_) for the reasons set forth in Planning  
10 Commission Motion No. \_\_\_\_\_, and the Board hereby incorporates these findings  
11 herein by reference.

12 (c) On April 26, 2012 by Motion No. 18588, the Planning Commission certified as  
13 adequate, accurate and complete the Final Environmental Impact Report ("FEIR") for the  
14 California Pacific Medical Center LRDP. On March 12, 2013, the Board of Supervisors, in  
15 Motion No. 13-042 affirmed the decision of the Planning Commission to certify the FEIR and  
16 rejected the appeal of the FEIR certification. Copies of Planning Commission Motion No.  
17 18588 and Board of Supervisors Motion No. M13-042 are on file with the Clerk of the Board of  
18 Supervisors in File Nos. 120459 and 120550. In accordance with the actions contemplated  
19 herein, this Board has reviewed the FEIR, and the FEIR Addendum for the revised CPMC  
20 LRDP Project, and adopts and incorporates by reference, as though fully set forth herein, the  
21 findings, including a statement of overriding considerations and the mitigation monitoring and  
22 reporting program, pursuant to the California Environmental Quality Act (California Public  
23 Resources Code Section 21000 et seq.), adopted by the Planning Commission on  
24 \_\_\_\_\_, in Motion No. \_\_\_\_\_. A copy of said motion is on file with the Clerk of  
25 the Board of Supervisors in File No. \_\_\_\_\_.



1 Section 2. The Board of Supervisors hereby approves the following amendments to  
2 the Van Ness Area Plan of the San Francisco General Plan. The proposed amendments to  
3 the San Francisco General Plan's Van Ness Area Plan will facilitate the development of a  
4 seismically safe high density medical center at the transit nexus of Van Ness Avenue and  
5 Geary Boulevard.

6 The Van Ness Area Plan of the General Plan of the City and County of San Francisco  
7 is hereby amended to read as follows:

8 OBJECTIVE 1

9 CONTINUE EXISTING COMMERCIAL USE OF THE AVENUE AND ADD A SIGNIFICANT  
10 INCREMENT OF NEW HOUSING.

11 Although there are 18 buildings containing 980 dwelling units in this subarea  
12 most of the buildings are in non-residential use.

13 This section of Van Ness Avenue is one of the few areas in the city where new housing  
14 can be accommodated with minimal impacts on existing residential neighborhoods and public  
15 services.

16 Some of the features that make the area attractive for medium density mixed use  
17 development with high density housing are as follows:

- 18 • This 16 block strip along Van Ness Avenue maintains a "central place" location and  
19 identity. The area is close to the city's major employment center, is well-served by  
20 transit, has well developed infrastructure (roadway, water, sewer and other public  
21 services), wide roadway (93+ feet) and sidewalks (16+ feet), has continuous  
22 commercial frontage and numerous attractive, architecturally outstanding buildings.
- 23 • There are a number of large parcels which are substantially under-developed.
- 24 • A height limitation of between 80 and 130 ft. would allow sufficient development to  
25 make feasible over time the construction of housing on under used parcels.

- 1           • The minor streets which bisect most of the blocks within this subarea facilitate access  
2           to and from new developments with minimal affects on major east-west thoroughfares  
3           or on Van Ness Avenue.

4           Development of a number of medium density, mixed-use projects with continued non-  
5           residential use of non-residential buildings and would facilitate the transformation of Van Ness  
6           Avenue into an attractive mixed use boulevard.

7           *A high-density medical center at the transit nexus of Van Ness Avenue and Geary*  
8           *would support Van Ness Avenue's redevelopment as a mixed use boulevard as set forth in*  
9           *Policy 1.6 below.*

10           *POLICY 1.6 Allow a medical center at the intersection of Van Ness Avenue and Geary*  
11           *Boulevard.*

12           *A medical center at this location would support redevelopment of Van Ness*  
13           *Avenue as a mixed use boulevard by diversifying the mix of nonresidential uses, maximizing*  
14           *utilization of the major bus lines/transit node, and locating medical care and essential*  
15           *emergency services in close proximity of the City's dense urban core and at a central location*  
16           *for both day and nighttime population groups within the City; it would also create opportunities*  
17           *for improved streetscape and pedestrian amenities at a key transit nexus that are consistent*  
18           *with the Better Streets Plan.*

19  
20           **OBJECTIVE 5**

21           **ENCOURAGE DEVELOPMENT WHICH REINFORCES TOPOGRAPHY AND URBAN**  
22           **PATTERN, AND DEFINES AND GIVES VARIETY TO THE AVENUE.**

23           **Topography and Street Pattern**

24           Van Ness Avenue is the central north-south spine and one of the widest streets in the  
25           City. Bounded by Civic Center and the Bay and characterized by excellent views, the Avenue

1 defines and links many adjacent neighborhoods, including through its substantial transit  
2 resources. In connecting Market Street to the Bay, Van Ness forms the western edge of the  
3 inner city and separates the Nob and Russian Hill neighborhoods from Pacific Heights. The  
4 Avenue also provides access between a number of focal points, including landmark buildings,  
5 cultural centers, important view corridors and the Bay. The juxtaposition on the Avenue of  
6 large monumental structures with fine-grain urban fabric to the east creates an exciting  
7 contrast within the cityscape.

8 POLICY 5.1 Establish height controls to emphasize topography, adequately frame the  
9 great width of the Avenue, and support the redevelopment of the Avenue as a diverse, mixed  
10 use boulevard and transit corridor.

11 Existing height limits on the Avenue generally range from 40 feet at the northern end to  
12 130 feet in the central portion. This height differentiation responds to topographic conditions  
13 as well as land use patterns, maintaining distinctions between areas of different character. For  
14 example, height districts are gradually tapered from 130 feet around the hilltop at Washington  
15 Street to 80 feet at Pacific Avenue and further to 65 and 40 feet towards the Bay shoreline.

16 Although the majority of existing height controls are adequate to define both the  
17 overall topography as well as the great width of the Avenue, the height limit between  
18 California and Pacific Streets should be lowered from the existing 130/105-ft. level to 80 ft. in  
19 order to facilitate the transition between the greater building heights along the southern part of  
20 the Avenue and the mostly low-rise residential development north of Broadway. Development  
21 to maximum height should be closely monitored to minimize blocking views between the high  
22 slopes on both sides of the Avenue. Good proportion between the size of a street and that of  
23 its buildings is important for streets to be interesting and pleasant places. The proposed  
24 height limits, combined with the Van Ness Plan's proposed bulk controls, encourage definition  
25 of the 93-foot wide Avenue.

1           The height limit for the block bounded by Geary Boulevard, Franklin Street, Post Street  
2 and Van Ness Avenue is established at 230 feet as indicated on Map 2 to accommodate  
3 development of a medical center that will maximize use of the major transit nexus at this  
4 location and give variety to the avenue by diversifying the mix of non-residential uses and  
5 enhancing the streetscape.

6           POLICY 5.2 Encourage a regular street wall and harmonious building forms along the  
7 Avenue.

8           New development should create a coherent street wall along the Avenue through  
9 property line development at approximately the same height. Since block face widths are  
10 constant, a regularized street wall encourages buildings of similar scale and massing.  
11 Nevertheless, some variety of height is inevitable and desirable due to the need to highlight  
12 buildings of historical and architectural significance and meet other Objectives of the Plan.

13           OBJECTIVE 8: CREATE AN ATTRACTIVE STREET AND SIDEWALK SPACE  
14 WHICH CONTRIBUTES TO THE TRANSFORMATION OF VAN NESS AVENUE INTO A  
15 RESIDENTIAL BOULEVARD.

16           Projects located at the transit nexus of Van Ness Avenue and Geary Boulevard will be  
17 deemed to promote and to be consistent with Objective 8 and each of Policies 8.1 through  
18 8.10 if they (i) include an integrated streetscape plan that incorporates – among other  
19 elements – planting, sidewalk treatment, street lighting and street furniture, and that is  
20 generally consistent with the streetscape guidelines regarding such elements in Chapter 6 of  
21 the Better Streets Plan; and (ii) locate and design any sidewalk vaults or sub sidewalk spaces  
22 so that they are compatible with such streetscape plan.

23  
24           POLICY 11.3 Encourage the retention and appropriate alteration of contributory  
25 buildings.



1           There is another group of buildings, listed in Appendix B, which are not of sufficient  
2 importance to justify their designation as landmarks. Nevertheless these buildings, referred to  
3 as contributory buildings, possess architectural qualities which are in harmony with the  
4 prevailing characteristics of the more significant landmark quality buildings. These buildings  
5 contribute to the character of the street and should be retained if possible.

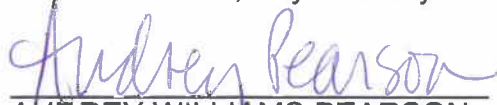
6           Notwithstanding the foregoing, contributory buildings may be demolished to  
7 accommodate a medical center at the transit nexus of Van Ness Avenue and Geary Street,  
8 provided that any replacement structure or structures must be designed to contribute to the  
9 character of the street and be in harmony with the more significant landmark quality buildings  
10 in the vicinity as appropriate.

11           Section 3. This Section is uncodified. In enacting this Ordinance, the Board intends to  
12 amend only those words, phrases, paragraphs, subsections, sections, articles, numbers,  
13 punctuation, charts, diagrams, or any other constituent part of the General Plan that are  
14 explicitly shown in this legislation as additions, deletions, Board amendment additions, and  
15 Board amendment deletions in accordance with the "Note" that appears under the official title  
16 of the Legislation.

17           Section 4. This Section is uncodified. Effective Date. This ordinance shall become  
18 effective 30 days from the date of passage.

19  
20  
21 APPROVED AS TO FORM:  
DENNIS J. HERRERA, City Attorney

22  
23 By:

  
AUDREY WILLIAMS PEARSON  
Deputy City Attorney

1 [General Plan Map Amendments – CPMC: Cathedral Hill Campus – Revised LRDP]

2  
3 **Ordinance amending the General Plan of the City and County of San Francisco by 1)**  
4 **amending Map 5 of the Urban Design Element to reflect the proposed maximum plan**  
5 **dimensions and maximum diagonal plan dimensions of 385' and 466', respectively, for**  
6 **the Cathedral Hill Hospital site and 265' and 290', respectively, for the Cathedral Hill**  
7 **MOB site; 2) amending Map 1 of the Van Ness Area Plan, to designate the sites of the**  
8 **proposed Cathedral Hill Hospital and Medical Office Building as the Van Ness Medical**  
9 **Use Subdistrict; and 3) amending Map 2 of the Van Ness Area Plan to create a 230-V**  
10 **height/bulk district coterminous with the Hospital site; and adopting findings, including**  
11 **environmental findings, Planning Code Section 340 findings, and findings of**  
12 **consistency with the General Plan and the priority policies of Planning Code Section**  
13 **101.1.**

14 **NOTE:** Additions are *single-underline italics Times New Roman*;  
15 deletions are *strike through italics Times New Roman*.  
16 Board amendment additions are double-underlined;  
17 Board amendment deletions are ~~strikethrough normal~~.

