

**Office of the President**

**TO MEMBERS OF THE FINANCE AND CAPITAL STRATEGIES COMMITTEE:**

**ACTION ITEM**

*For Meeting of July 17, 2024*

**UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND NEW HOSPITAL BUILDING, SAN FRANCISCO CAMPUS: BUDGET, SCOPE, EXTERNAL FINANCING, AMENDMENT NUMBER 11 TO THE UC SAN FRANCISCO 2014 LONG RANGE DEVELOPMENT PLAN, AND DESIGN FOLLOWING CERTIFICATION OF AN ENVIRONMENTAL IMPACT REPORT PURSUANT TO THE CALIFORNIA ENVIRONMENTAL QUALITY ACT**

**EXECUTIVE SUMMARY**

UCSF Health is seeking approval for the UCSF Benioff Children’s Hospital (BCH) Oakland New Hospital Building (NHB) project to ensure compliance with regulatory requirements, modernize its facilities, and substantially improve the level of services to patients and their families. The proposed project would construct a new hospital building and a separate parking structure with a rooftop helistop and renovate select spaces in the existing Patient Tower and Diagnostic and Treatment Building following the completion of the new hospital.

UCSF BCH San Francisco and Oakland share the mission of serving the healthcare needs of all children, regardless of status, including race, religion, or financial circumstances. Modernizing BCH Oakland’s facilities is essential to meeting the healthcare needs of the region’s children and is critical to realizing an integrated care model between BCH San Francisco and Oakland.

The UCSF BCH Oakland NHB project is critical to achieve both UCSF Health’s vision for a comprehensive pediatric system of care anchored in the East Bay while also creating financial sustainability for the entire UCSF Health pediatric enterprise. The BCH Oakland NHB would enable world-class programs for Bay Area children, including:

- The finest pediatric trauma center in California with an expanded and modernized emergency room with dedicated resources for trauma.
- Expanded in-patient bed capacity to provide resources to meet the growing needs of the behavioral health crisis for children.
- Expanded and modernized operating rooms supporting the latest technology and care for cardiovascular services, neurosurgery, cancer, and orthopedic services.

- Expanded Intensive Care Unit, medical, and behavioral health bed capacity.
- Improved dedicated space for patient and family support.

The UCSF BCH Oakland NHB project is a central part of UCSF Health’s strategy to become the premier destination for all Bay Area children. This investment would allow East Bay and South Bay families to access UCSF Health for pediatric services. Combined with investments that UCSF Health is making in outpatient centers around the Bay Area, UCSF Health expects inpatient volumes to grow 32 percent and outpatient volumes to grow 34 percent as a result of the NHB and surrounding network.

UCSF presented the Benioff Children’s Hospital Oakland New Hospital Building program to the Health Services Committee at its June 2021 meeting and to the Finance and Capital Strategies Committee in July 2021. In September 2021, the Regents approved preliminary plans funding of \$90 million for the UCSF Benioff Children’s Hospital Master Facilities Plan Phase 2, including the New Hospital Building program, as well as the independent Administrative Support Building and the Infrastructure Improvements projects.<sup>1</sup>

The Regents are being asked to (1) approve the budget of \$1,491,000,000; (2) approve the project scope; (3) approve \$891 million in external financing; (4) certify the UCSF Benioff Children’s Hospital New Hospital Building Project Environmental Impact Report; (5) adopt the Mitigation Monitoring and Reporting Program, (6) adopt the California Environmental Quality Act Findings and Statement of Overriding Considerations; (7) approve Amendment No. 11 to the UC San Francisco 2014 Long Range Development Plan; and (8) approve the design of the UCSF Benioff Children’s Hospital New Hospital Building project.

### **RECOMMENDATION**

The President of the University recommends that the Finance and Capital Strategies Committee recommend to the Regents that:

- A. The 2024-25 Budget for Capital Improvements and the Capital Improvement Program be amended as follows:

From: San Francisco: UCSF Benioff Children’s Hospital Oakland New Hospital

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<sup>1</sup> Preliminary plans funding of \$3 million for the Benioff Children’s Hospital (BCH) Oakland Administrative Support Building (ASB) and \$3 million for the BCH Oakland Infrastructure Improvements project was included in the September 2021 action. Accordingly, preliminary plans funding available for the New Hospital Building was reduced by \$6 million, for a revised total of \$84 million. Pursuant to Delegation of Authority 2629—Delegations of President’s Authority for Capital Project Matters, the UCSF Health President and Chief Executive Officer approved a total project budget of \$63 million for the ASB project. The Regents separately approved a total project budget of \$66 million for the Infrastructure Improvements in September 2023.

Building – preliminary plans – \$84 million funded from hospital reserves.

To: San Francisco: UCSF Benioff Children’s Hospital Oakland New Hospital Building – preliminary plans, working drawings, construction, and equipment – \$1,491,000,000 funded from external financing (\$891 million), gift funds (\$350 million), hospital reserves (\$163 million), and Children’s Hospital grant funds (\$87 million).

- B. The scope of the UCSF Benioff Children’s Hospital Oakland New Hospital Building project be approved. The project shall provide an approximately 277,500-gross-square-foot (GSF) new hospital building, providing approximately 104 patient beds, a new and expanded emergency department, imaging, and surgical services; renovation of approximately 11,800 GSF in the existing Patient Tower and Diagnostic and Treatment Building to enhance inpatient clinical services; and a 270-space, approximately 103,180-GSF parking structure with a rooftop helistop.
- C. The President be authorized to obtain external financing in an amount not to exceed \$891 million plus additional related financing costs to finance the UCSF Benioff Children’s Hospital Oakland New Hospital Building and declare that external financing may be used to reimburse prior expenditures. The President shall require that:
- (1) Interest only, based on the amount drawn, shall be paid on the outstanding balance during the construction period.
  - (2) As long as the debt is outstanding, the general revenues of UCSF Health shall be maintained in amounts sufficient to pay the debt service and to meet the related requirements of the authorized financing.
  - (3) The general credit of the Regents shall not be pledged.
  - (4) Any reimbursements will meet all requirements set forth in Treasury Regulations Section 1.150-2.
- D. Following review and consideration of the environmental consequences of the UCSF Benioff Children’s Hospital Oakland New Hospital Building project, as required by the California Environmental Quality Act (CEQA), including any written information addressing this item received by the Office of the Secretary and Chief of Staff to the Regents no less than 48 hours in advance of the beginning of the Regents meeting, testimony or written materials presented to the Regents during the scheduled public comment period, and the item presentation, the Regents:
- (1) Certify the Environmental Impact Report for the UCSF Benioff Children’s Hospital Oakland New Hospital Building project.
  - (2) Adopt the Mitigation Monitoring and Reporting Program for the UCSF Benioff

Children’s Hospital Oakland New Hospital Building project and make a condition of approval the implementation of applicable mitigation measures within the responsibility and jurisdiction of the San Francisco campus.

- (3) Adopt the CEQA Findings and Statement of Overriding Considerations for the UCSF Benioff Children’s Hospital Oakland New Hospital Building project.
- (4) Approve Amendment No. 11 to the UC San Francisco 2014 Long Range Development Plan.
- (5) Approve the design of the UCSF Benioff Children’s Hospital Oakland New Hospital Building project, San Francisco campus.

## **BACKGROUND**

The UCSF BCH Oakland New Hospital Building (NHB) project is critical to achieving both UCSF Health’s vision for a comprehensive system of pediatric care anchored in the East Bay while also creating financial sustainability for the entire UCSF Health pediatric enterprise.

### ***Project History and Past Actions***

UCSF presented the Benioff Children’s Hospital Oakland NHB program to the Health Services Committee at its June 2021 meeting and to the Finance and Capital Strategies Committee in July 2021. In September 2021, the Regents approved preliminary plans funding of \$90 million for the UCSF Benioff Children’s Hospital Master Facilities Plan Phase 2, including the NHB program, as well as the independent Administrative Support Building and the Infrastructure Improvements projects.<sup>1</sup>

### ***UCSF Benioff Children’s Hospital Oakland***

Just over a decade ago, the Regents, through UCSF Health, became the sole member of Children’s Hospital and Research Center at Oakland (“CHRCO”). Jointly committed to children’s health, UCSF Benioff Children’s Hospitals (BCH) San Francisco and CHRCO, now known as BCH Oakland, remain separately licensed, and BCH Oakland continues to retain its identity and status as a private, not-for-profit public benefit corporation that is exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code. UCSF Health BCH San Francisco and Oakland, however, share a common management structure, the same electronic

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medical record, patient scheduling system, and system support for patient care. BCH Oakland maintains its own medical staff, but over 90 percent of the care is provided by UCSF physician-faculty. All research programs at BCH Oakland are fully integrated into the UCSF School of Medicine.

In FY 2022-23, BCH Oakland had more than 37,000 emergency room visits, 7,600 inpatient hospital stays, performed more than 6,000 surgical cases, and provided more than 284,000 outpatient specialty clinic visits. Approximately 70 percent of pediatric patients receiving care at BCH Oakland are covered by Medi-Cal. BCH Oakland also supports more than 50 pediatric specialty clinics. BCH Oakland is one of the city's largest non-profit employers, with more than 2,600 employees.

BCH Oakland maintains the highest level, Level I, Pediatric Trauma Center designation from the American College of Surgeons, one of only six hospitals in California offering the level of comprehensive care that merits this designation.

Most major trauma victims in Alameda and Contra Costa Counties under age 14 are brought to the Emergency Department at BCH Oakland, along with critically injured children across Northern California and from as far away as Nevada.

As a Federally Qualified Health Center, BCH Oakland provides primary health care and resources at four community-based clinics dedicated to teens and young adults, collectively accommodating around 9,000 unique patients for an average of 36,000 visits annually. The majority of individuals seeking care at these facilities reside in neighborhoods grappling with poverty, gun violence, inadequate housing, food deserts, and other factors affecting their overall health and well-being.

The integration with UCSF Benioff Children's Hospital San Francisco provided stability for the Children's Hospital Oakland after longstanding financial struggles and unsuccessful merger discussions with other health systems. The integration of the two institutions – based on a shared mission of serving the healthcare needs of all children – also enabled long-planned modernization efforts at the site to move forward and allowed the hospital to expand programs and enhance services in Oakland.

Together, UCSF Benioff Children's Hospitals are greater than the sum of their parts. The integration has resulted in national recognition of UCSF Benioff Children's Hospitals, which have ranked among the nation's best for several years in all ten specialties assessed by *U.S. News and World Report* – a feat neither hospital had previously achieved on its own. These specialties include the best program in Northern California in pediatric cancer, as well as nationally ranked programs in cardiology, diabetes, gastrointestinal surgery, newborn specialty care, neurology and neurosurgery, orthopedics, pulmonology, and urology.

Today, BCH Oakland and its associated clinics and programs throughout the region provide vital, world class care to children and their families – regardless of their ability to pay. Alameda and Contra Costa counties are projected to experience double-digit population gains over the

next several decades, generating even greater demand for pediatric health services and increasing pressure on an already distressed and disjointed regional care infrastructure. The NHB and modernized existing facilities would enable BCH Oakland to grow into a comprehensive children's health system that can support the health of the community for decades to come.

***Project Background and Context / Drivers***

Four inpatient facilities at the BCH Oakland campus range in age from about 40 years old to over 95 years old and include the AB Building (completed in 1928), the BC Building (1946), the Diagnostic and Treatment (D+T) Building (1961 and expanded in 1974), and the Patient Tower (1982). To meet the State's seismic safety code requirements, the D+T Building and the Patient Tower were seismically retrofitted as part of the BCH Oakland Master Facilities Plan Phase 1 program, and inpatient services were removed from the AB and BC Buildings.

Limited by its aged and obsolete facilities, BCH Oakland is constrained by inadequate access to private, light-filled healing spaces for patients and their families. Semi-private rooms and wards, for example, in the Neonatal Intensive Care Unit (NICU), result in barriers to patient placement and lowering room utilization by more than 20 percent. This results in a reduction in the functional capacity of staffed beds.

Undersized operating rooms and limited recovery room space negatively affect operational efficiencies, resulting in inadequate capacity for meeting surgical case demand. The size limitation of the existing operating room suites hinders the placement of state-of-the-art equipment and technology, including in-suite imaging and robotic technologies.

The insufficient footprint of the Emergency Department places constraints on the care of patients in the designated Level I Pediatric Trauma Service. Limited access to advanced radiologic imaging within the Emergency Department presents challenges to delivering trauma service care in a timely and efficient manner. The Emergency Department is further challenged by an inability to accommodate the growing needs of the behavioral health crisis for children.

Overall, these accumulated challenges affect the ability to recruit and retain faculty, trainees, and staff to support UCSF's mission of teaching, research, and clinical care.

The proposed NHB project would continue to address seismic safety compliance and modernize facilities. Construction of the NHB would include demolition of the AB and BC Buildings that do not meet State seismic safety law and would provide:

- New pediatric inpatient single-occupancy rooms at the BCH Oakland campus, which are critical to providing behavioral and mental health services,
- Continued conversion of open wards to single-occupancy rooms, and
- Expansion of existing critical services (e.g., surgery).

Modernizing BCH Oakland’s facilities goes beyond meeting the healthcare needs of the region’s children: it is critical for the viability of both UCSF Benioff Children’s Hospitals. Increasing capacity and improving infrastructure in Oakland would enable the two hospitals to fully realize an integrated care model between San Francisco and Oakland. An integrated, modernized BCH Oakland represents the greatest opportunity for growth in the UCSF Benioff Children’s health system – increasing capacity, expanding access for more patients, and ultimately ensuring fiscal sustainability across the enterprise.

### **PROJECT DESCRIPTION**

The proposed project would construct an approximately 277,500-gross-square-foot (GSF) NHB with seven above-grade levels and one full basement level. A separate, new parking garage of 270 spaces with a rooftop helistop deck would be constructed adjacent to the NHB. Following completion of the NHB, approximately 11,800 GSF of select spaces in the existing Patient Tower and D+T Building would be renovated. Several existing structures and temporary trailers would be demolished to allow for the new construction.

The project elements described below would be sequenced in a manner that would allow BCH Oakland to continue to provide critical care to the children of Oakland and surrounding areas.

#### ***Program and Scope***

**Table 1: New Hospital Building Program**

| <b>Functional Space Type</b> | <b>ASF</b>     |
|------------------------------|----------------|
| Inpatient                    | 91,500         |
| Diagnostic and Treatment     | 71,500         |
| Clinical Support             | 6,000          |
| Logistic Support             | 25,000         |
| <b>Total</b>                 | <b>194,000</b> |
| Total GSF                    | 277,500        |
| Efficiency (ASF/GSF)         | 70%            |

Inpatient: The proposed NHB would include 104 new inpatient beds.

Currently, BCH Oakland has 177 licensed beds, but not all of them are operational because of space constraints and limits on bed utilization in shared rooms with restrictions on cohorting patients by age, gender, and infectious disease. As a result, BCH Oakland can only use about 70 percent of the total licensed beds. This constraint on the use of beds contributes to the inability to provide behavioral health beds in the current hospital facilities.

With the completion of the NHB project, the number of inpatient single-occupancy rooms would increase from 39 to 137, with private beds planned to be used at 100 percent capacity and semi-private beds planned for 80 percent capacity. The planned net increase of licensed beds is 31 (18

percent); however, BCH Oakland would increase its availability of beds by approximately 48 percent.

Table 2 provides an overview of the existing and planned number of inpatient beds for the BCH Oakland campus site.

**Table 2: Existing and Planned Inpatient Beds at BCH Oakland, by Bed Type**

| Facility                       | Existing (2024)   | Planned (2030)    |              |            | Change    |            |
|--------------------------------|-------------------|-------------------|--------------|------------|-----------|------------|
|                                | Patient Tower/D+T | Patient Tower/D+T | New Hospital | Total      | Number    | Percent    |
| Acute Care / Medical / Surgery | 85                | 81                | 48           | 129        | 44        |            |
| Acute Care Psych               | 0                 | 0                 | 20           | 20         | 20        |            |
| Pediatric Intensive Care Unit  | 23                | 23                | 0            | 23         | 0         |            |
| Neonatal Intensive Care Unit   | 55                | 0                 | 36           | 36         | (19)      |            |
| <b>Total Operational Beds</b>  | <b>163</b>        | <b>104</b>        | <b>104</b>   | <b>208</b> | <b>45</b> | <b>28%</b> |
| <b>Total Licensed Beds*</b>    | <b>177</b>        | <b>104</b>        | <b>104</b>   | <b>208</b> | <b>31</b> | <b>18%</b> |
| <b>Total Functional Beds**</b> | <b>141</b>        | <b>104</b>        | <b>104</b>   | <b>208</b> | <b>67</b> | <b>48%</b> |

\*Some of the existing licensed beds are not currently operational.

\*\* BCH Oakland has double-occupancy rooms that limit bed utilization due to restrictions on cohorting patients by age, gender, and infectious disease.

The existing NICU has four wards, and all beds cannot be used at the same time due to space constraints. While the number of NICU-licensed beds would be reduced, moving to primarily private beds with three twin-capable beds would allow for much higher utilization.

Diagnostic and Treatment: Primary diagnostic and treatment services provided at BCH Oakland would be expanded with the construction of the NHB, including:

- Seven new surgical suites, replacing the six existing operating suites currently in use in the Patient Tower
- Two new interventional procedure rooms (e.g., cardiac catheterization laboratory, gastrointestinal/endoscopy laboratory)
- A new emergency department with increased efficiency with 42 treatment bays that include four trauma bays, replacing the existing emergency department

Clinical Support: The NHB would add clinical support spaces to support the expanded programs being developed and would compensate for an existing deficit on the campus. The clinical support spaces would include:

- 14 on-call rooms
- Child Life<sup>1</sup> program (school and home programs, as part of California Children's Services, art therapy room, broadcasting studio, and support space)
- Point of Care / Stat Lab to support the Emergency Department and provide the code required quick turnaround time specimen laboratory inside the hospital

Logistic Support: The NHB project would provide logistical support spaces sized to support the entire inpatient campus at the expanded 208-bed capacity. These would include loading dock, materials management, facilities engineering, biomedical engineering, emergency food storage, linen storage, and upgraded paths of travel to support the existing kitchen.

Patient Tower and D+T Building Renovations: Once the NHB is completed, select interior renovations totaling approximately 11,800 GSF would be implemented at the existing Patient Tower and D+T Building to further modernize and support the inpatient clinical and support program needs. These would be full remodels to bring the existing spaces into code compliance, but existing walls and mechanical, electrical, and plumbing systems would be utilized where feasible. The proposed renovations would comprise:

- Relocation of Respiratory Therapy Support from its temporary location in the Outpatient Center basement
- Relocation of Graduate Medical Education space from its temporary location in the Outpatient Center basement, including creating a new resident lounge
- Improvements to Physical Therapy administration and orthotics laboratory

There would also be a new public corridor created between the existing visitor lobby and the new Emergency Department waiting area and registration.

Parking Garage and Helistop: A parking garage of approximately 270 parking spaces (about 103,180 GSF) would be constructed with a rooftop helistop. The current helistop at BCH Oakland is a standalone structure adjacent to the existing AB and BC Buildings and would be demolished as part of the site clearance for the NHB and parking structure. To support emergency transport services while the parking garage is under construction, an interim helistop would be created nearby.

Patients and visitors who frequent BCH Oakland are highly dependent on driving to the site and require onsite parking. To facilitate the arrival of patients and improve their experience, parking facilities also need to be easily navigable and proximate to the locations where services are

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<sup>1</sup> Child Life services provide certified child life specialists to ease the stress and anxiety of childhood illness through therapeutic play, schooling, and family-focused support.

provided. This location would allow for convenient access to the new Emergency Department entrance. The parking options that currently support BCH Oakland patients and visitors typically operate near 100 percent capacity during peak hours.

Site Support Structure: A temporary structure would be constructed to provide a loading area and materials management support while the NHB is under construction. To build the NHB, the existing loading dock must be demolished, and this temporary structure would allow the operations of the existing hospital to maintain operations during construction.

### ***Funding Plan and Financial Feasibility***

The proposed budget of \$1,491,000,000 would be funded as shown by external financing (\$891 million), gift funds (\$350 million), hospital reserves (\$163 million), and Children's Hospital grant funds (\$87 million). (Refer to Attachment 1, Project Sources and Uses.)

The estimated debt service for the \$891 million of external financing at a planning rate of 4.35 percent is \$20,343,500 per year for FY 2024-25 – FY 2029-30 (interest only) and \$50,396,740 for FY 2030-31 – FY 2062-63 (principal and interest) over a 35-year term.

The UCSF BCH Oakland NHB is a central part of UCSF Health's strategy to become the premier destination for all Bay Area pediatric patients and would allow more East Bay and South Bay families to access UCSF Health for pediatric services. Combined with investments that UCSF Health is making in outpatient centers around the Bay Area, UCSF Health expects inpatient volumes to grow 32 percent and outpatient volumes to grow 34 percent as a result of the new building and surrounding network. In FY 2023-24, UCSF Benioff Children's Hospitals have a combined 10.6 percent EBIDA with a total revenue of \$1.7 billion. By 2036 (five years after opening), UCSF Benioff Children's Hospitals is expected to have a combined 12.2 percent EBIDA with total revenues of \$2.5 billion.<sup>1</sup>

As of June 30, 2024, UCSF Health had a 5.4 percent operating margin, 4.1x debt service coverage, and 149 days' cash on hand. Modified net income margin, modified debt service coverage, and days' cash on hand include the adjustments allowed under the University Debt Policy. Over the ten-year projection period, the modified net income margin is projected to range from a low of 7.2 percent (FY 2024-25) to a high of 11.1 percent (FY 2031-32), above the minimum requirement of equal to or greater than zero percent. Modified debt service coverage is projected to range from a low of 4.3x (FY 2024-25) to a high of 6.1x (FY 2032-33), above the minimum requirement of equal to or greater than 3x. Days' cash on hand is projected to range from a low of 149 days (FY 2023-24) to a high of 264 days (FY 2033-34), above the minimum requirement, which is 90 days effective July 1, 2025.

Additional information may be found in Attachment 2A, Summary of Financial Feasibility, and

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<sup>1</sup> Although the Regents and BCH Oakland remain separate legal entities, BCH Oakland's financial performance is reflected on UCSF Health's books and on its financial statements consistent with Governmental Accounting Standards Board ("GASB") standards, and UCSF Health will be financing the project. The financial feasibility assumptions reflected in Attachments 2A and 2B reflect these facts.

Attachment 2B, UCSF Health System – Projected Financial Performance.