18 Be it ordained by the People of the City and County of San Francisco:

19 Section 1. Findings. The Board of Supervisors of the City and County of San Francisco  
20 hereby finds and determines that:

21 (a) Pursuant to San Francisco Charter Section 4.105 and Planning Code Section  
22 340, any amendments to the General Plan shall first be considered by the Planning  
23 Commission and thereafter recommended for approval or rejection by the Board of  
24 Supervisors. On May 16, 2013, by Resolution No. \_\_\_\_\_, the Commission conducted a  
25 duly noticed public hearing on the General Plan Amendments pursuant to Planning Code

Planning Department  
**BOARD OF SUPERVISORS**

1 Section 340, found that the public necessity, convenience and general welfare require the  
2 proposed General Plan Amendments, adopted the General Plan Amendments, and  
3 recommended them for approval to the Board of Supervisors. A copy of Planning  
4 Commission Resolution No. \_\_\_\_\_ is on file with the Clerk of the Board of Supervisors  
5 in File No. \_\_\_\_\_, and the Board hereby incorporates those findings by reference.

6 (b) The Board finds that this ordinance is, on balance, in conformity with the priority  
7 policies of Planning Code Section 101.1 and consistent with the General Plan as it is  
8 proposed for amendment herein and in the related ordinances amending Maps 4 and 5 of the  
9 General Plan Urban Design Element, and the Van Ness Area Plan to accommodate the Near-  
10 Term Projects at the Cathedral Hill and St. Luke's Campuses described in California Pacific  
11 Medical Center's Long Range Development Plan ("LRDP") (Ordinances No. \_\_\_\_\_ and  
12 \_\_\_\_\_) for the reasons set forth in Planning Commission Motion No. \_\_\_\_\_,  
13 and the Board hereby incorporates these findings herein by reference.

14 (c) On April 26, 2012, by Motion No. 18588, the Planning Commission certified as  
15 adequate, accurate and complete the Final Environmental Impact Report ("FEIR") for the  
16 California Pacific Medical Center LRDP. On March 12, 2013, by adoption of Motion No. M13-  
17 042, the Board of Supervisors affirmed the certification of the EIR and rejected the appeal of  
18 Planning Commission Motion No. 18588. Copies of Planning Commission Motion No. 18588  
19 and Board of Supervisors Motion No. M13-042 are on file with the Clerk of the Board of  
20 Supervisors in File No. 120549 and 120550. In accordance with the actions contemplated  
21 herein, this Board has reviewed the FEIR, and the FEIR Addendum for the revised CPMC  
22 LRDP Project, and adopts and incorporates, as though fully set forth herein, the findings,  
23 including a statement of overriding considerations and the mitigation monitoring and reporting  
24 program, pursuant to the California Environmental Quality Act (California Public Resources  
25 Code Section 21000 et seq.), adopted by the Planning Commission on \_\_\_\_\_, in

1 Motion No. \_\_\_\_\_. Said Motion is on file with the Clerk of the Board of Supervisors in  
2 File No. \_\_\_\_\_.

3  
4 Section 2. The Board of Supervisors hereby approves amendments to the General  
5 Plan, as follows:

6 (a) Map 5 (Urban Design Guidelines for Bulk of Buildings) of the Urban Design  
7 Element of the General Plan of the City and County of San Francisco shall be amended to  
8 change the bulk limits for the site identified for the proposed Cathedral Hill Hospital (Block  
9 0695/Lots 005, 006 and their successor Blocks and Lots) from a maximum plan dimension of  
10 110' and maximum diagonal plan dimension of 140' to a maximum plan dimension of 385' and  
11 maximum diagonal plan dimension of 466', and to change the bulk limits for the site identified  
12 for the proposed Cathedral Hill Medical Office Building (Block 0694/Lots 005, 006, 007, 008,  
13 009, 009A, 010 and their successor Blocks and Lots) from a maximum plan dimension of 110'  
14 and maximum diagonal plan dimension of 125' to a maximum plan dimension of 265' and  
15 maximum diagonal plan dimension of 290'.

16 (b) Map 1 (Generalized Land Use and Density Plan) of the Van Ness Area Plan of  
17 the General Plan of the City and County of San Francisco shall be amended to change the  
18 Floor Area Ratio (FAR) of the site identified for a medical office building within the proposed  
19 Van Ness Medical Use Subdistrict (Block 0694/Lots 005, 006, 007, 08, 009, 009A, 010 and  
20 their successor Blocks and Lots) from 7.1:1 to 7.5:1 and to designate the sites identified for  
21 the new hospital and medical office building as the "Van Ness Medical Use Subdistrict"; and

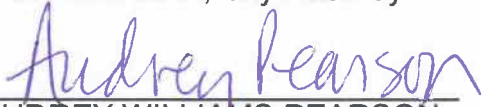
22 (c) Map 2 (Height and Bulk Districts) of the Van Ness Area Plan of the General Plan  
23 of the City and County of San Francisco shall be amended to increase the maximum height of  
24 the hospital site (Block 0695/Lots 005, 006 and their successor Blocks and Lots) from 130-V  
25 to 230-V.



1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

Section 3. This section is uncodified. Effective Date. This ordinance shall become effective 30 days from the date of passage.