Status of Fundraising

The fundraising goal for the BCH Oakland NHB project is \$350 million. UCSF would advance unrestricted reserves as necessary to cover contracting requirements until gifts are received. No standby or interim financing is requested for the project.

***Project Delivery and Schedule***

In September 2023, the Regents approved using the Integrated Form of Agreement (IFOA), an Integrated Project Delivery method, for the NHB project. An integrated team performs the design and construction planning, including UCSF, BCH Oakland, the architect, the general contractor, and key trades working to optimize program quality with a cost target set by BCH Oakland. The IFOA process optimizes the use of Lean tools and processes. In addition to minimizing risk, industry data suggests that the IFOA delivery method provides greater schedule predictability, cost and budget control, quality of design and construction, fewer changes, greater ability to manage changes, increased morale, and overall value delivered.

Construction of the site and make-ready work (including demolition of the AB and BC Buildings and temporary trailers) is scheduled to begin in June 2025. Construction of the parking structure is planned to begin in June 2026 and be completed in September 2027. Construction of the NHB is planned to begin in September 2026 and be completed in December 2030, with the first patient planned in 2031. Renovations of select spaces in the existing Patient Tower and D+T Building will begin when the NHB is completed and are planned for completion in December 2031.

**PROJECT DESIGN**

***Site Conditions and Location***

The approximately 11-acre BCH Oakland campus site is located at 747 52nd Street, in the northern portion of Oakland, in Alameda County. The campus site is generally bounded by 53rd Street to the north, Highway 24 to the east, Martin Luther King Jr. Way, and the elevated BART tracks to the south and west. (See Attachment 4 – Project Location Map.)

The AB and BC Buildings, Bruce Lyons Research Center and Addition, the existing standalone helistop, and trailers would be demolished to clear the site for the NHB structure.

***Project Design and Physical Design Framework***

The architecture of the NHB is informed by the functional needs of the BCH Oakland campus. While the NHB is a significant addition to the BCH Oakland campus, it serves as a connector to the existing inpatient hospital and services to support a single patient-centric care environment. The NHB is designed to support BCH Oakland’s youngest patients, their families, and their

caregivers.

The NHB would be comprised of a podium (Levels One through Four) with exterior materials complementing the existing hospital and glass-wrapped inpatient bed floors (Levels Five through Seven) that maximize the opportunity for natural light and views. To support the new Emergency Department, ambulance and walk-in drop-off areas would separate patient flows from the existing hospital main entrance.

The building design prioritizes access to daylight and views to support both the patient and staff experiences on the upper floors. Access to outdoor space for patient families and staff is critical in the BCH Oakland urban campus. The design provides a secured ground floor play garden adjacent to the Emergency Department for positive distractions for patient families. Also, on the northern end of Level Five, outdoor space with hardscape and plantings would be created for families and staff with areas for contemplation and physical activity. At the southern end of Level Five, a required outdoor area for the adjacent Behavioral Health program would be provided.

A new magnolia tree that has been propagated from the treasured magnolia tree in the existing courtyard would be planted, accompanied by plaques and information to honor the history of the institution and the original baby hospital and to connect patients, visitors, and employees to the history of the campus. The existing tree would be removed for the construction of the NHB.

The parking structure would be constructed of concrete with an artistic façade element visible from the Emergency Department drop-off area.

### ***Sustainable Practices***

The NHB would achieve a minimum Leadership in Energy and Environmental Design (LEED™) Gold certification. The entire project would incorporate electrification and would not utilize natural gas for building heat or hot water generation. Additionally, the building would have a high-performance exterior envelope design and outdoor bicycle parking.

This project has been analyzed by the UC Operational Carbon and Energy Assessment for New Construction Tool (OCEAN Tool) (Attachment 6). The OCEAN Tool identifies high-level estimates of target site energy use, utility costs, and operational greenhouse gas emissions for the proposed project. Building performance metrics are compiled within UC's capital projects database and will be utilized to compare and assess future projects. Specific sustainability strategies include:

Transportation: Approximately 120 electric-vehicle-charging spaces would be included to encourage the use of less impactful modes of transit. Bicycle and micro-mobility parking would be provided adjacent to the main entrances.

Sustainable Site: Outdoor lighting fixtures would be selected to minimize light pollution. Landscaped areas would include native and climate-adaptive species.



Water Efficiency: A water use reduction of 35 percent is the target for this project. All water consumption would be metered as well to ensure that all systems are performing efficiently and that the water use profile can be understood. Water efficiency would be achieved via the use of low-flow fixtures for all showers, water closets, sinks, and other fixtures.

Energy and Atmosphere: A combination of heat recovery chillers and air source heat pumps would be used to heat and cool the space. An electric boiler would be used to heat the domestic water combined with energy from the heat exchanger; cooling towers would be used for heat rejection. All primary energy end uses would be metered to ensure that the building is performing properly. The building would be comprehensively commissioned, including envelope commissioning, to verify the efficiency of all systems.

Materials and Resources: Healthy and sustainable materials would be selected, including those with environmental product declarations, health product declarations, and various other sustainable attributes to create a healthy environment. A construction and demolition waste management plan would minimize the amount of waste going to landfill.

Health and Human Experience: Indoor air quality is an important attribute of the space, so systems would be designed to be high-performing. Spaces would have wildfire and smoke protection and carbon-monoxide monitoring, with activated carbon filters to support the 100 percent outside-air system. All wet-applied materials would fall below certain volatile-organic-compound thresholds to support the health of occupants. Occupants would have access to both lighting and thermal comfort controls in all regularly occupied spaces.

Parking Structure: The parking structure will achieve, at a minimum, Parksmart “Silver” certification and will include sustainable features such as:

- Maximize the use of fly-ash and locally mined aggregates in the concrete, use of recycled materials (including reuse of crushed existing asphalt)
- Minimize soil loss by keeping the disturbed area on-site to an absolute minimum; use silt fencing, earth berms, and early seeding to minimize erosion
- Provide Electric Vehicle Charging Stations
- Use high-efficiency, light-emitting-diode lighting and controls, along with light-color interior paint to reduce energy demand

### ***Long Range Development Plan (LRDP)***

An amendment to the UC San Francisco 2014 LRDP (2014 LRDP) is proposed to add BCH Oakland to the LRDP (Attachment 9). The LRDP Amendment would include a new chapter for the Benioff Children’s Hospital Oakland campus site with site-specific objectives to 1) modernize the campus to ensure compliance with regulatory requirements and improve the level

of services to patients and their families, 2) address seismically compromised and obsolete buildings, and 3) develop new facilities to accommodate programmatic needs. The new chapter would include functional zones for the campus site consistent with the NHB project. In addition, several smaller off-site locations that are part of BCH Oakland would be added to the Smaller Owned Sites chapter of the LRDP, the existing and proposed space program of the LRDP would be revised to reflect BCH Oakland and the proposed NHB project, and other necessary conforming changes would be made to the LRDP.

The proposed 2014 LRDP as amended would become the primary planning document for BCH Oakland and would guide the development of the campus site through an approximate horizon year of 2035. Attachment 9 contains the proposed revisions to the 2014 LRDP.

### **CONSISTENCY WITH SELECT UC POLICIES AND PRACTICE**

This project is in compliance with the UC Policies for Seismic Safety, Sustainability, and Small/Disabled Veteran Business Enterprises (see Attachment 7).

### **CEQA COMPLIANCE**

A summary of the California Environmental Quality Act (CEQA) process and the environmental impacts of the proposed project are provided in Attachment 10. Pursuant to CEQA, an Environmental Impact Report (EIR) for the UCSF Benioff Children's Hospital Oakland New Hospital Building Project, including LRDP Amendment #11 to the UC San Francisco 2014 LRDP has been prepared (Attachment 11). Findings and a Statement of Overriding Considerations have been prepared to support the University's determination regarding impacts, mitigation measures, and CEQA Alternatives (Attachment 12).

### **UCSF'S AND BCH OAKLAND'S COMMITMENT TO COMMUNITY**

UCSF and BCH Oakland are dedicated to facilitating open and ongoing engagement with the City of Oakland and the local community, supporting UCSF's commitment to strengthening and broadening access to care for young patients and their families. The project includes a letter of commitment with the City of Oakland, a Community Workforce Agreement with the Building and Construction Trades Council of Alameda County, and ongoing community outreach and engagement as part of these efforts.

#### ***Letter of Commitment***

Prior to the issuance of the Notice of Preparation, UCSF and BCH Oakland met regularly with the City of Oakland leadership to identify and discuss areas of interest and mutual cooperation. These discussions were memorialized in a Letter of Commitment to the City of Oakland, outlining a UCSF / BCH commitment to working cooperatively and establishing protocols and

processes that BCH Oakland will follow with respect to the entitlement and completion of the construction of the project. The letter outlined voluntary objectives for community engagement and workforce development.

Community Engagement: Outreach and meetings for the BCH Oakland projects (ASB, NHB, and Infrastructure Improvements) have been held with the public to describe the project, introduce the team, discuss project timelines, and address concerns and questions as enumerated in Attachment 13. Ongoing engagement is planned throughout the project, including:

- Regular notifications about meetings and construction impacts to the neighborhood in the form of a website, press, email lists, newsletters, postcards, and flyers
- Community meetings for the general public and interested stakeholders regarding the entitlement of the project, at least quarterly, to keep the community informed of any changes to the scope, character, or extent of the project
- Quarterly meetings held with BCH Oakland's Community Advisory Board (CAB) members, providing modernization project updates. BCH Oakland's CAB is comprised of 17 members representing a cross-section of the diverse Oakland community, including representatives from community health clinics and community leaders, providing hospital staff and leadership advice and guidance on critical hospital programs and initiatives
- Readily accessible information about the project through specified online platforms
- One-on-one emails, meetings, small neighborhood group meetings, as appropriate with immediately adjacent neighbors and other stakeholders
- Publication of contact information for the community to ask questions and communicate concerns and complaints

Community Workforce Agreement: To underscore a commitment to local economic impact, UCSF and BCH Oakland agreed to use their best efforts to meet the goal of 30 percent of construction work hours to workers from Alameda, Contra Costa, and San Francisco Counties and ten percent of construction expenditures to small or disadvantaged businesses. To help reach this goal, UCSF and BCH Oakland have negotiated a community workforce agreement for the construction of the New Hospital Building with the Building and Construction Trades Council of Alameda County.

**KEY TO ACRONYMS**

|           |   |
|-----------|---|
| 2014 LRDP | UC San Francisco LRDP   |
| ASB       | Administrative Support Building                               |
| ASF       | Assignable-Square-Foot  |
| BCH       | Benioff Children’s Hospital                                   |
| CAB       | Community Advisory Board                                      |
| CEQA      | California Environmental Quality Act                          |
| CHRCO     | Children’s Hospital & Research Center at Oakland              |
| D+T       | Diagnostic and Treatment                                      |
| DVBE      | Disabled Veteran Business Enterprise                          |
| EBIDA     | Earnings Before Interest, Depreciation, and Amortization      |
| EIR       | Environmental Impact Report                                   |
| GSF       | Gross-Square-Foot   |
| IFOA      | Integrated Form of Agreement                                  |
| LEED™     | Leadership in Energy Environmental Design                     |
| LRDP      | Long Range Development Plan                                   |
| NHB       | New Hospital Building   |
| NICU      | Neonatal Intensive Care Unit                                  |
| OCEAN     | Operational Carbon and Energy Assessment for New Construction |
| SBE       | Small Business Enterprise                                     |

**ATTACHMENTS**

|                |   |
|----------------|---|
| Attachment 1:  | Project Sources and Uses  |
| Attachment 2A: | Summary of Financial Feasibility  |
| Attachment 2B: | UCSF Health System – Projected Financial Performance  |
| Attachment 3A: | <a href="#">Comparable Project Information – Scatterplot and Table: New Hospital Building</a>   |
| Attachment 3B: | <a href="#">Comparable Project Information – Scatterplot and Table: Parking Garage</a>  |
| Attachment 4:  | <a href="#">Project Location Map</a>  |
| Attachment 5:  | <a href="#">Design Graphics</a>   |
| Attachment 6:  | <a href="#">UC Operational Carbon and Energy Assessment for New Construction (OCEAN) Tool</a>   |
| Attachment 7:  | Statement of Compliance with Select UC Policies   |
| Attachment 8:  | 2014 LRDP:<br><a href="https://ucsf.app.box.com/s/a2er9dbpbik1tuwiz0bv2sscywv9d7q">https://ucsf.app.box.com/s/a2er9dbpbik1tuwiz0bv2sscywv9d7q</a>   |
| Attachment 9:  | <a href="#">LRDP Amendment #11 to the 2014 LRDP</a>   |
| Attachment 10: | Environmental Impact Summary  |
| Attachment 11: | UCSF Benioff Children’s Hospital New Hospital Building Environmental Impact Report (EIR) and Mitigation Monitoring and Reporting Program<br>Draft EIR:<br><a href="https://ucsf.box.com/s/p8efmcrwpgxccbetvzncbbnylkm2j9g">https://ucsf.box.com/s/p8efmcrwpgxccbetvzncbbnylkm2j9g</a><br>Final EIR: |

|                |   |
|----------------|---|
|                | <a href="https://ucsf.app.box.com/s/8a8113t1js2dluzcy8x0qzh99ev0rbgg">https://ucsf.app.box.com/s/8a8113t1js2dluzcy8x0qzh99ev0rbgg</a> |
| Attachment 12: | <a href="#">CEQA Findings and Statement of Overriding Considerations</a>  |
| Attachment 13: | How UCSF has Engaged the Community and Gained Support for the Project   |

**ATTACHMENT 1**

**PROJECT SOURCES AND USES  
UCSF BENIOFF CHILDREN’S HOSPITAL OAKLAND NEW HOSPITAL BUILDING**

| SOURCES                    | Total                  | % of Total <sup>1</sup> |
|----------------------------|------------------------|-------------------------|
| External Financing         | \$891,000,000          | 59.8%                   |
| Gift Funds                 | \$350,000,000          | 23.5%                   |
| Hospital Reserves          | \$163,000,000          | 10.9%                   |
| Children’s Hospital Grants | \$87,000,000           | 5.8%                    |
| <b>Total Sources</b>       | <b>\$1,491,000,000</b> | <b>100%</b>             |

| USES                                      |                     |                        |                     |                        |                         |
|---|---------------------|------------------------|---------------------|------------------------|-------------------------|
| Categories                                | Parking Structure   | New Hospital           | Renovations         | Total                  | % of Total <sup>1</sup> |
| Site Clearance                            | \$1,500,000         | \$40,800,000           | -                   | \$42,300,000           | 3.2%                    |
| Building <sup>2</sup>                     | \$39,901,000        | \$714,878,000          | \$18,200,000        | \$772,979,000          | 57.7%                   |
| Exterior Utilities                        | \$1,500,000         | \$30,900,000           | -                   | \$32,400,000           | 2.4%                    |
| Site Development                          | \$1,530,000         | \$28,049,000           | -                   | \$29,579,000           | 2.2%                    |
| A/E Fees <sup>3</sup>                     | \$468,000           | \$208,037,000          | \$2,106,000         | \$210,611,000          | 15.7%                   |
| Campus Administration <sup>4</sup>        | \$385,000           | \$12,227,000           | \$914,000           | \$13,526,000           | 1.0%                    |
| Surveys, Tests, Plans <sup>5</sup>        | \$615,000           | \$5,701,000            | \$34,000            | \$6,350,000            | 0.5%                    |
| Special Items <sup>6</sup>                | \$9,530,000         | \$104,228,000          | \$244,000           | \$114,002,000          | 8.5%                    |
| Contingency                               | \$2,719,000         | \$113,638,000          | \$1,473,000         | \$117,830,000          | 8.8%                    |
| <b>Total P-W-C<sup>7</sup></b>            | <b>\$58,148,000</b> | <b>\$1,258,458,000</b> | <b>\$22,971,000</b> | <b>\$1,339,577,000</b> | <b>100%</b>             |
| Group 2 and 3 Equipment                   | \$350,000           | \$150,183,000          | \$890,000           | \$151,423,000          | n/a                     |
| Interest During Construction <sup>8</sup> | -                   | -                      | -                   | -                      |                         |
| <b>GRAND TOTAL</b>                        | <b>\$58,498,000</b> | <b>\$1,408,641,000</b> | <b>\$23,861,000</b> | <b>\$1,491,000,000</b> |                         |

<sup>1</sup> Because of rounding, some totals may not correspond to the sum of the separate parts.

<sup>2</sup> Building construction includes General Contractor, subcontractors, Facilities Management consulting and project insurance.

<sup>3</sup> A/E Fees include the executive architect and design professional consultants, and external project/construction management.

<sup>4</sup> Campus Administration includes project management, contract administration, information technology staff, and Designated Campus Fire Marshall.

<sup>5</sup> Surveys, Tests, and Plans include site surveys, plans, and specifications.

<sup>6</sup> Special Items include peer reviews, hazardous material, and environmental testing, Environmental Health and Safety reviews, temporary relocations, agencies review, CEQA analyses, and pre-design studies.

<sup>7</sup> Total cost for preliminary plans (P), working drawings (W), and construction (C).

<sup>8</sup> UCSF plans to utilize income generated from current operations and hospital reserves to pay for interest incurred during the construction period.

| <b>PROJECT STATISTICS</b>                               |                          |                     |                    |
|---|--------------------------|---------------------|--------------------|
|   | <b>Parking Structure</b> | <b>New Hospital</b> | <b>Renovations</b> |
| Gross Square Feet (GSF)                                 | 103,180                  | 277,500             | 11,800             |
| Assignable Square Feet (ASF)                            | -                        | 194,000             | 11,800             |
| Efficiency Ratio (ASF/GSF)                              | 90%                      | 70%                 | 100%               |
| Building Cost/GSF                                       | \$387                    | \$2,576             | \$1,542            |
| Building Cost/GSF without Helistop Premium <sup>9</sup> | \$355                    | -                   | -                  |
| P-W-C Cost/GSF  | \$564                    | \$4,535             | \$1,947            |
| P-W-C Cost/GSF without Helistop Premium <sup>9</sup>    | \$528                    | -                   | -                  |

***Cost Drivers:***

- Poor soils prone to liquefaction have led to the need for a substantial and expensive foundation solution.
- Helistop on the roof of the garage adds cost for the helipad itself, additional structural supports, and a gurney elevator.
- The garage has an atypical geometry due to its location at the back corner of the triangle-shaped site, and as a result, the campus cannot take advantage of more efficient construction methods like precast elements.
- The garage is relatively small in size. As a result, the more substantial costs associated with it, like the added helistop and expensive foundation system, are not able to be distributed across a larger building, making its cost per space and cost per GSF significantly higher than that of larger garages that benefit from economy of scale

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<sup>9</sup> The rooftop helistop adds \$3.3 million to the Building cost and \$3.7 million to the total P-W-C cost of the Parking Structure. Comparable project analyses (Attachment 3B) use the cost information without the helistop premium.

**SUMMARY OF FINANCIAL FEASIBILITY**

| <b>SAN FRANCISCO CAMPUS</b>   |   |
|---|---|
| Project Name  | <b>UCSF Benioff Children’s Hospital Oakland<br/>Infrastructure Improvements</b> |
| Project ID  | <b>9951197</b>  |
| Total Estimated Project Costs   | <b>\$1,491,000,000</b>  |
| Anticipated Interest During Construction (included in the total estimated project cost) | <b>\$0</b>  |

| <b>PROPOSED SOURCES OF FUNDING<sup>1</sup></b> |                        |
|--|------------------------|
| External Financing                             | \$891,000,000          |
| Gift Funds                                     | \$350,000,000          |
| Hospital Reserves                              | \$163,000,000          |
| Children’s Hospital Grant Funds                | \$87,000,000           |
| <b>Total</b>                                   | <b>\$1,491,000,000</b> |

<sup>1</sup> Fund sources for external financing shall adhere to the University policy on repayment for capital projects.

**Externally Financed Projects**

| <b>FINANCING ASSUMPTIONS</b>                                |   |
|---|---|
| External Financing Amount                                   | \$891,000,000   |
| Anticipated Repayment Source                                | Hospital Reserves (built from EBIDA margin)   |
| Anticipated Fund Source                                     | Hospital Reserves   |
| Financial Feasibility Rate                                  | 4.35%   |
| First Year of Repayment (e.g., FY 20XX)                     | FY 2025 (Interest only); FY 2031 (Principal)  |
| Term (e.g., 30 years; indicate if any year’s interest only) | 35 years (Interest only FY 2025 – FY 2030)  |
| Final Maturity (e.g., FY 20XX)                              | FY 2063   |
| Estimated Average Annual Debt Service                       | \$50,396,740 estimated average principal and interest payments for FY 2031 – FY 2063;<br>\$20,343,500 estimated average interest payments for FY 2025 – FY 2030 |

| <b>FINANCING BENCHMARKS</b>     |                         |                                    |                    |
|---------------------------------|-------------------------|------------------------------------|--------------------|
| <b>Measure</b>                  | <b>Metric</b>           | <b>Approval Threshold</b>          | <b>Requirement</b> |
| Modified Net Income Margin*     | 7.2% (min), FY 2025     | ≥ 0.0%                             | Must Meet          |
| Modified Debt Service Coverage* | 4.3x (min), FY 2025     | ≥ 3x                               |                    |
| Days’ Cash on Hand              | 149 days (min), FY 2024 | ≥ 90 days<br>(effective July 2025) |                    |

\* Excludes non-cash pension and OPEB as allowed under University Debt Policy.



**UCSF HEALTH SYSTEM  
PROJECTED FINANCIAL PERFORMANCE**

**Material Financial Disclosures and Assumptions – Fiscal Years 2024 - 2034**

This attachment includes an overview of the consolidated UCSF Health financial projections and a summary of the key projection assumptions.

The UCSF Health financial projections are based on the current year forecasted results for FY 2023-24 and the most recent Ten-Year Plan (TYP) as approved in fall 2023.

The projections include \$2.75 billion in overall debt financing assumed to finance major capital projects, including the New Hospital at UCSF Helen Diller Medical Center at Parnassus Heights (NHPH) (\$1.73 billion in remaining debt to be issued) and the Benioff Children’s Hospital Oakland New Hospital Building program (\$1.02 billion in debt to be issued).

Over the ten-year projection period, the modified net income margin is projected to range from a low of 7.2 percent (FY 2024-25) to a high of 11.1 percent (FY 2031-32), above the minimum requirement of equal to or greater than zero percent. Modified debt service coverage is projected to range from a low of 4.3x (FY 2024-25) to a high of 6.1x (FY 2032-33), above the minimum requirement of equal to or greater than 3x. Days’ cash on hand is projected to range from a low of 149 days (FY 2023-24) to a high of 264 days (FY 2033-34), above the minimum requirement, which is 90 days effective July 1, 2025.