APPROVED AS TO FORM:  
DENNIS J. HERRERA, City Attorney

By:   
AUDREY WILLIAMS PEARSON  
Deputy City Attorney

# General Plan Van Ness Area Plan Map 1



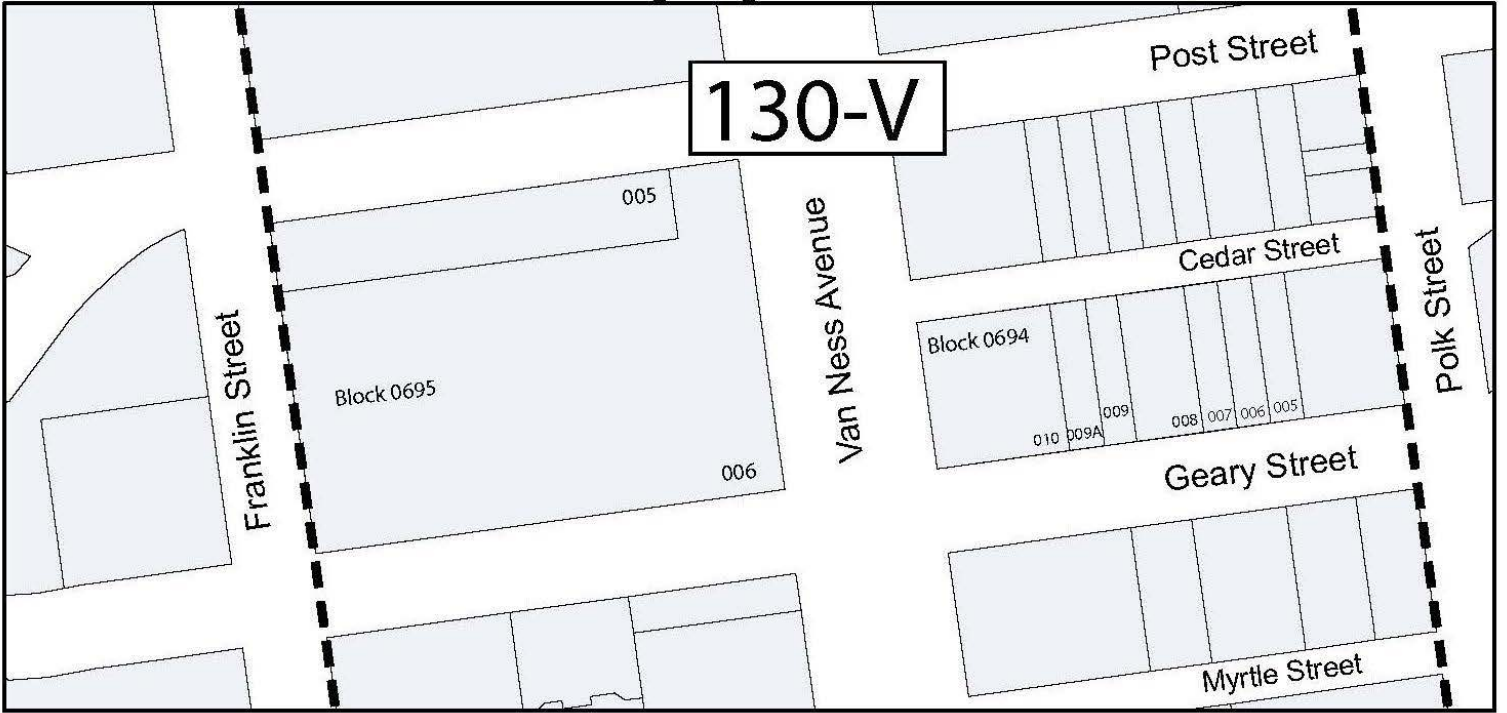
EXISTING



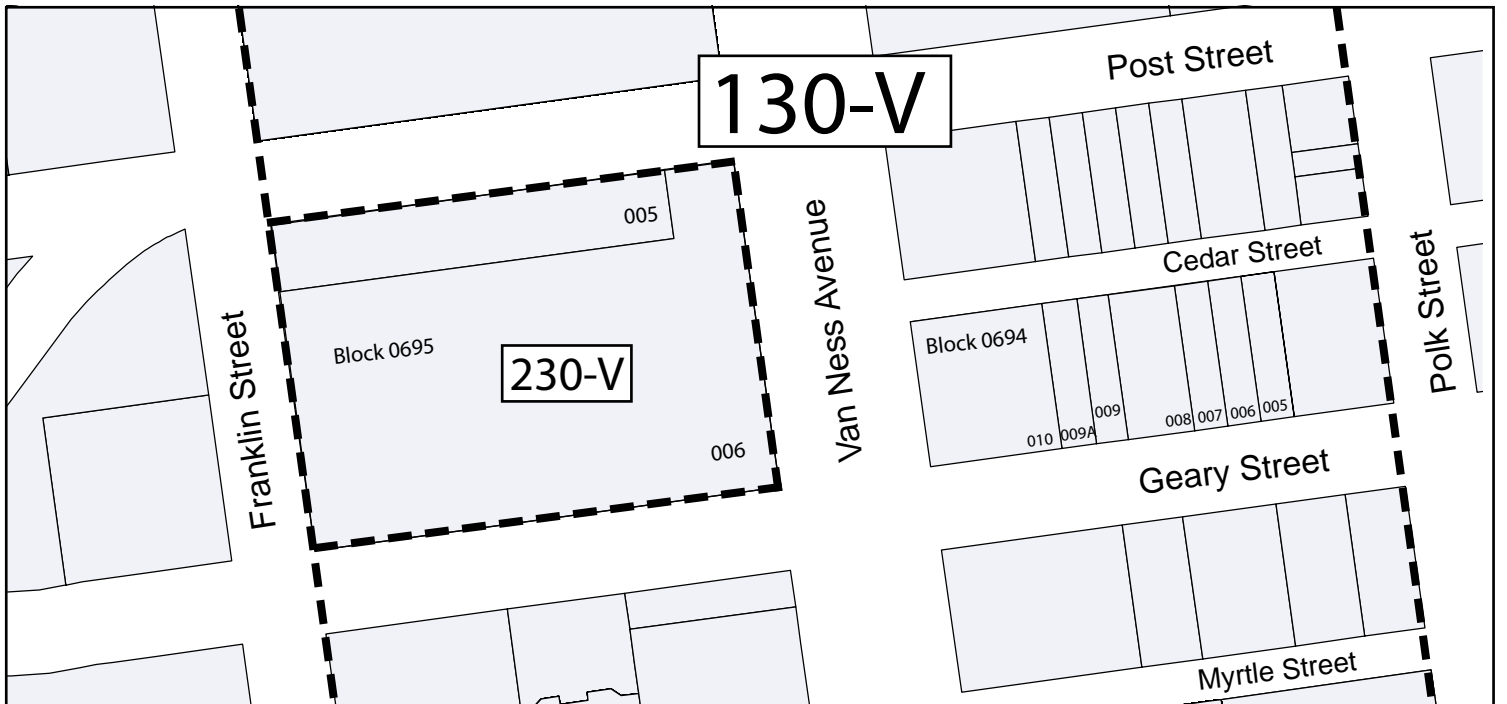
PROPOSED



# General Plan Van Ness Area Plan Map 2



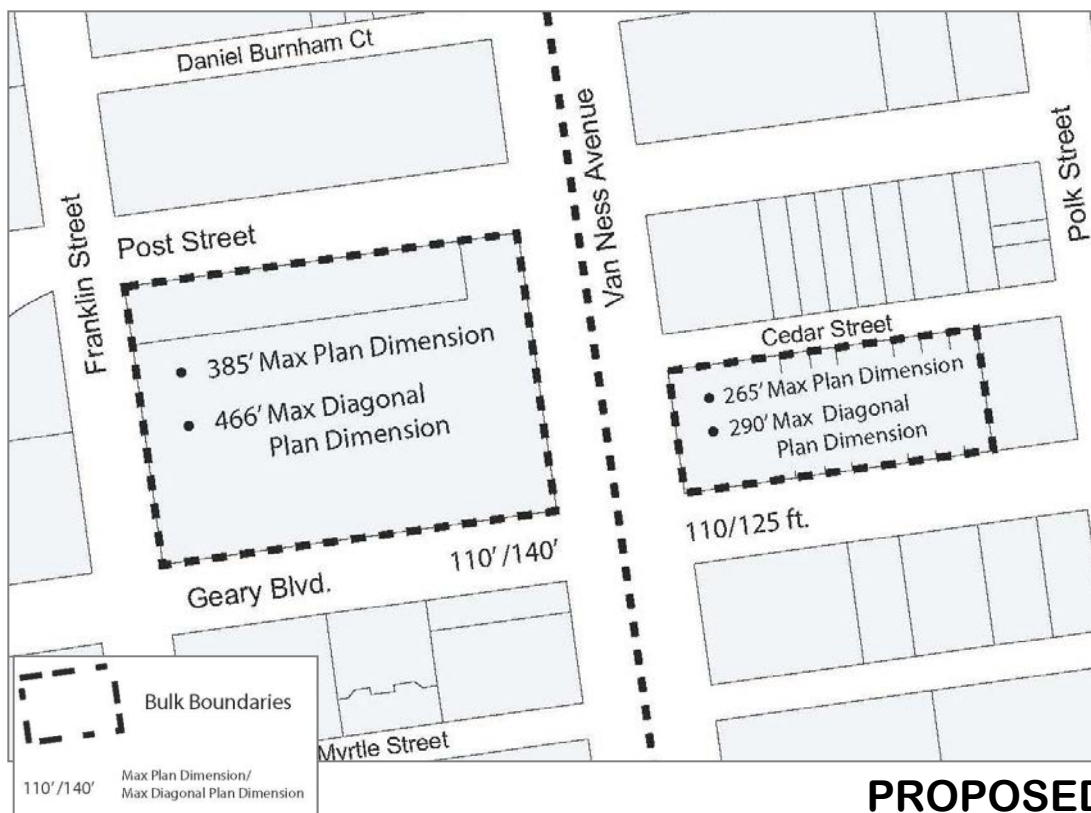
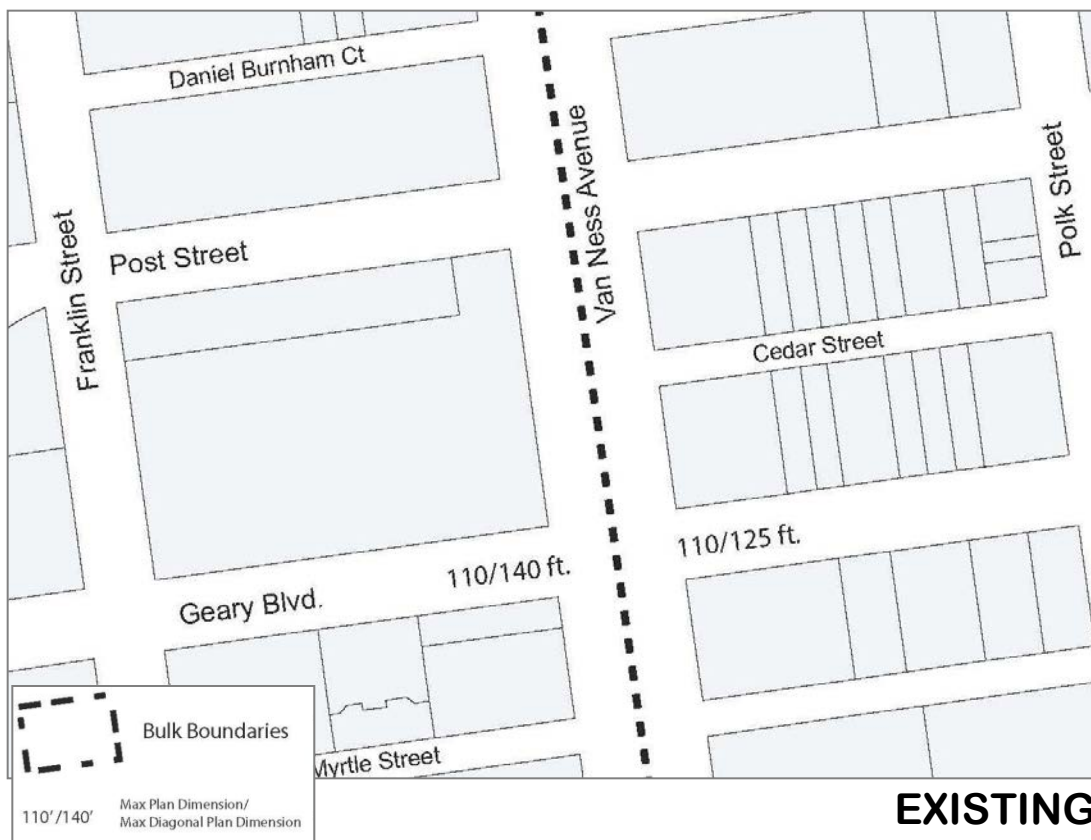
EXISTING