**UCSF Health Assumptions**

- Operating Revenue is projected to increase annually, on average, by 6.6 percent from FY 2023-24 through FY 2033-34.
  - Inpatient volumes are projected to increase annually by 2.5 percent. Inpatient volumes are affected by capacity constraints at UCSF Medical Center in FY 2024-25. These are offset by outpatient volume increases of four percent (CAGR) through the projection period and differentially higher Tertiary and Quaternary volume growth for favorable revenue rate increases.
  - Commercial mix increased nominally through the projection period from service mix changes (i.e. service lines with higher commercial mix grew at a higher rate compared to the other service lines). No overt increases were assumed.
- Modified Operating Expenses (excluding non-cash pension and OPEB expenses) are projected to increase annually, on average, by 6.4 percent from FY 2023-24 through FY 2033-34. Increases in expenses are expected to be tempered by management action plans, including labor management action plans, optimization of capacity utilization, and reductions in supplies expenses, which commenced in FY 2023-24.

- Labor FTE increases were modeled at 50 percent of the rate of volume, yielding annual FTE/AOB efficiencies of 0.6 percent. Extensive work has been performed in FY 2023-24 through consulting engagements and other in-house committees to identify opportunities for FTE efficiencies and to establish relevant benchmark performance targets at a department level. Additional systems and processes are also being implemented to monitor FTE utilization and allow for daily time tracking.
- Overall operating expense per adjusted day increases 3.1 percent annually.
- The fall 2023 TYP incorporates incremental revenue and expense growth associated with planned capital projects (preliminary estimates):
  - Bayfront Medical Building and Peninsula Outpatient Center (expected to open in FY 2024-25)
  - NHPH and Benioff Children’s Hospital Oakland New Hospital Building (expected to open in FY 2030-31)
- The fall 2023 TYP does not incorporate the potential impact of Project Ethos (planned acquisition of Saint Francis Memorial Hospital (Saint Francis) and St. Mary’s Medical Center (St. Mary’s), along with associated outpatient clinics from Dignity Health), which is expected to close around June / July 2024.

#### Capital / Debt Assumptions

- Debt is forecasted as follows for NHPH and the Benioff Children’s Hospital Oakland New Hospital Building programs:
  - NHPH (\$1.73 billion in remaining debt to be issued)
    - \$1.0 billion in FY 2024-25 (35-year term with an interest rate of 4.35 percent)
    - \$730 million in FY 2026-27 (35-year term with an interest rate of 4.35 percent)
  - Benioff Children’s Hospital Oakland New Hospital Building programs (\$1.02 billion in debt to be issued). This includes \$891 million for which approval is being requested under this action item and \$129 million previously approved for the ASB and Infrastructure Improvements.
    - \$200 million in FY 2024-25 (35-year term with an interest rate of 4.35 percent)
    - \$370 million in FY 2026-27 (35-year term with an interest rate of 4.35 percent)

- \$450 million in FY 2028-29 (35-year term with an interest rate of 4.35 percent)
- The debt is projected to be interest only through the construction period. The estimated debt service for the \$891 million for which approval is being requested under this action item is \$20,343,500 per year for FY 2025 – FY 2030 (interest only) and \$50,396,740 for FY 2031 – FY 2063 (principal and interest).

**UCSF Health**  
**Projected Financial Performance**  
**Statement of Revenues and Expenses**

|   | FY24             | FY25              | FY26              | FY27              | FY28              | FY29              | FY30              | FY31              | FY32              | FY33              | FY34              |
|---|------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
| (\$ in Thousands)                           | Forecast         | TYP<br>Projection | TYP<br>Projection | TYP<br>Projection | TYP<br>Projection | TYP<br>Projection | TYP<br>Projection | TYP<br>Projection | TYP<br>Projection | TYP<br>Projection | TYP<br>Projection |
| <b>Operating Revenue</b>                    |                  |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |
| Net Patient Revenues                        | 7,022,425        | 7,583,073         | 8,225,440         | 8,734,802         | 9,296,133         | 9,828,986         | 10,324,189        | 11,447,288        | 12,176,243        | 12,882,716        | 13,644,290        |
| Other Revenues                              | 226,492          | 169,024           | 166,745           | 149,698           | 111,840           | 98,989            | 104,011           | 106,802           | 185,543           | 231,469           | 114,656           |
| <b>Total Operating Revenues</b>             | <b>7,248,917</b> | <b>7,752,098</b>  | <b>8,392,184</b>  | <b>8,884,499</b>  | <b>9,407,974</b>  | <b>9,927,975</b>  | <b>10,428,200</b> | <b>11,554,090</b> | <b>12,361,786</b> | <b>13,114,184</b> | <b>13,758,947</b> |
| <b>Operating Expenses</b>                   |                  |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |
| Operating Expense                           | 6,432,827        | 6,858,781         | 7,263,329         | 7,687,143         | 8,133,847         | 8,581,615         | 9,010,452         | 9,873,066         | 10,569,327        | 11,238,856        | 11,898,220        |
| Depreciation                                | 222,875          | 236,167           | 239,506           | 235,698           | 235,236           | 240,114           | 298,300           | 362,706           | 381,961           | 414,720           | 437,295           |
| <b>Modified Operating Expenses</b>          | <b>6,655,702</b> | <b>7,094,948</b>  | <b>7,502,835</b>  | <b>7,922,841</b>  | <b>8,369,083</b>  | <b>8,821,728</b>  | <b>9,308,752</b>  | <b>10,235,772</b> | <b>10,951,288</b> | <b>11,653,576</b> | <b>12,335,516</b> |
| <b>Net Modified Operating Income (Loss)</b> | <b>593,215</b>   | <b>657,149</b>    | <b>889,349</b>    | <b>961,658</b>    | <b>1,038,891</b>  | <b>1,106,247</b>  | <b>1,119,448</b>  | <b>1,318,318</b>  | <b>1,410,497</b>  | <b>1,460,609</b>  | <b>1,423,431</b>  |
| Interest Expense                            | (119,261)        | (173,328)         | (174,126)         | (219,394)         | (216,919)         | (238,546)         | (236,425)         | (234,236)         | (235,697)         | (231,770)         | (227,408)         |
| Other Non-Operating Income (Expense)        | 148,132          | 73,938            | 87,846            | 112,085           | 126,467           | 157,727           | 163,847           | 172,691           | 194,750           | 221,820           | 257,345           |
| <b>Modified Net Income<sup>1</sup></b>      | <b>622,086</b>   | <b>557,760</b>    | <b>803,070</b>    | <b>854,350</b>    | <b>948,439</b>    | <b>1,025,428</b>  | <b>1,046,870</b>  | <b>1,256,773</b>  | <b>1,369,550</b>  | <b>1,450,659</b>  | <b>1,453,368</b>  |

<sup>1</sup> Modified Net Income excludes non-cash pension and OPEB expenses as allowed under the University Debt Policy.

Attachment 2B: UCSF Health System Projected Financial Performance – Page 5

UCSF Health  
Projected Financial Performance  
Statement of Net Assets

|   | FY24              | FY25              | FY26              | FY27              | FY28              | FY29              | FY30              | FY31              | FY32              | FY33              | FY34              |
|---|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
| (\$ in Thousands)                                       | Forecast          | TYP Projection    | TYP Projection    | TYP Projection    | TYP Projection    | TYP Projection    | TYP Projection    | TYP Projection    | TYP Projection    | TYP Projection    | TYP Projection    |
| <b>Assets</b>   |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |
| <b>Current Assets</b>                                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |
| Cash and Unrestricted Investments                       | \$2,610,192       | \$2,958,553       | \$3,389,291       | \$3,753,479       | \$4,252,366       | \$4,728,656       | \$4,967,532       | \$5,455,256       | \$6,257,919       | \$7,136,916       | \$8,600,450       |
| Net Accounts Receivable and Other Receivables           | 1,074,382         | 1,185,207         | 1,282,294         | 1,357,824         | 1,442,858         | 1,527,679         | 1,608,094         | 1,789,970         | 1,908,388         | 2,023,120         | 2,143,120         |
| Other Current Assets                                    | 270,861           | 322,942           | 359,784           | 372,271           | 383,553           | 394,930           | 407,318           | 447,187           | 467,247           | 486,174           | 506,536           |
| <b>Total Current Assets</b>                             | <b>3,955,435</b>  | <b>4,466,703</b>  | <b>5,031,369</b>  | <b>5,483,574</b>  | <b>6,078,778</b>  | <b>6,651,265</b>  | <b>6,982,944</b>  | <b>7,692,413</b>  | <b>8,633,554</b>  | <b>9,646,209</b>  | <b>11,250,106</b> |
| <b>Other Assets</b>                                     |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |
| Investments   | 56,456            | 56,456            | 56,456            | 56,456            | 56,456            | 56,456            | 56,456            | 56,456            | 56,456            | 56,456            | 56,456            |
| Restricted Cash   | 921,417           | 1,372,665         | 890,095           | 1,283,536         | 536,515           | 467,555           | 237,344           | 211,188           | 212,288           | 213,388           | 214,488           |
| Other Long Term Assets and Deferred Outflows            | 1,236,948         | 1,237,050         | 1,235,916         | 1,234,873         | 1,233,912         | 1,233,029         | 1,232,216         | 1,231,469         | 1,230,782         | 1,230,150         | 1,229,567         |
| <b>Total Other Assets</b>                               | <b>2,214,821</b>  | <b>2,666,170</b>  | <b>2,182,467</b>  | <b>2,574,864</b>  | <b>1,826,883</b>  | <b>1,757,039</b>  | <b>1,526,016</b>  | <b>1,499,113</b>  | <b>1,499,525</b>  | <b>1,499,994</b>  | <b>1,500,511</b>  |
| <b>PPE, Net</b>   | <b>3,882,063</b>  | <b>4,431,168</b>  | <b>5,122,984</b>  | <b>6,006,593</b>  | <b>6,944,894</b>  | <b>7,767,202</b>  | <b>8,563,967</b>  | <b>8,896,348</b>  | <b>9,056,331</b>  | <b>9,136,051</b>  | <b>8,706,749</b>  |
| <b>Total Assets and Deferred Outflows</b>               | <b>10,052,319</b> | <b>11,564,041</b> | <b>12,336,820</b> | <b>14,065,031</b> | <b>14,850,555</b> | <b>16,175,507</b> | <b>17,072,927</b> | <b>18,087,874</b> | <b>19,189,410</b> | <b>20,282,254</b> | <b>21,457,366</b> |
| <b>Liabilities and Net Assets</b>                       |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |
| <b>Current Liabilities</b>                              |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |
| Accounts Payable  | 812,404           | 831,846           | 877,450           | 922,318           | 969,521           | 1,019,409         | 1,067,323         | 1,164,413         | 1,243,187         | 1,317,930         | 1,389,741         |
| Current Portion of Long Term Debt                       | 50,187            | 47,557            | 48,167            | 45,894            | 43,839            | 44,353            | 91,673            | 95,310            | 111,359           | 118,937           | 123,688           |
| Third Party Settlements, net                            | 15,361            | 15,868            | 16,323            | 16,762            | 16,972            | 17,073            | 17,172            | 18,284            | 18,589            | 18,882            | 19,145            |
| Other Current Liabilities                               | 720,991           | 720,980           | 720,970           | 720,960           | 720,951           | 720,942           | 720,934           | 720,926           | 720,918           | 720,911           | 720,904           |
| <b>Total Current Liabilities</b>                        | <b>1,598,943</b>  | <b>1,616,251</b>  | <b>1,662,910</b>  | <b>1,705,934</b>  | <b>1,751,283</b>  | <b>1,801,776</b>  | <b>1,897,101</b>  | <b>1,998,933</b>  | <b>2,094,052</b>  | <b>2,176,659</b>  | <b>2,253,479</b>  |
| <b>Long Term Liabilities</b>                            |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |                   |
| Long Term Debt  | 2,626,125         | 3,662,568         | 3,677,401         | 4,728,507         | 4,684,668         | 5,094,315         | 5,002,642         | 4,907,332         | 4,795,973         | 4,677,036         | 4,553,348         |
| Other Long Term Liabilities and Deferred Inflows        | 6,577,206         | 6,579,612         | 6,582,138         | 6,484,788         | 6,387,565         | 6,290,474         | 6,193,519         | 6,096,704         | 6,000,035         | 5,903,516         | 5,807,152         |
| <b>Total Long Term Liabilities and Deferred Inflows</b> | <b>9,203,331</b>  | <b>10,242,180</b> | <b>10,259,539</b> | <b>11,213,295</b> | <b>11,072,233</b> | <b>11,384,789</b> | <b>11,196,161</b> | <b>11,004,036</b> | <b>10,796,008</b> | <b>10,580,552</b> | <b>10,360,499</b> |
| <b>Net Assets</b>                                       | <b>(749,955)</b>  | <b>(294,391)</b>  | <b>414,370</b>    | <b>1,145,802</b>  | <b>2,027,040</b>  | <b>2,988,942</b>  | <b>3,979,665</b>  | <b>5,084,905</b>  | <b>6,299,350</b>  | <b>7,525,043</b>  | <b>8,843,388</b>  |
| <b>Total Liabilities and Net Assets</b>                 | <b>10,052,319</b> | <b>11,564,041</b> | <b>12,336,820</b> | <b>14,065,031</b> | <b>14,850,555</b> | <b>16,175,507</b> | <b>17,072,927</b> | <b>18,087,874</b> | <b>19,189,410</b> | <b>20,282,254</b> | <b>21,457,366</b> |

Attachment 2B: UCSF Health System Projected Financial Performance – Page 6

UCSF Health  
 Projected Financial Performance  
 Statement of Cash Flows

|   | FY24                 | FY25                 | FY26                 | FY27                 | FY28                 | FY29                 | FY30                 | FY31                 | FY32               | FY33                 | FY34               |
|---|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|--------------------|----------------------|--------------------|
| (\$ in Thousands)   | Forecast             | TYP<br>Projection    | TYP<br>Projection    | TYP<br>Projection    | TYP<br>Projection    | TYP<br>Projection    | TYP<br>Projection    | TYP<br>Projection    | TYP<br>Projection  | TYP<br>Projection    | TYP<br>Projection  |
| <b>Sources of Cash</b>  |                      |                      |                      |                      |                      |                      |                      |                      |                    |                      |                    |
| Modified Net Income   | 622,086              | 557,760              | 803,070              | 854,350              | 948,439              | 1,025,428            | 1,046,870            | 1,256,773            | 1,369,550          | 1,450,659            | 1,453,368          |
| Depreciation  | 222,875              | 236,167              | 239,506              | 235,698              | 235,236              | 240,114              | 298,300              | 362,706              | 381,961            | 414,720              | 437,295            |
| Long Term Debt Proceeds   | 51,473               | 1,084,000            | 63,000               | 1,097,000            | -                    | 454,000              | -                    | -                    | -                  | -                    | -                  |
| Other Sources of Cash   | 25,783               | 22,391               | 24,252               | 24,596               | 25,771               | 26,408               | 27,261               | 28,424               | 28,637             | 29,180               | 29,744             |
| <b>Total Sources of Cash</b>                                      | <b>922,216</b>       | <b>1,900,317</b>     | <b>1,129,827</b>     | <b>2,211,643</b>     | <b>1,209,446</b>     | <b>1,745,949</b>     | <b>1,372,431</b>     | <b>1,647,902</b>     | <b>1,780,149</b>   | <b>1,894,558</b>     | <b>1,920,408</b>   |
| <b>Uses of Cash</b>   |                      |                      |                      |                      |                      |                      |                      |                      |                    |                      |                    |
| Change in Working Capital   | (\$166,940)          | (\$142,968)          | (\$87,880)           | (\$42,720)           | (\$48,913)           | (\$46,217)           | (\$44,799)           | (\$123,550)          | (\$59,407)         | (\$58,630)           | (\$68,295)         |
| Property, Plant, and Equipment                                    | (835,503)            | (785,272)            | (931,322)            | (1,119,307)          | (1,173,537)          | (1,062,422)          | (1,095,064)          | (695,087)            | (541,944)          | (494,440)            | (7,993)            |
| Long Term Debt Principal Repayments                               | (44,572)             | (50,187)             | (47,557)             | (48,167)             | (45,894)             | (43,839)             | (44,353)             | (91,673)             | (95,310)           | (111,359)            | (118,937)          |
| Other Uses of Cash  | (143,776)            | (122,280)            | (114,900)            | (243,820)            | (189,236)            | (186,142)            | (179,549)            | (276,024)            | (279,725)          | (350,033)            | (260,548)          |
| <b>Total Uses of Cash</b>   | <b>(\$1,190,791)</b> | <b>(\$1,100,707)</b> | <b>(\$1,181,659)</b> | <b>(\$1,454,014)</b> | <b>(\$1,457,580)</b> | <b>(\$1,338,620)</b> | <b>(\$1,363,765)</b> | <b>(\$1,186,334)</b> | <b>(\$976,386)</b> | <b>(\$1,014,462)</b> | <b>(\$455,773)</b> |
| <b>Beginning Unrestricted and Restricted Cash and Investments</b> | <b>3,800,183</b>     | <b>3,531,609</b>     | <b>4,331,218</b>     | <b>4,279,386</b>     | <b>5,037,015</b>     | <b>4,788,881</b>     | <b>5,196,211</b>     | <b>5,204,876</b>     | <b>5,666,444</b>   | <b>6,470,207</b>     | <b>7,350,304</b>   |
| <b>Cash Provided (Used)</b>                                       | <b>(268,574)</b>     | <b>799,610</b>       | <b>(51,832)</b>      | <b>757,629</b>       | <b>(248,134)</b>     | <b>407,330</b>       | <b>8,665</b>         | <b>461,568</b>       | <b>803,763</b>     | <b>880,096</b>       | <b>1,464,635</b>   |
| <b>Ending Unrestricted and Restricted Cash and Investments</b>    | <b>3,531,609</b>     | <b>4,331,218</b>     | <b>4,279,386</b>     | <b>5,037,015</b>     | <b>4,788,881</b>     | <b>5,196,211</b>     | <b>5,204,876</b>     | <b>5,666,444</b>     | <b>6,470,207</b>   | <b>7,350,304</b>     | <b>8,814,938</b>   |
| <b>Ending Cash Balance Detail</b>                                 |                      |                      |                      |                      |                      |                      |                      |                      |                    |                      |                    |
| Cash and Unrestricted Investments                                 | \$2,610,192          | \$2,958,553          | \$3,389,291          | \$3,753,479          | \$4,252,366          | \$4,728,656          | \$4,967,532          | \$5,455,256          | \$6,257,919        | \$7,136,916          | \$8,600,450        |
| Restricted Cash   | 921,417              | 1,372,665            | 890,095              | 1,283,536            | 536,515              | 467,555              | 237,344              | 211,188              | 212,288            | 213,388              | 214,488            |
| <b>Unrestricted and Restricted Cash and Investments</b>           | <b>3,531,609</b>     | <b>4,331,218</b>     | <b>4,279,386</b>     | <b>5,037,015</b>     | <b>4,788,881</b>     | <b>5,196,211</b>     | <b>5,204,876</b>     | <b>5,666,444</b>     | <b>6,470,207</b>   | <b>7,350,304</b>     | <b>8,814,938</b>   |

Attachment 2B: UCSF Health System Projected Financial Performance – Page 7

UCSF Health  
Projected Financial Performance  
Key Financial Ratios

|  | FY24               | FY25               | FY26               | FY27               | FY28               | FY29               | FY30               | FY31               | FY32               | FY33               | FY34               |
|--|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| (Annual \$ Amounts in thousands)                             | Forecast           | TYP<br>Projection  | TYP<br>Projection  | TYP<br>Projection  | TYP<br>Projection  | TYP<br>Projection  | TYP<br>Projection  | TYP<br>Projection  | TYP<br>Projection  | TYP<br>Projection  | TYP<br>Projection  |
| <b>Modified Net Income Margin</b>                            |                    |                    |                    |                    |                    |                    |                    |                    |                    |                    |                    |
| Operating Revenue  | 7,248,917          | 7,752,098          | 8,392,184          | 8,884,499          | 9,407,974          | 9,927,975          | 10,428,200         | 11,554,090         | 12,361,786         | 13,114,184         | 13,758,947         |
| Modified Net Income <sup>1</sup>                             | 622,086            | 557,760            | 803,070            | 854,350            | 948,439            | 1,025,428          | 1,046,870          | 1,256,773          | 1,369,550          | 1,450,659          | 1,453,368          |
| <b>Modified Net Income Margin %</b>                          | <b>8.6%</b>        | <b>7.2%</b>        | <b>9.6%</b>        | <b>9.6%</b>        | <b>10.1%</b>       | <b>10.3%</b>       | <b>10.0%</b>       | <b>10.9%</b>       | <b>11.1%</b>       | <b>11.1%</b>       | <b>10.6%</b>       |
| <b>Modified Debt Service Coverage</b>                        |                    |                    |                    |                    |                    |                    |                    |                    |                    |                    |                    |
| <b>Debt Service Coverage EBIDA</b>                           |                    |                    |                    |                    |                    |                    |                    |                    |                    |                    |                    |
| Modified Net Income <sup>1</sup>                             | 622,086            | 557,760            | 803,070            | 854,350            | 948,439            | 1,025,428          | 1,046,870          | 1,256,773          | 1,369,550          | 1,450,659          | 1,453,368          |
| Interest   | 119,261            | 173,328            | 174,126            | 219,394            | 216,919            | 238,546            | 236,425            | 234,236            | 235,697            | 231,770            | 227,408            |
| Depreciation   | 222,875            | 236,167            | 239,506            | 235,698            | 235,236            | 240,114            | 298,300            | 362,706            | 381,961            | 414,720            | 437,295            |
| <b>Modified Debt Service Coverage EBIDA</b>                  | <b>964,222</b>     | <b>967,254</b>     | <b>1,216,701</b>   | <b>1,309,441</b>   | <b>1,400,593</b>   | <b>1,504,088</b>   | <b>1,581,595</b>   | <b>1,853,715</b>   | <b>1,987,209</b>   | <b>2,097,148</b>   | <b>2,118,071</b>   |
| <b>Debt Service</b>  |                    |                    |                    |                    |                    |                    |                    |                    |                    |                    |                    |
| Interest Payment   | 119,261            | 173,328            | 174,126            | 219,394            | 216,919            | 238,546            | 236,425            | 234,236            | 235,697            | 231,770            | 227,408            |
| Scheduled Principal Payments                                 | 44,572             | 50,187             | 47,557             | 48,167             | 45,894             | 43,839             | 44,353             | 91,673             | 95,310             | 111,359            | 118,937            |
| <b>Debt Service</b>  | <b>163,833</b>     | <b>223,515</b>     | <b>221,683</b>     | <b>267,561</b>     | <b>262,813</b>     | <b>282,385</b>     | <b>280,778</b>     | <b>325,910</b>     | <b>331,007</b>     | <b>343,129</b>     | <b>346,344</b>     |
| <b>Modified Debt Service Coverage Ratio<sup>1</sup></b>      | <b>5.9</b>         | <b>4.3</b>         | <b>5.5</b>         | <b>4.9</b>         | <b>5.3</b>         | <b>5.3</b>         | <b>5.6</b>         | <b>5.7</b>         | <b>6.0</b>         | <b>6.1</b>         | <b>6.1</b>         |
| <b>Days Cash on Hand</b>                                     |                    |                    |                    |                    |                    |                    |                    |                    |                    |                    |                    |
| <b>Cash and Unrestricted Investments</b>                     | <b>\$2,610,192</b> | <b>\$2,958,553</b> | <b>\$3,389,291</b> | <b>\$3,753,479</b> | <b>\$4,252,366</b> | <b>\$4,728,656</b> | <b>\$4,967,532</b> | <b>\$5,455,256</b> | <b>\$6,257,919</b> | <b>\$7,136,916</b> | <b>\$8,600,450</b> |
| Total Operating Expenses Excluding Depreciation <sup>1</sup> | 6,432,827          | 6,858,781          | 7,263,329          | 7,687,143          | 8,133,847          | 8,581,615          | 9,010,452          | 9,873,066          | 10,569,327         | 11,238,856         | 11,898,220         |
| <b>Average Daily Operating Expense</b>                       | <b>17,576</b>      | <b>18,791</b>      | <b>19,900</b>      | <b>21,061</b>      | <b>22,224</b>      | <b>23,511</b>      | <b>24,686</b>      | <b>27,049</b>      | <b>28,878</b>      | <b>30,791</b>      | <b>32,598</b>      |
| <b>Days Cash on Hand</b>                                     | <b>149</b>         | <b>157</b>         | <b>170</b>         | <b>178</b>         | <b>191</b>         | <b>201</b>         | <b>201</b>         | <b>202</b>         | <b>217</b>         | <b>232</b>         | <b>264</b>         |