PROPOSED

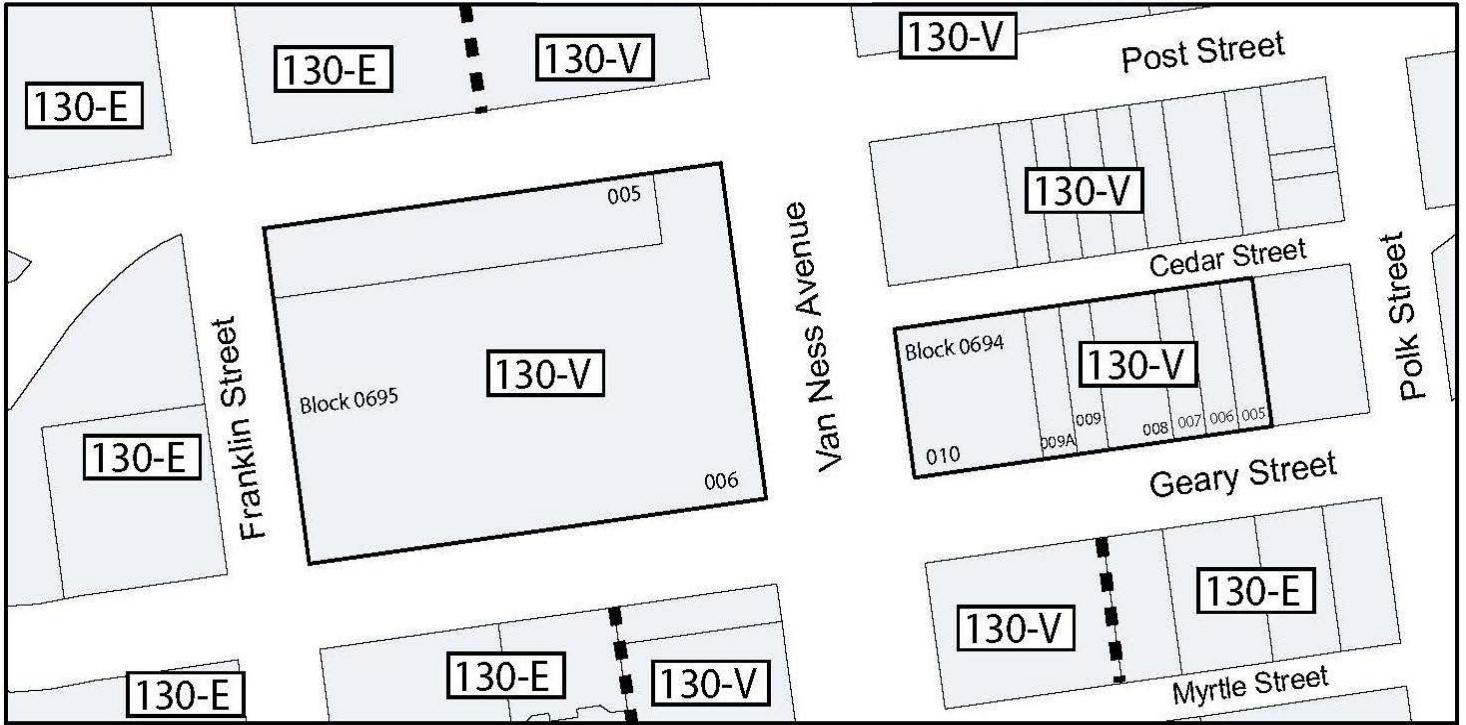


# General Plan Urban Design Element Map 5

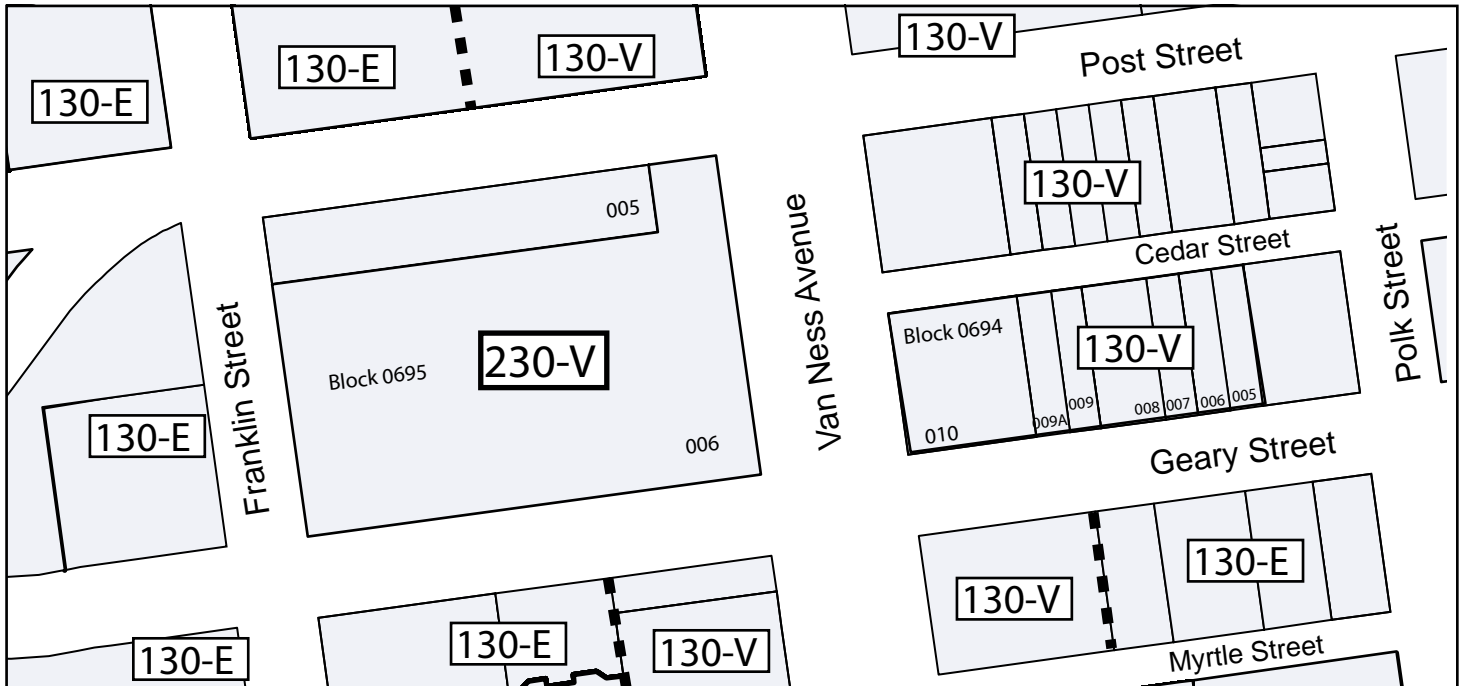




# Planning Code Zoning Map Sheet HT02



EXISTING



PROPOSED



1 [General Plan Map Amendments – CPMC: St. Luke’s Campus – Revised LRDP]

2  
3 **Ordinance amending the General Plan of the City and County of San Francisco by**  
4 **1) amending Map 4 of the Urban Design Element to increase the height limit for the**  
5 **California Pacific Medical Center’s St. Luke’s Campus (Block 6575/Lot 001, 002; Block**  
6 **6576/Lot 021, and the portion of San Jose Avenue between Cesar Chavez Street and**  
7 **27<sup>th</sup> Street) to 145’ for a portion of the Replacement Hospital site where the hospital**  
8 **tower will be located, and 105’ for the balance of the Campus; and 2) amending Map 5**  
9 **of the Urban Design Element to reflect the proposed maximum plan dimensions and**  
10 **maximum diagonal plan dimensions of 229’ and 285’, respectively, for the St. Luke’s**  
11 **Replacement Hospital site and 204’ and 228’, respectively, for the medical office**  
12 **building site at the St. Luke’s Campus; and adopting findings, including environmental**  
13 **findings, Section 340 findings, and findings of consistency with the General Plan and**  
14 **the priority policies of Planning Code Section 101.1.**

15 NOTE: Additions are *single-underline italics Times New Roman*;  
16 deletions are *strike through italics Times New Roman*.  
17 Board amendment additions are double-underlined;  
18 Board amendment deletions are ~~strikethrough normal~~.

19 Be it ordained by the People of the City and County of San Francisco:

20 Section 1. Findings. The Board of Supervisors of the City and County of San Francisco  
21 hereby finds and determines that:

22 A. Pursuant to San Francisco Charter Section 4.105 and Planning Code Section  
23 340, any amendments to the General Plan shall first be considered by the Planning  
24 Commission and thereafter recommended for approval or rejection by the Board of  
25 Supervisors. On May 16, 2013, by Resolution No. \_\_\_\_\_, the Commission conducted a

1 duly noticed public hearing on the General Plan Amendments pursuant to Planning Code  
2 Section 340, found that the public necessity, convenience and general welfare required the  
3 proposed General Plan Amendments, adopted the General Plan Amendments, and  
4 recommended them for approval to the Board of Supervisors. A copy of Planning  
5 Commission Resolution No. \_\_\_\_\_ is on file with the Clerk of the Board of Supervisors  
6 in File No. \_\_\_\_\_, and incorporated by reference herein.

7 B. The Board finds that this ordinance is, on balance, in conformity with the priority  
8 policies of Planning Code Section 101.1 and consistent with the General Plan as it is  
9 proposed for amendment herein and in the related ordinances amending Map 5 of the  
10 General Plan Urban Design Element and Maps 1 and 2 of the Van Ness Area Plan, and  
11 amending the Van Ness Area Plan to accommodate the Near-Term Projects at the Cathedral  
12 Hill Campus described in the California Pacific Medical Center's Long Range Development  
13 Plan ("LRDP") (Ordinances No. \_\_\_\_\_ and \_\_\_\_\_) for the reasons set forth in  
14 Planning Commission Motion No. \_\_\_\_\_, and the Board hereby incorporates these  
15 findings herein by reference.

16 C. On April 26, 2012, by Motion No. 18588, the Planning Commission certified as  
17 adequate, accurate and complete the Final Environmental Impact Report ("FEIR") for the  
18 California Pacific Medical Center LRDP. On March 12, 2013, by adoption of Motion M13-042,  
19 the Board affirmed the decision of the Planning Commission to certify the FEIR, and rejected  
20 the appeal of Planning Commission Motion 18588. A copy of Planning Commission Motion  
21 No.18588, and Board of Supervisors Motion No. M13-042 are on file with the Clerk of the  
22 Board of Supervisors in File Nos. 120549 and 120550. In accordance with the actions  
23 contemplated herein, this Board has reviewed the FEIR, and the FEIR Addendum for the  
24 revised CPMC LRDP Project, and adopts and incorporates as though fully set forth herein, the  
25 findings, including a statement of overriding considerations and the mitigation monitoring and

1 reporting program, pursuant to the California Environmental Quality Act (California Public  
2 Resources Code Section 21000 et seq.) adopted by the Planning Commission on  
3 \_\_\_\_\_, in Motion No. \_\_\_\_\_. Said Motion is on file with the Clerk of the Board  
4 of Supervisors in File No. \_\_\_\_\_.

5  
6 Section 2. The Board of Supervisors hereby approves an amendment to the General  
7 Plan, as follows:

8 (a) Map 4 (Urban Design Guidelines for Height of Buildings) of the Urban Design  
9 Element of the General Plan of the City and County of San Francisco shall be amended to  
10 change the height for the proposed Replacement Hospital tower site (the portion of the St.  
11 Luke's Campus site that begins 45' from the northwest corner of the property in an easterly  
12 direction along the north property line; then runs 134' easterly along the north property line;  
13 then runs perpendicular 228' southerly to a point perpendicular to the south property line; then  
14 runs 134' westerly along the south property line; then returns 228' in a northerly direction to  
15 the beginning point) from 41'-88' to 145'; and the balance of the Campus (the overall Campus  
16 consisting of Block 6575/Lots 001, 002; Block 6576/Lot 021, and the portion of San Jose  
17 Avenue between Cesar Chavez Street and 27<sup>th</sup> Street and their successor Blocks and Lots)  
18 from 41-88' to 105'.

19 (b) Map 5 (Urban Design Guidelines for Bulk of Buildings) of the Urban Design  
20 Element of the General Plan of the City and County of San Francisco shall be amended to  
21 change the maximum plan dimensions and maximum diagonal plan dimensions for the  
22 proposed St. Luke's Replacement Hospital site from 110' and 125', respectively, to 229' and  
23 285', respectively, and to change the maximum plan dimensions and maximum diagonal plan  
24 dimensions for the proposed St. Luke's medical office building site from 110' and 125',  
25

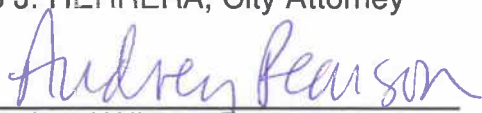


1 respectively, to 204' and 228', respectively, as those sites are described in the California  
2 Pacific Medical Center's Long Range Development Plan.

3  
4 Section 3. This section is uncodified. Effective Date. This ordinance shall become  
5 effective 30 days from the date of passage.

6  
7 APPROVED AS TO FORM:  
8 DENNIS J. HERRERA, City Attorney

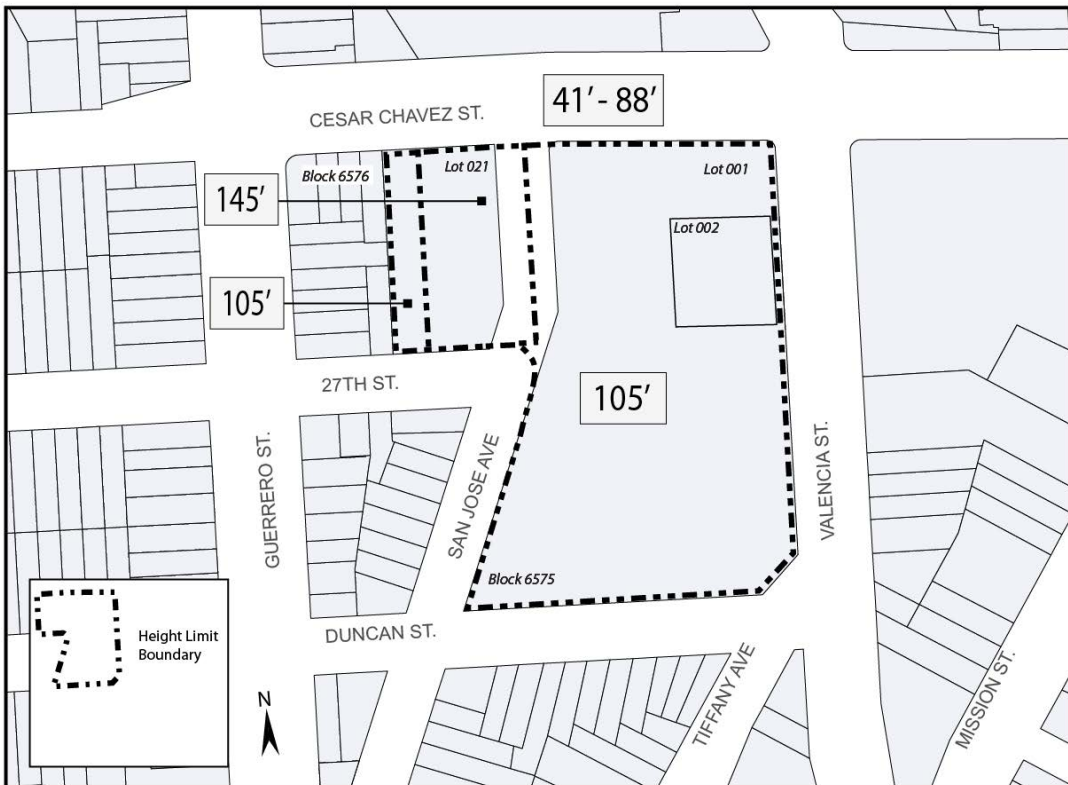
9 By:

  
10 Audrey Williams Pearson  
11 Deputy City Attorney

# General Plan Urban Design Element Map 4



EXISTING

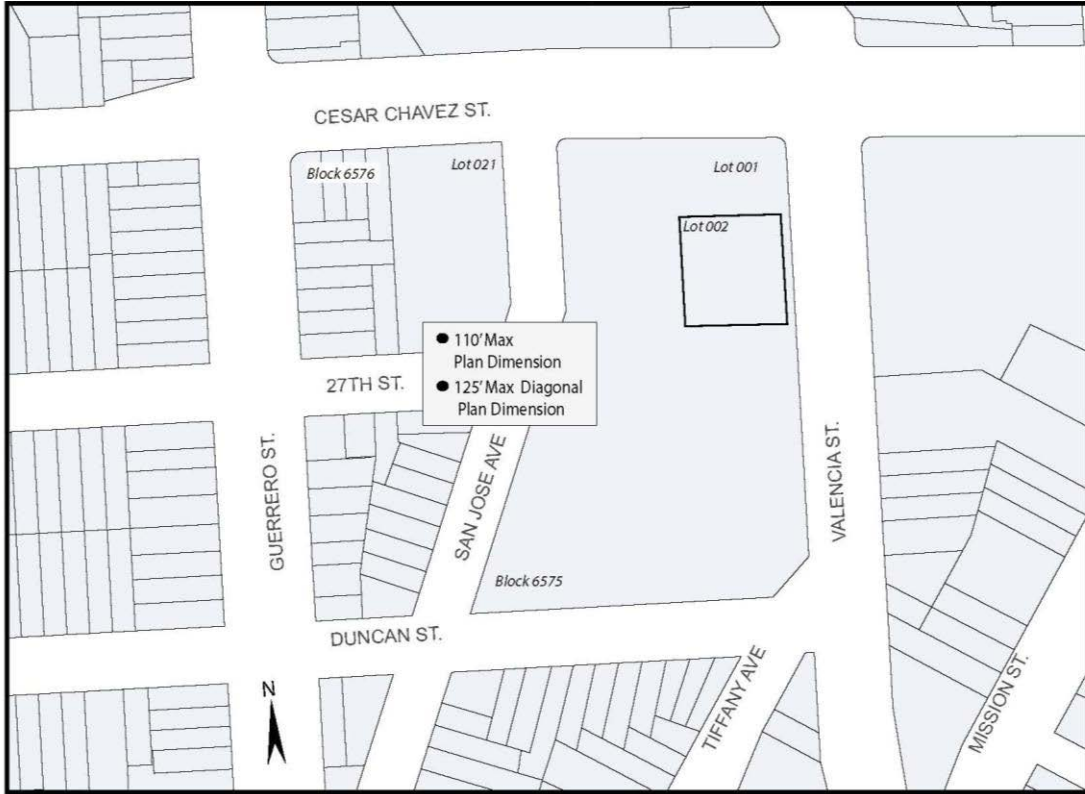


PROPOSED

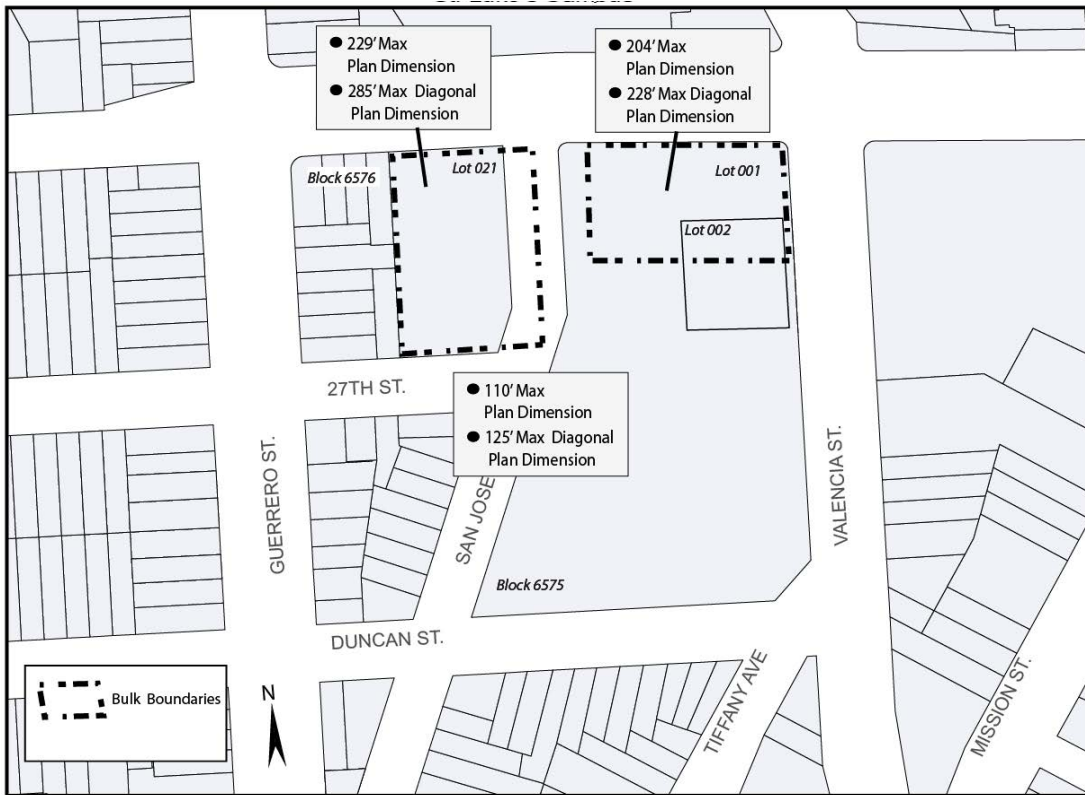


CPMC – St. Luke’s Campus  
 Case Numbers 2009.0886; 2012.0403  
 3555 Cesar Chavez Street

# General Plan Urban Design Element Map 5



EXISTING

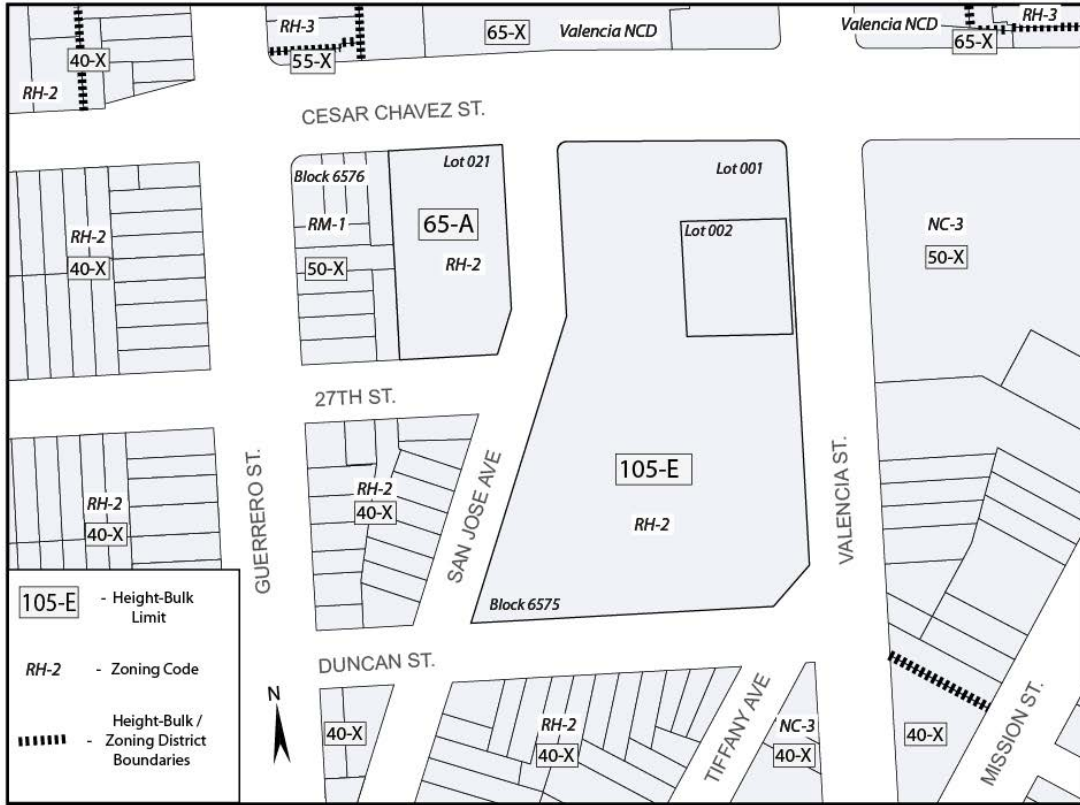


PROPOSED

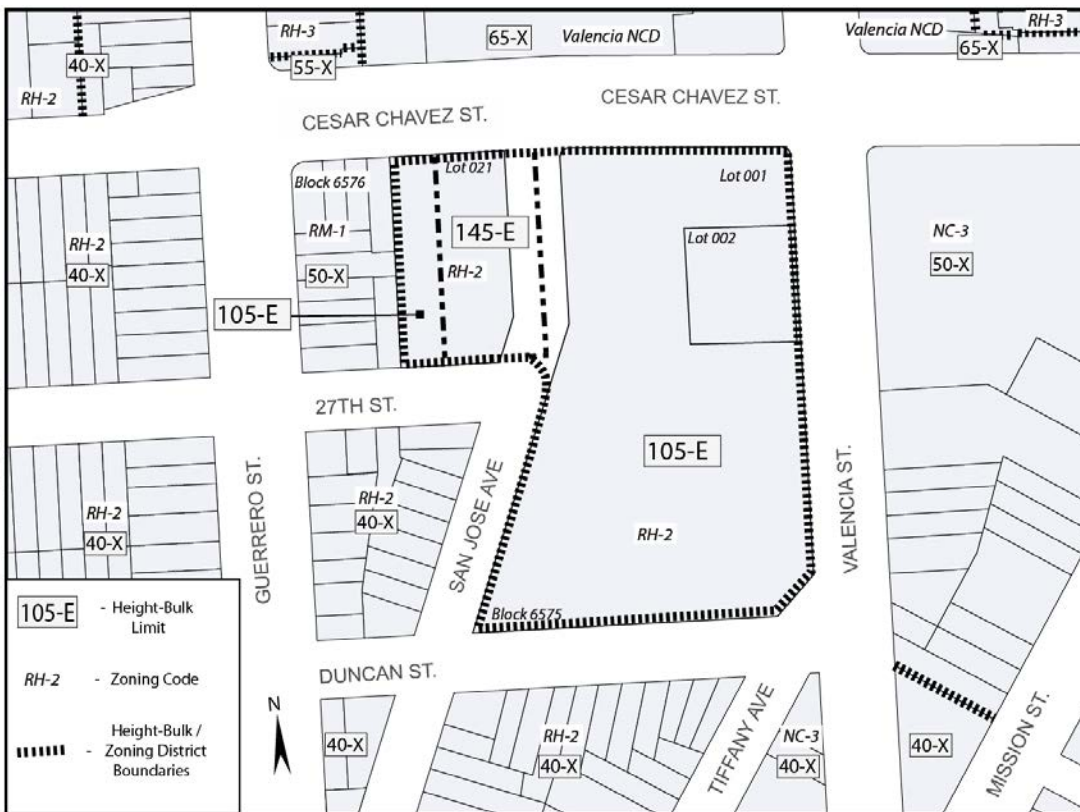


CPMC – St. Luke's Campus  
 Case Numbers 2009.0886; 2012.0403  
 3555 Cesar Chavez Street