<sup>1</sup> Excludes non-cash pension and OPEB expenses as allowed under the UCOP Debt Policy

UCSF  
 BCH Oakland New Hospital Building  
 Comparable Construction Analysis  
 July 2024

| #        | Project Name  | City/ Campus                | GSF            | Md. Pt.<br>Const Yr | Building<br>Construction<br>Cost* | Adj. Building<br>Cost** | Adj.<br>Building<br>Cost /<br>GSF** | Total Project Cost*     | Adj.Total Project<br>Cost** | Adj. Total<br>Project<br>Cost/<br>GSF** |
|----------|---|-----------------------------|----------------|---------------------|-----------------------------------|-------------------------|-------------------------------------|-------------------------|-----------------------------|---|
|          |   |                             |                |                     |                                   | <b>AVERAGES</b>         | <b>\$ 3,022</b>                     |                         |                             | <b>\$ 4,316</b>                         |
| <b>1</b> | <b>UCSF - Benioff Children's Hospital Oakland New Hospital Building</b> | <b>San Francisco</b>        | <b>277,500</b> | <b>2028</b>         | <b>\$ 714,878,000</b>             |                         | <b>\$ 2,576</b>                     | <b>\$ 1,408,641,000</b> |                             | <b>\$ 5,076</b>                         |
| 2        | UCSD - Medical Center East Campus Bed Tower (Jacobs Medical Center)     | San Diego                   | 582,343        | 2017                | \$ 607,812,000                    | \$ 1,430,695,000        | \$ 2,457                            | \$ 942,790,000          | \$ 2,219,182,000            | \$ 3,811                                |
| 3        | Stanford University Adult Hospital (Stanford Medicine)                  | Palo Alto                   | 812,000        | 2016                | \$ 1,250,658,353                  | \$ 3,113,413,000        | \$ 3,834                            | \$ 2,100,000,000        | \$ 5,227,780,000            | \$ 6,438                                |
| 4        | Marin General Hospital (Tower Only)                                     | Kentfield (San Rafael)      | 259,000        | 2018                | \$ 287,156,000                    | \$ 577,671,000          | \$ 2,230                            | \$ 350,000,000          | \$ 704,094,000              | \$ 2,719                                |
| 5        | Washington Hospital Morris Hyman Critical Care Pavilion                 | Fremont (Palo Alto)         | 240,000        | 2017                | \$ 240,000,000                    | \$ 527,055,000          | \$ 2,196                            | \$ 339,000,000          | \$ 744,465,000              | \$ 3,102                                |
| 6        | Lucile Packard Children's Hospital (Stanford Medicine)                  | Palo Alto                   | 521,000        | 2014                | \$ 1,025,100,000                  | \$ 2,780,392,000        | \$ 5,337                            | \$ 1,335,000,000        | \$ 3,620,937,000            | \$ 6,950                                |
| 7        | Loma Linda University Campus Transformation Project                     | Loma Linda (SAN BERNARDINO) | 987,500        | 2018                | \$ 975,000,000                    | \$ 2,051,620,000        | \$ 2,078                            | \$ 1,350,000,000        | \$ 2,840,705,000            | \$ 2,877                                |

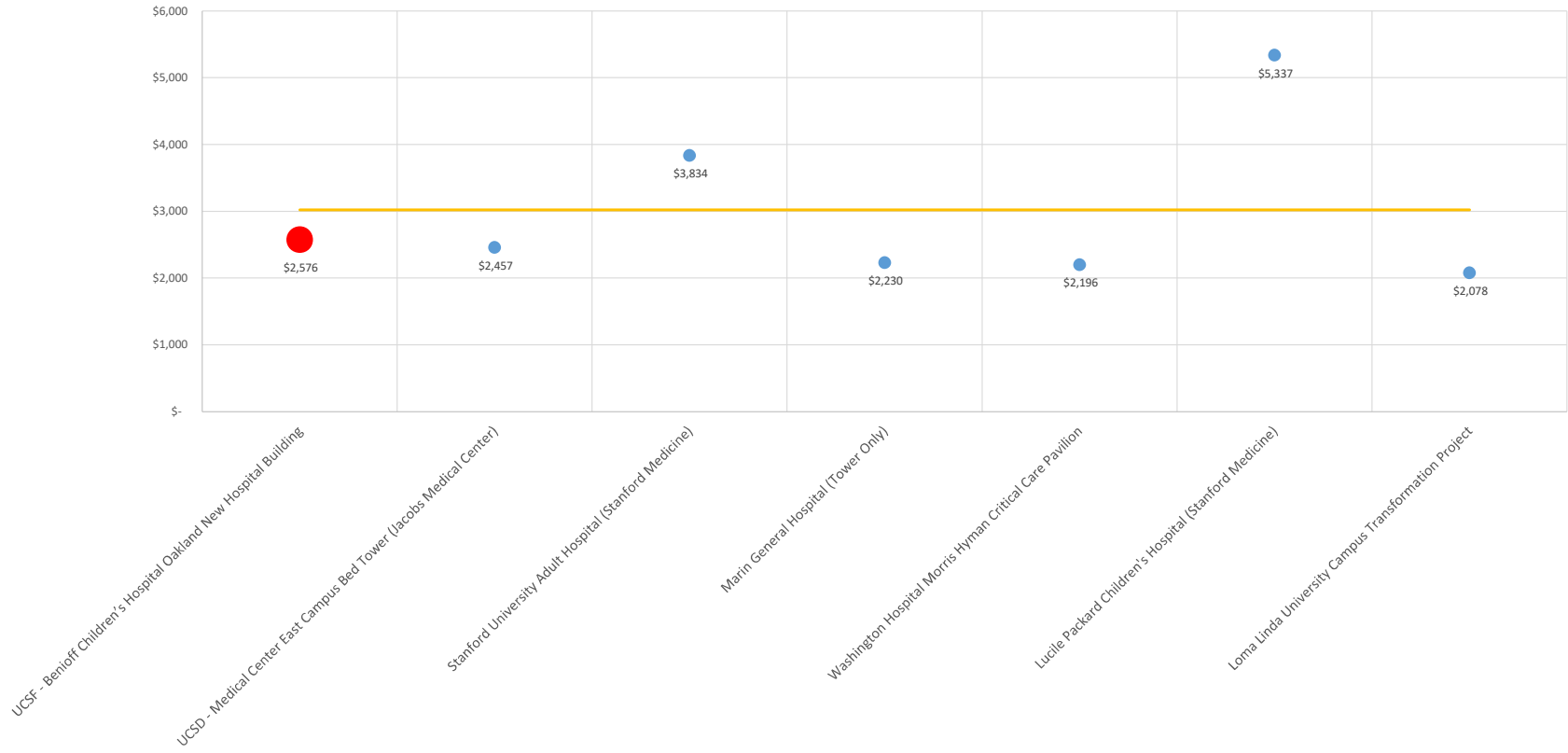
\* For University of California projects "building construction cost" is line 1 of the CIB form; "total project cost" is the Grand Total Project cost on the CIB or budget and includes total P-W-C (including interest during construction) and Group 2 & 3 equipment.

\*\* All comparable projects have been adjusted to the project city and year using a combined factor of RS Means City Cost Index (to account for location) and RLB Construction Cost Index (to account for prior years).