# Planning Code Zoning Map Sheet HT07



EXISTING



PROPOSED



CPMC – St. Luke’s Campus  
 Case Numbers 2009.0886; 2012.0403  
 3555 Cesar Chavez Street

**Terms of a proposed revised development agreement between CPMC and CCSF**  
**3/5/13**

ITEM	REVISED AGREEMENT TERMS
<i>Project Description:</i>	120-Bed Hospital at St. Luke's, 274-304-Bed Hospital at Cathedral Hill. Garage spaces at Cathedral Hill Campus (3 buildings) shall not exceed the lesser of 990 total spaces or 125% of the Planning Code minimum required number of spaces.
<b>Payment Schedule</b>	<p>The City and CPMC agree that the cash payments to be made by CPMC to the City for public benefits listed below and further described in this Term Sheet shall be \$14 million per year for 5 years (for a total of \$70 million) starting on the Date Approvals are Finally Granted, provided (a) certain cash payments (as set forth below) shall be made on the Effective Date (which payments equal the amount cash payments previously negotiated to be due on the Effective Date under the Existing Draft DA), and (b) amounts paid by CPMC on the Effective Date shall reduce the amounts payable by CPMC during the 5<sup>th</sup> year following the Date Approvals are Finally Granted so as to not exceed the \$70 million cap.</p> <ul style="list-style-type: none"> <li>• Healthcare Innovation Fund</li> <li>• Payment to Mayor's Office of Housing low-moderate income affordable housing fund</li> <li>• Funding for workforce training programs</li> <li>• Payment in lieu of Transportation Impact Development Fee</li> <li>• Funding for Van Ness and Geary Bus Rapid Transit Projects</li> <li>• Cathedral Hill campus streetscape/pedestrian safety items</li> </ul> <p>Other payments described in this Term Sheet are not included in this \$70 million amount. The City will adjust the payment schedule for these cash payments in the final DA as required to meet this agreement (the "Payment Schedule").</p> <p>The following cash payments shall be due on Effective Date</p> <ul style="list-style-type: none"> <li>- \$3 million for housing</li> <li>- \$3 million for innovation fund</li> <li>- \$300,000 for enforcement and traffic safety at Pacific campus</li> <li>- \$300,000 for Tenderloin lighting and traffic safety</li> <li>- \$300,000 for transit and safety improvements in the neighborhoods around the Cathedral Hill campus</li> </ul>

ITEM	REVISED AGREEMENT TERMS
<i>Healthcare:</i>	
Additional 30 “shelled” beds at Cathedral Hill hospital	The new hospital at Cathedral Hill will have 274 built-out beds, with an additional half-floor of 30 “shelled beds.” These shelled beds shall not be built and placed into operation until the new hospital at St. Luke’s is open and has an average Monday through Friday (excluding weekends and holidays) daily census of at least 90 patients (75 percent of 120 beds) for a CPMC Fiscal Year, as set forth in a Compliance Report.
Hospital Commitment	<p>CPMC must open the new hospital at St. Luke’s within <b>X</b> months from the date that they open the new hospital at Cathedral Hill. X to be determined after looking at new construction schedules but before Board of Supervisor vote on the development agreement. The parties will revise the milestones to reflect the new construction schedule.</p> <p>No change to the existing liquidated damages provisions for failing to open hospital at St. Luke’s, including the annual liquidated payments to the City for up to 20 years.</p>
St. Luke’s Operating Covenant	This obligation is replaced by 50% larger hospital at St. Luke’s, with emergency room, comprehensive general acute care hospital services and centers of excellence as outlined in this term sheet.
St. Luke’s Services	<p>The Services to be provided at St. Luke’s, as set forth in Exhibit F, section 7.b. in the Existing Draft DA, including the centers of excellence in senior and community health, shall remain as set forth in the Existing Draft DA. The hospital at St. Luke’s will be a 120-bed General Acute Care Hospital with comprehensive emergency medical services (pursuant to sections 70451-70459 of Title 22 of the California Code of Regulations).</p> <p>CPMC shall provide the following services on-site at the St. Luke’s Campus: Inpatient services, including cancer, cardiology, endocrinology, respiratory, neurology, gastroenterology, orthopedics, infectious disease, urology, general and vascular surgery, intensive care unit, labor &amp; delivery, gynecology, special care nursery, telemedicine; urgent care; and outpatient services, including internal medicine, ambulatory surgery, cardiology, diagnostic imaging, gastroenterology, laboratory services, obstetrics, orthopedics, hepatology, neurology, oncology, orthopedics, respiratory therapy, child development, retail pharmacy, lab services.</p> <p>As provided in the existing draft DA, Exhibit F, section 7.b.v, CPMC may, in the exercise of its reasonable discretion, and in compliance with San Francisco’s Proposition Q Community Healthcare Planning Ordinance, adjust, modify, reduce, close, eliminate, sell, lease or transfer the programs, services or service lines to meet evolving community needs, operational cost-effectiveness or quality standards, as long as the hospital continues to qualify as a General Acute Care Hospital with emergency medical services, and subject to an agreed upon review</p>



ITEM	REVISED AGREEMENT TERMS
	process with DPH as stated in Development Agreement.
Baseline Charity Care Commitment	<p>1) CPMC shall continue to care each year for a “Baseline” number of total unduplicated charity care and Medi-Cal patients. The Baseline shall be the higher of the annual average of the number of such patients for either (a) calendar years 2009 through 2011 or (b) calendar years 2010 through 2012 - whichever is higher.</p> <p>2) In addition to serving the number of patients described in paragraph (1) above, CPMC shall spend at least \$8 million per year in community benefits. For purposes of this section, “community benefits” shall mean unreimbursed costs incurred by CPMC for items as defined in Guideline 3 of the Catholic Health Association of the United States. A Guideline for Planning and Reporting Community Benefit (CBISA).</p> <p>3) The “Baseline Commitment Carryover”, permitting averaging over 2 years as described in Exhibit F, Section 1.b of the Existing Draft DA, shall apply to the number of patients served in paragraph (1) above and the community benefits costs in paragraph (2) above, each measured separately.</p> <p>4) Liquidated damages for not meeting the number of patients served in paragraph (1) above shall be equal to 150% of the average cost of one unduplicated patient from previous reported year times the shortfall in number of patients. The liquidated damages for the St. Luke’s Opening Commitment, the New Medi-Cal Beneficiaries Commitment, and the Centers for Excellence shall remain as set forth in the Existing Draft DA.</p> <p>5) The “Baseline” number of patients in paragraph (1) above and the community benefits costs in paragraph (2) above shall not include patients served and costs incurred under the New Medi-Cal Beneficiaries Commitment.</p> <p>6) The “Baseline” number of patients in paragraph (1) and the community benefits costs in paragraph (2) above shall be established by an independent third party auditor engaged by the City and CPMC jointly, but paid for by CPMC (as set forth in Section 12.g of Exhibit F of the Existing Draft DA). [If these numbers are determined before execution of a development agreement, the set numbers will be included in the development agreement. If not, they will be determined as soon as possible but in no event later than 3 months following execution.] The annual unduplicated patient counts and community benefit costs shall be verified annually each year thereafter by the same process, at CPMC’s cost, to be completed within 90 days following the end of the applicable year.</p> <p>7) To ensure a smooth transition to changes in healthcare insurance that are occurring as a</p>

ITEM	REVISED AGREEMENT TERMS
	<p>result of the Affordable Care Act, CPMC will maintain charity care policies that are no more restrictive than current charity care policies as set forth in the CPMC Fiscal Year 2011 Charity Report through the end of calendar year 2015, After such time, CPMC shall maintain charity care policies that are in compliance with State law, and CPMC will not deny charity care patients access to inpatient services.</p> <p>8) All of the obligations under this Baseline Commitment section shall begin on the date that Approvals are Finally Granted, and shall continue for a period of ten (10) years thereafter (the "Baseline Commitment Period"). Any partial calendar year will be prorated, as set forth in the Existing Draft DA.</p>
Net New Medi-Cal Lives	<p>1) To reflect the reduced size of CPMC hospitals, CPMC will be the hospital partner for 5,400 new Medi-Cal managed-care lives. Accordingly, the New Medi-Cal Beneficiaries Commitment shall be reduced from 10,000 (as set forth in the Existing Draft DA) to 5,400. The cost of providing care for these New Enrollees shall not be included in the Baseline Commitment.</p> <p>The baseline against which the 5,400 new Medi-Cal managed care lives shall be calculated shall be the number on January 1, 2012 of Medi-Cal managed care beneficiaries that are enrolled in the San Francisco Health Plan and assigned to a provider network that designates CPMC's California, Pacific or Davies Campuses as their primary hospital, as set forth in the Existing Draft DA, plus the number on December 31, 2012 of Healthy Families beneficiaries enrolled in the San Francisco Health Plan and assigned to a provider network that designates CPMC's California, Pacific, or Davies Campuses as their primary hospital (i.e., the Healthy Families participants shall not be "New Enrollees").</p> <p>2) 1,500 of the New Enrollees will come through a partnership with a primary care provider serving the Tenderloin, if and when available from the Effective Date through 12/31/15, consistent with Section 2.g of Exhibit F of the Existing Draft DA . If a new MSO with a primary care provider base located in the Tenderloin becomes available during this period, then CPMC shall contract with such MSO to satisfy this commitment for 1,500 New Enrollees, and CPMC may not avoid this commitment based upon CPMC's satisfaction, before that date, of the New Medi-Cal Beneficiaries Commitment from other MSOs in other locations of the City. [In other words, if a new MSO serving the Tenderloin is formed after CPMC has 5,400 New Enrollees, then CPMC must still seek to enroll 1,500 New Enrollees from the Tenderloin-serving MSO.]</p> <p>3) The New Medi-Cal Beneficiaries Commitment will begin on the Effective Date and continue for 10 years (same as the Existing Draft DA).</p>



ITEM	REVISED AGREEMENT TERMS
	<p>4) Unreimbursed expenditures for the New Medi-Cal Beneficiaries Commitment will be capped at \$5 million per year, subject to annual increases and a 2 year rolling average as set forth in the Existing Draft DA.</p> <p>5) Liquidated damages for not meeting this obligation – same as in Existing Draft DA.</p> <p>6) To qualify as a New Enrollee, the patient must be assigned to a limited provider network that designates CPMC's California, Pacific or Davies hospital and, upon opening, the new hospital at Cathedral Hill, as its primary hospital – same as in Existing Draft DA.</p>
Healthcare Innovation Fund	CPMC shall fund an \$9 M cash endowment of a new healthcare innovation fund to be used to support non-profit health and human service providers, including those that provide community-based care and services that reduce unnecessary hospitalizations. [The timing of payments adjusted in accordance with the Payment Schedule.) These funds shall be administered by the San Francisco Foundation, as outlined in the previous DA
St. Luke's Centers of Excellence	<p>Exhibit F, Section 7(b) (ii) and (ii) shall be revised to strengthen the St. Luke's Centers of Excellence, as follows:</p> <p>ii. CPMC shall establish, operate and maintain at all times during the St. Luke's Operating Commitment a Center of Excellence in Community Health at the St. Luke's Campus. This Center of Excellence shall screen and manage individuals with or at risk for developing chronic diseases, <del>would building</del> on CPMC's existing HealthFirst Program. <u>This Center of Excellence shall and annually offer approximately 800 patients from St. Luke's Health Care Center access to a primary care medical home to support self-management of chronic illness. The Center will recruit and train health workers from the community to work in an interdisciplinary care team setting, providing culturally competent and linguistically appropriate services (as set forth in Section 11 of this Exhibit F). CPMC shall create a community advisory board to provide input into the operation of the Center.</u></p> <p>iii. CPMC shall establish, operate and maintain at all times during the St. Luke's Operating Commitment a Center of Excellence in Senior Health at St. Luke's Campus. This Center of Excellence would be based upon the Hospital Elder Life Program ("HELP") and annually provide care to approximately 600 seniors over age 70. HELP is a targeted program of care for hospitalized older adults designed to prevent or decrease the severity of delirium and increase or maintain function, improve hospital care, maximize the patient's independence at discharge, assist the patient with transition from hospital to home, prevent unplanned readmission, and prevent the hazards of hospitalization that sometimes lead to a cascade in decline. <u>This Center of Excellence shall provide services designed to enable seniors to live successfully in the community and reduce unnecessary hospitalizations. These services may include health education, resource referrals, case management, dementia care, services to reduce isolation,</u></p>

ITEM	REVISED AGREEMENT TERMS
	<p><u>and caregiver support.</u> The Center will provide culturally competent and linguistically appropriate services (as set forth in Section 11 of this Exhibit F).</p>
<p>St. Luke's Medical Office Building (MOB)</p>	<p>Section 7.c(i) and the first paragraph of 7.c(ii) of Exhibit F to the Existing Draft DA shall be modified to read as follows:</p> <ul style="list-style-type: none"> <li data-bbox="961 358 1906 906">i. CPMC shall submit a proposal for the development of a new MOB on the St. Luke's campus on the site of the current Hospital (hereafter in this section, "new MOB") to the Sutter West Bay Board within ninety (90) days after the following conditions are met (but CPMC is not required to submit the proposal before the date that is 3 years after the opening of the new hospital at St. Luke's Campus): (A) the new hospital at St. Luke's has an average Monday through Friday (excluding weekends and holidays) daily census of at least 90 patients (75 percent of 120 beds) for a CPMC Fiscal Year, as set forth in a Compliance Report; and (B) there is demonstrated demand, through formal pre-leasing commitments for at least seventy-five percent (75%) of the proposed seventy two thousand (72,000) rentable gross square feet of the new MOB. A final decision to proceed with construction of the new MOB shall be subject to approval by the Sutter West Bay Board (in the exercise of its sole and absolute discretion) and, if applicable, an agreement with a third party medical building developer and operator, including an acceptable economic structure and financing terms.</li> <li data-bbox="961 943 1906 1393">ii. If the Sutter West Bay Board decides not to proceed with the construction of the new MOB, or fails to act with respect to such decision within six (6) months after its submittal to the Board in accordance with Section 7(c)(i), or if the conditions set forth in Section 7(c)(i) have not been satisfied on or before the date that is five (5) years following the opening of the new Hospital on the St. Luke's campus, then the City may request that the Parties meet and confer in good faith regarding the potential for development of the new MOB. If, within six (6) months following the start of the meet and confer period, CPMC has not agreed to build the new MOB, then upon notice being delivered by City within sixty (60) days after said six (6) month period (the "<b>Option Commencement Date</b>"), a City option shall arise to lease from CPMC the new MOB site solely for purposes of City constructing and operating a medical office building, subject to the following terms and conditions:</li> </ul>

ITEM	REVISED AGREEMENT TERMS
	<p>The following language shall be added to the end of Section 7.c(ii)(B):</p> <p style="padding-left: 40px;">CPMC shall promptly demolish the existing hospital building (1970) tower at no cost to the City before the start of the 55-year term (according to a schedule included in the lease, and subject to force majeure delays) and deliver the site to the City vacant and ready for vertical development of the new MOB.</p> <p>The following language shall be added to the start of Section 7.c(ii)(H):</p> <p style="padding-left: 40px;">Tenants of the building shall include physicians and other healthcare professionals who have admitting privileges at the new hospital on the St. Luke's campus, and City shall not discriminate against any such persons in leasing opportunities for the building. The City shall offer available spaces in the new MOB first to physicians and other healthcare professionals who have admitting privileges at the new hospital on the St. Luke's Campus; next to CPMC, Sutter Health and their affiliates; and thereafter, to the extent vacancies remain, to other physicians and healthcare professionals.</p>
City Healthcare Service System (HSS)	CPMC shall limit premium increases to insurers for HSS to no more than 5% annually for years 1 through 3 (i.e., calendar years 2014 through 2016) and no more than the medical rate of inflation plus 1.5 % annually for years 4 through 10.
<b>Housing:</b>	
Residential Unit Replacement	CPMC shall pay to the Mayor's Office of Housing \$4,138,620 as compensation for units displaced by construction of the Cathedral Hill Medical Office Building. (Same as the Existing Draft DA.) (Not included in the \$70 million referenced above for public benefits or the Payment Schedule.)
Payment to Mayor's Office of Housing low-moderate income housing fund	CPMC shall pay \$36.5 million to the Mayor's Office of Housing. (Increased from \$29 million in the Existing Draft DA; timing of payments adjusted in accordance with the Payment Schedule.)
<b>Workforce:</b>	
Local Hire for construction jobs	30% overall and by trade. (Same as the Existing Draft DA.)

ITEM	REVISED AGREEMENT TERMS
Other construction-related provisions	(Same as the Existing Draft DA.)
Local hire for end-use jobs	CPMC shall make at least 40% of all permanent entry-level hires annually for the duration of the development agreement from the City's workforce system; targeting residents of the Western Addition, Tenderloin, Mission/SOMA, Outer Mission/ Excelsior, Chinatown and Southeastern neighborhoods.
Funding for workforce training programs	CPMC shall pay \$4 million to OEWD to fund workforce training programs. (Increased from \$2 million in the Existing Draft DA, and timing of payments adjusted in accordance with the Payment Schedule.) OEWD shall target these funds to educational institutions and non-profit organizations with an existing track record of working in the impacted communities.
<b>Transportation:</b>	
Payment in lieu of Transportation Impact Development Fee	CPMC shall pay \$6.5 million to MTA. (Reduced from \$10.4m in the Existing Draft DA, to reflect the decreased size of the new hospital at Cathedral Hill, with the timing of payments adjusted in accordance with the Payment Schedule.)
Funding for Van Ness and Geary Bus Rapid Transit Projects	CPMC shall pay \$5 million to MTA. (Same as the Existing Draft DA, but timing of payments adjusted in accordance with the Payment Schedule.)
Cathedral Hill Parking fee	CPMC shall collect and pay to MTA a fee of \$0.50 off-peak and \$0.75 peak per entry and exit from Cathedral Hill garages for 10 years. (Same as the Existing Draft DA.) (Not included in the \$70 million referenced above for public benefits or the Payment Schedule.)
Annual Transportation Surveys	CPMC shall implement the Transportation Demand Management Plans dated March 24, 2011 (each a "TDMP") for each of the St. Luke's, Cathedral Hill, Pacific and Davies Campuses, respectively. CPMC shall conduct, or shall have conducted, at no cost to the City, surveys, annual employee surveys and tri-annual surveys for patients/visitors, each as described in the TDMP, to assess the implementation of each TDMP. The surveys shall commence within one (1) year following the Opening of the new hospital at St. Luke's, the Opening of the new hospital at Cathedral Hill (including for Pacific Campus) and the opening of the Neurosciences Institute Building, respectively. Once started, the surveys shall continue for a total of 10 years. As part of the Compliance Statement submitted by CPMC, CPMC shall provide the results of each survey most recently completed prior to the submission of the Compliance Statement. Each survey shall be completed within 90 days following the end of the applicable 1 year period. CPMC will share the results of these surveys with the Planning Department and

ITEM	REVISED AGREEMENT TERMS
	<p>SFMTA promptly following completion.</p> <p>If any two (2) consecutive surveys show that an applicable target single occupancy vehicle percentage (the "SOV Percentage") is not being attained , CPMC shall consult with Planning Director and the SFMTA Director of Transportation to identify feasible measures that can reasonably be implemented by CPMC to reduce the SOV Percentage. The applicable target reduction of single occupancy vehicles is 15 percent in the aggregate system-wide as described in the TDMP.</p>
Additional Transportation Studies for Cathedral Hill	<p>CPMC shall fund the cost of additional transportation studies up to \$40,000 (in FY 2013 dollars adjusted by the Bay Area Consumer Price Index)(the "Cost Cap") for the operation of the intersections as well as operational characteristics of the Cathedral Hill Campus in its immediate vicinity as determined by the SFMTA to assist the City in monitoring future congestion and effects of the Cathedral Hill project on the City's transportation network. The SFMTA may request such funding up to 3 times, each subject to the Cost Cap, provided it shall not first request such funding until at least 3 years after the new hospital at Cathedral Hill is opened and not more frequently than every 3 years thereafter. If it is determined that area congestion exceeds currently projected levels or that the transportation-related operational characteristics (e.g., freight loading, parking garage access, passenger loading, etc.) of the Campus adversely affect the network, CPMC will consult with the SFMTA to determine if there are additional feasible transportation demand management measures or other measures that might reasonably be implemented by CPMC, at no cost to the City, to reduce its contribution to transportation congestion in the area. (Any payments made by CPMC under this section are not included in the Payment Schedule.)</p>
Additional Funds for Transportation Demand Management at Cathedral Hill	<p>If any of the scheduled transportation surveys for Cathedral Hill employees, patients and visitors show in the aggregate that the Drive Alone mode split percentages for daily use exceed those shown in Table 30 of the CPMC LRDP Transportation Impact Study (June, 2010), CPMC shall pay to SFMTA \$75,000 (in FY 2013 dollars adjusted by the Bay Area Consumer Price Index) within 60 days following the completion of the survey. This funding will be used by SFMTA solely for transportation demand management or transportation improvements related to the Cathedral Hill Campus traffic area as determined by SFMTA, which uses may include, but are limited to, additional employer and visitor social marketing or any parking management program. (Any payments made by CPMC under this section are not included in the Payment Schedule.)</p>
<b>Clipper Cards</b>	<p>1) CPMC shall set up a master account for all employees with Clipper/Wage Works.</p>

ITEM	REVISED AGREEMENT TERMS
	<ol style="list-style-type: none"> <li>2) CPMC shall encourage all employees (new and existing) to enroll and purchase a Clipper Card as a part of its Transportation Demand Management plan. As part of normal TDM activities, CPMC shall promote the use of the subsidy by including TDM/subsidy information in new hire packets and orientation, reinstating the transportation services newsletter, providing TDM communication board in each campus cafeteria, enhancing the TDM page on our intranet, promoting at our annual Transportation Fairs at each campus, and undertaking additional outreach as necessary to drive up adoption and hit our SOV reduction goals.</li> <li>3) CPMC shall share the cost of Clipper Card up to the value of a Fast Pass (currently \$64) equally between employer and employee.</li> <li>4) CPMC shall make good faith efforts to include an “opt-out” provision for Clipper Cards in future labor contracts.</li> </ol>
<b><i>Cathedral Hill Garage Opening Hours</i></b>	CPMC's Cathedral Hill Campus garages shall only be available to visitors, employees and staff of the Campus after 7 p.m.
<b><i>Streetscape/Pedestrian Safety:</i></b>	
Cathedral Hill Campus:	<ol style="list-style-type: none"> <li>1) CPMC shall pay \$4.25 million to the City for pedestrian lighting and sidewalk widening in the Tenderloin. (Reduced from \$8 Million, and timing of payments adjusted in accordance with the Payment Schedule.)</li> <li>2) CPMC shall pay \$200,000 to the City to fund a Tenderloin safe passage pilot grant through a local nonprofit organization. (Same as the Existing Draft DA, but the timing of payments adjusted in accordance with the Payment Schedule.)</li> <li>3) CPMC shall pay \$3 million to the City for enforcement and traffic safety improvements around the CPMC Pacific and California Campuses. (Revised from the Existing Draft DA, with the timing of payments adjusted in accordance with the Payment Schedule.)</li> <li>4) CPMC shall pay \$1.55 million to the City for transit and safety improvements in the neighborhoods around the Cathedral Hill campus.</li> </ol>
St. Luke's Campus	CPMC shall cause to be constructed a specified list of streetscape and pedestrian safety

ITEM	REVISED AGREEMENT TERMS
	improvements, with an estimated value of \$3.3 million (Same as the Existing Draft DA.)
Davies Campus	CPMC shall cause to be constructed a specified list of streetscape and pedestrian safety improvements, with an estimated value of \$475,000 (Same as the Existing Draft DA.)

1 [Term Sheet Endorsement - CPMC Development Agreement]

2  
3 **Resolution endorsing a Term Sheet for revisions to a proposed development**  
4 **agreement with California Pacific Medical Center (CPMC) for CPMC's Long Range**  
5 **Development Plan, including new hospitals at the Cathedral Hill and St. Luke's**  
6 **Campuses, with any final development agreement subject to the approval of the**  
7 **Planning Commission, the Municipal Transportation Authority and the Board of**  
8 **Supervisors.**

9  
10 WHEREAS, California Government Code Section 65864 et seq. authorizes any city,  
11 county, or city and county to enter into an agreement for the development of real property  
12 within the jurisdiction of the city, county, or city and county; and

13 WHEREAS, Chapter 56 of the San Francisco Administrative Code ("Chapter 56") sets  
14 forth certain procedures for the processing and approval of development agreements in the  
15 City and County of San Francisco (the "City"); and

16 WHEREAS, Sutter West Bay Hospitals, a California nonprofit public benefit corporation  
17 doing business as California Pacific Medical Center ("CPMC"), is the owner of certain real  
18 property associated with the CPMC Long Range Development Plan ("LRDP") located at  
19 various locations in the City, generally referred to as the St. Luke's Campus, the Cathedral Hill  
20 (Van Ness and Geary) Campus, the Davies Campus, the Pacific Campus and the California  
21 Campus (the "Project Sites"); and

22 WHEREAS, On March 30, 2012, CPMC filed an application with the City's Planning  
23 Department for approval of a development agreement relating to the Project Sites, and City  
24 staff and CPMC negotiated a proposed development agreement, a copy of which, dated June  
25 20, 2012, is on file with the Clerk of the Board in File No. 120366 (the "Development



1 Agreement"). CPMC also filed applications with the Department for certain development  
2 proposals described in Exhibit B to the Development Agreement (together with the  
3 Development Agreement, the "Project"). The Project includes the "Near Term Projects,"  
4 which generally include new hospitals and medical office buildings at the St. Luke's Campus  
5 and the Cathedral Hill Campus, and a new Neuroscience Institute building at the Davies  
6 Campus, and certain "Long Term Projects" on the Davies Campus and the Pacific Campus;  
7 and

8 WHEREAS, On April 26, 2012, by Motion No. 18588, the Planning Commission  
9 certified as adequate, accurate and complete and as representing the independent judgment  
10 of the Planning Commission, the CPMC LRDP Final Environmental Impact Report ("FEIR")  
11 prepared pursuant to the California Environmental Quality Act ("CEQA") (California Public  
12 Resources Code Section 21000 et seq.). A copy of Planning Commission Motion No. 18588  
13 is on file with the Clerk of the Board of Supervisors in File No. 120357. Also on April 26, by  
14 Resolutions Nos. 18590 and 18591, the Planning Commission recommended to the Board of  
15 Supervisors amendments to the General Plan necessary for implementation of the Near Term  
16 Projects. A copy of Planning Commission Resolution Nos. 18590 and 18591 are on file with  
17 the Clerk of the Board of Supervisors in File Nos. 120458, 120459 and 120460; and

18 WHEREAS, On April 26, 2012, the Planning Commission adopted Motion No. 18602,  
19 approving the Development Agreement substantially in the form presented to the Planning  
20 Commission and recommending that the Board of Supervisors adopt an ordinance to approve  
21 the Development Agreement; and

22 WHEREAS, On April 26, 2012, the Planning Commission also adopted Motion Nos.  
23 18592 through 18601, approving the zoning maps, planning code amendments, general plan  
24 consistency findings, transit demand management plans, and office development  
25 authorizations (together with the Development Agreement and the General Plan

1 Amendments, the "Planning Approvals"), and recommended that the Board of Supervisors  
2 adopt the applicable ordinances to approve the Project consistent with the Planning  
3 Approvals; and

4 WHEREAS, An appeal of the Planning Commission's Motion 18588 certifying the FEIR  
5 was filed with the Board of Supervisors on May 16, 2012, and the Board held duly noticed  
6 public hearings on June 12, 2012, July 17, 2012 and March 12, 2013 to consider the appeal of  
7 the FEIR certification; and

8 WHEREAS, On March 12, 2013, by Motion No. M13-042, the Board of Supervisors  
9 rejected the appeal and affirmed the decision of the Planning Commission to certify the FEIR  
10 and found the FEIR to be complete, adequate and objective and reflecting the independent  
11 judgment of the City and in compliance with CEQA and the State CEQA Guidelines; and

12 WHEREAS, Following the Planning Commission's approval of the Development  
13 Agreement, the Land Use Committee of the Board of Supervisors held public hearings on the  
14 Development Agreement and the Planning Approvals on June 15, 2012, June 25, 2012, July  
15 9, 2012 and July 16, 2012, , and thereafter CPMC, based upon its analysis and community  
16 considerations and working with City staff proposed revisions to the Project; and

17 WHEREAS, The proposed revisions include an increase in size of the new hospital at  
18 the St. Luke's Campus (from 80 beds to 120 beds) and a decrease in the size of the new  
19 hospital at the Cathedral Hill Campus (from 555 beds to 274-304 beds), as more particularly  
20 described in the revised project description submitted to the Planning Department on  
21 February 25, 2013, as revised, a copy of which is on file with the Clerk of the Board of  
22 Supervisors in File No. 130232 (the "Revised Project"), and CPMC has indicated its intent to  
23 revise or amend, as necessary, any materials or applications to reflect the Revised Project;  
24 and  
25

1           WHEREAS, In a memorandum to the Board of Supervisors dated March 5, 2013, the  
2 Planning Department determined that the Revised Project, with a larger hospital at St. Luke's  
3 and a smaller hospital at Cathedral Hill, is a modification of Alternative 3A analyzed in the  
4 FEIR, and that no other changes are proposed at those or any other Campus, and that no  
5 new significant effects or increases in the severity of previously identified significant effects  
6 are expected to result from the Revised Project. A copy of this memorandum is on file with  
7 the Clerk of the Board of Supervisors in File No. 130232; and

8           WHEREAS, In connection with the Revised Project, City staff and CPMC have  
9 negotiated a term sheet, a copy of which is on file with the Clerk of the Board of Supervisors  
10 in File No. 130232 (the "Term Sheet"), to reflect proposed changes to the Development  
11 Agreement as a result of the Revised Project; now, therefore, be it

12           RESOLVED, That the Board of Supervisors endorses the Term Sheet and Revised  
13 Project, and authorizes and urges City staff to negotiate changes to the Development  
14 Agreement and related documents as and to the extent necessary to conform to the Term  
15 Sheet and the Revised Project; and, be it

16           FURTHER RESOLVED, That City staff are urged to make the preparation and  
17 completion of review of a revised Development Agreement and related documents, including  
18 revisions to the Planning Approvals, among their highest priorities with a goal toward  
19 completion of Planning Commission and Board of Supervisors consideration before the  
20 Board's summer recess, and, be it

21           FURTHER RESOLVED, That upon completion of documentation of environmental  
22 review as may be required under CEQA, City staff shall present to the Planning Commission  
23 the revised Development Agreement and any related documents or approvals necessary for  
24 the Revised Project, including new proposed Planning Code text and map amendments,  
25 General Plan amendments, and conditional use authorizations as necessary, and shall

1 forward as appropriate the Planning Commission's recommendations to the Board of  
2 Supervisors, for consideration and action consistent with Chapter 56 and applicable law; and,  
3 be it

4 FURTHER RESOLVED, That upon completion of negotiations and any required  
5 additional environmental review required under CEQA, City staff shall present to the San  
6 Francisco Municipal Transportation Agency (the "SFMTA") the revised Development  
7 Agreement for its review and consideration as to the matters under the SFMTA's jurisdiction;  
8 and, be it

9 FURTHER RESOLVED, Notwithstanding the Board's endorsement of the Term Sheet,  
10 the City retains absolute discretion in connection with consideration of the Revised Project to:  
11 (1) modify the project to mitigate significant adverse environmental impacts, (2) select feasible  
12 alternatives to avoid significant adverse impacts, (3) require the implementation of specific  
13 measures to mitigate significant adverse environmental impacts, or (4) reject the project as  
14 proposed if the benefits of the project do not outweigh otherwise unavoidable significant  
15 adverse impacts.



City and County of San Francisco  
**Tails**  
**Resolution**

City Hall  
1 Dr. Carlton B. Goodlett Place  
San Francisco, CA 94102-4689

**File Number:** 130232

**Date Passed:** March 12, 2013


Resolution endorsing a Term Sheet for revisions to a proposed development agreement with California Pacific Medical Center (CPMC) for CPMC's Long Range Development Plan, including new hospitals at the Cathedral Hill and St. Luke's Campuses, with any final development agreement subject to the approval of the Planning Commission, the Municipal Transportation Agency and the Board of Supervisors.

March 12, 2013 Board of Supervisors - ADOPTED

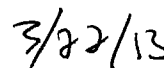
Ayes: 11 - Avalos, Breed, Campos, Chiu, Cohen, Farrell, Kim, Mar, Tang, Wiener and Yee

File No. 130232

I hereby certify that the foregoing  
Resolution was ADOPTED on 3/12/2013 by  
the Board of Supervisors of the City and  
County of San Francisco.

  
Angela Calvillo  
Clerk of the Board

  
Mayor

  
Date Approved