UCSF  
BCH Oakland New Hospital Building  
Comparable Construction Analysis  
July 2024

ADJUSTED BUILDING COSTS PER GSF  
WITH LINE OF AVERAGE



**UCSF  
 BCH Oakland Parking Structure  
 Comparable Construction Analysis  
 July 2024**

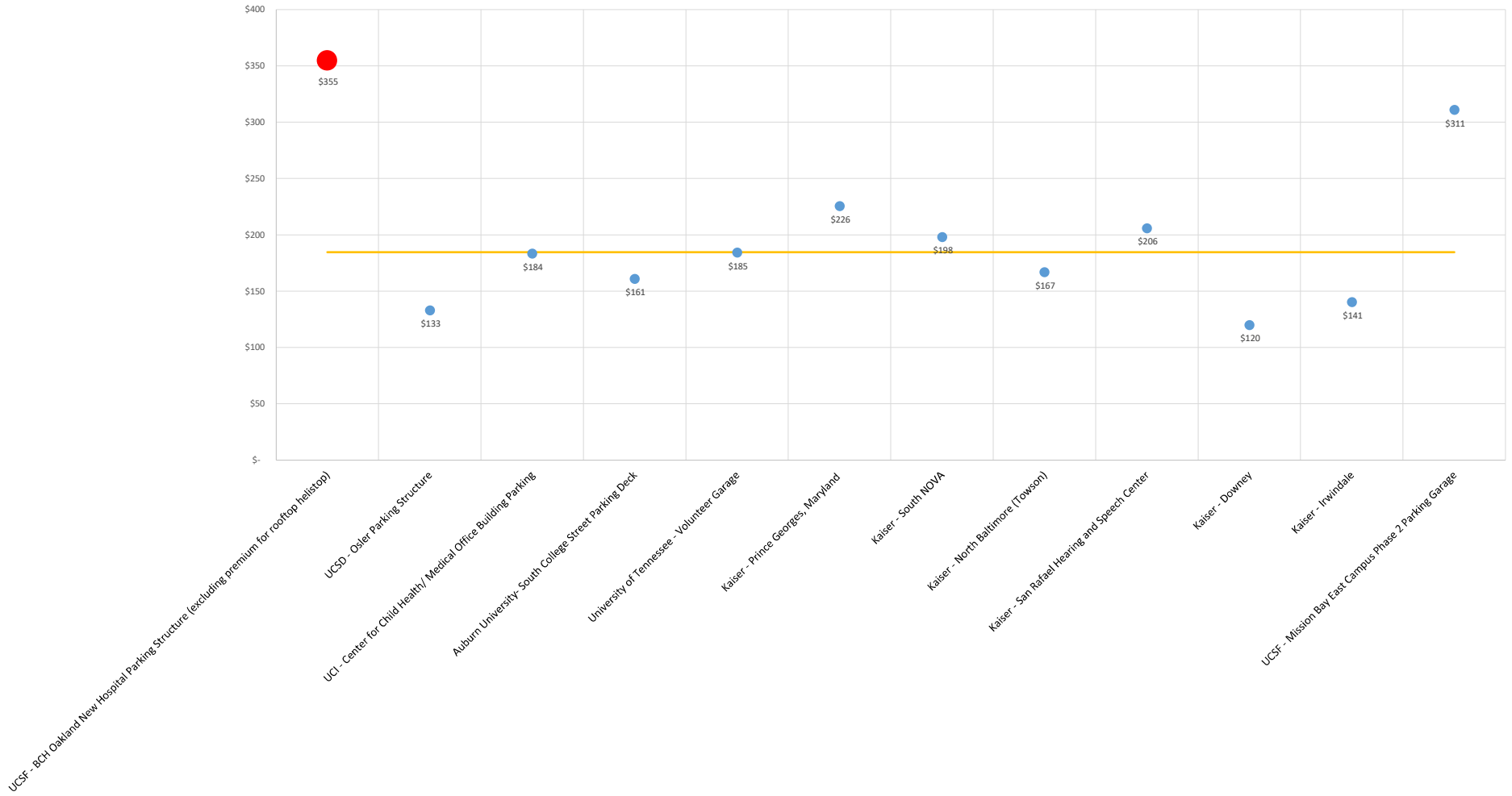
| #                    | Project Name   | City/ Campus            | GSF     | Md. Pt.<br>Const Yr | Spaces | Building<br>Construction<br>Cost* | Adj. Building<br>Cost** | Adj. Building<br>Cost / GSF** | Total Project<br>Cost* | Adj.Total Project<br>Cost** | Adj. Total<br>Project Cost/<br>GSF** | Adj. Building<br>Cost / Space* | Adj. Total Project<br>Cost/ Space* |
|----------------------|--|-------------------------|---------|---------------------|--------|-----------------------------------|-------------------------|-------------------------------|------------------------|-----------------------------|--------------------------------------|--------------------------------|------------------------------------|
| <b>COMP AVERAGES</b> |  |                         |         |                     |        |                                   |                         | <b>\$ 185</b>                 |                        |                             | <b>\$ 242</b>                        | <b>\$ 66,292</b>               | <b>\$ 86,407</b>                   |
| 1                    | UCSF - BCH Oakland New Hospital Parking Structure (excluding premium for rooftop helistop) | San Francisco           | 103,180 | 2027                | 270    | \$ 36,601,000                     |                         | \$ 355                        | \$ 54,798,000          |                             | \$ 531                               | \$ 135,559                     | \$ 202,956                         |
| 2                    | UCSD - Osler Parking Structure   | San Diego               | 418,725 | 2018                | 1305   | \$ 28,215,000                     | \$ 55,785,000           | \$ 133                        | \$ 46,799,000          | \$ 92,528,000               | \$ 221                               | \$ 42,747                      | \$ 70,903                          |
| 3                    | UCI - Center for Child Health/ Medical Office Building Parking                             | Irvine                  | 280,000 | 2021                | 800    | \$ 31,586,000                     | \$ 51,420,000           | \$ 184                        | \$ 54,599,000          | \$ 88,884,000               | \$ 317                               | \$ 64,275                      | \$ 111,105                         |
| 4                    | Auburn University- South College Street Parking Deck                                       | Montgomery              | 218,408 | 2019                | 600    | \$ 14,837,964                     | \$ 35,220,000           | \$ 161                        | \$ 15,900,000          | \$ 37,741,000               | \$ 173                               | \$ 58,700                      | \$ 62,902                          |
| 5                    | University of Tennessee - Volunteer Garage   | Knoxville               | 394,800 | 2016                | 1700   | \$ 23,823,840                     | \$ 72,863,000           | \$ 185                        | \$ 28,000,000          | \$ 85,635,000               | \$ 217                               | \$ 42,861                      | \$ 50,374                          |
| 6                    | Kaiser - Prince Georges, Maryland  | College Park            | 80,397  | 2021                | 164    | \$ 8,913,852                      | \$ 18,152,000           | \$ 226                        | \$ 10,202,512          | \$ 20,776,000               | \$ 258                               | \$ 110,683                     | \$ 126,683                         |
| 7                    | Kaiser - South NOVA  | Woodbridge (Alexandria) | 344,083 | 2021                | 951    | \$ 29,825,566                     | \$ 68,214,000           | \$ 198                        | \$ 33,671,354          | \$ 77,010,000               | \$ 224                               | \$ 71,729                      | \$ 80,978                          |
| 8                    | Kaiser - North Baltimore (Towson)  | Baltimore               | 324,780 | 2020                | 1034   | \$ 27,171,533                     | \$ 54,277,000           | \$ 167                        | \$ 31,007,478          | \$ 61,940,000               | \$ 191                               | \$ 52,492                      | \$ 59,903                          |
| 9                    | Kaiser - San Rafael Hearing and Speech Center  | San Rafael              | 173,052 | 2020                | 433    | \$ 20,980,030                     | \$ 35,659,000           | \$ 206                        | \$ 27,658,877          | \$ 47,011,000               | \$ 272                               | \$ 82,353                      | \$ 108,570                         |
| 10                   | Kaiser - Downey  | Los Angeles             | 390,528 | 2019                | 1206   | \$ 25,706,383                     | \$ 46,945,000           | \$ 120                        | \$ 33,816,895          | \$ 61,757,000               | \$ 158                               | \$ 38,926                      | \$ 51,208                          |
| 11                   | Kaiser - Irwindale   | Irwindale (Pasadena)    | 117,240 | 2018                | 328    | \$ 8,176,981                      | \$ 16,473,000           | \$ 141                        | \$ 10,165,750          | \$ 20,479,000               | \$ 175                               | \$ 50,223                      | \$ 62,436                          |
| 12                   | UCSF - Mission Bay East Campus Phase 2 Parking Garage                                      | San Francisco           | 183,400 | 2022                | 500    | \$ 45,558,000                     | \$ 57,109,000           | \$ 311                        | \$ 65,980,000          | \$ 82,709,000               | \$ 451                               | \$ 114,218                     | \$ 165,418                         |

\* For University of California projects "building construction cost" is line 1 of the CIB form; "total project cost" is the Grand Total Project cost on the CIB or budget and includes total P-W-C (including interest during construction) and Group 2 & 3 equipment.

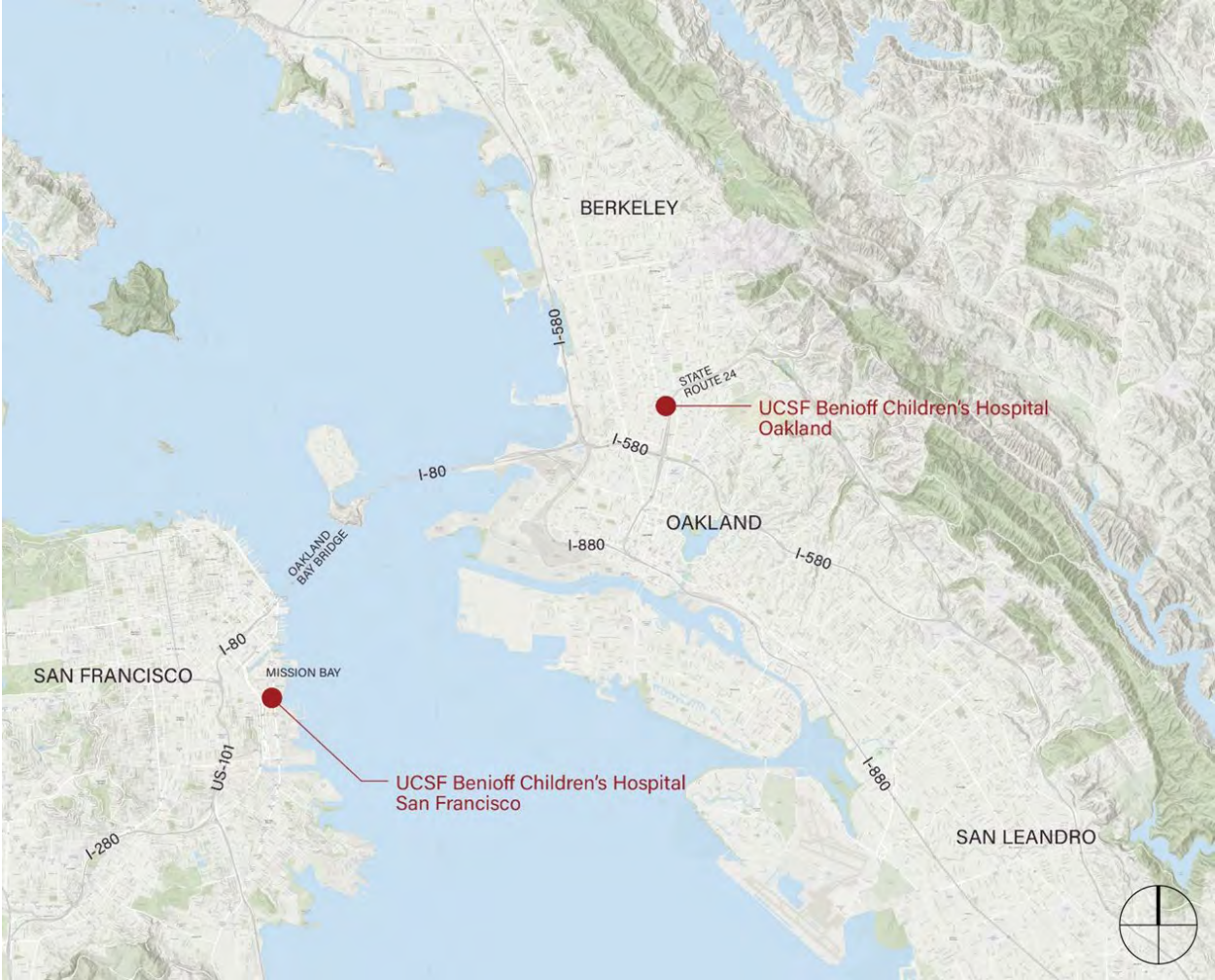
\*\* All comparable projects have been adjusted to the project city and year using a combined factor of RS Means City Cost Index (to account for location) and RLB Construction Cost Index (to account for prior years)

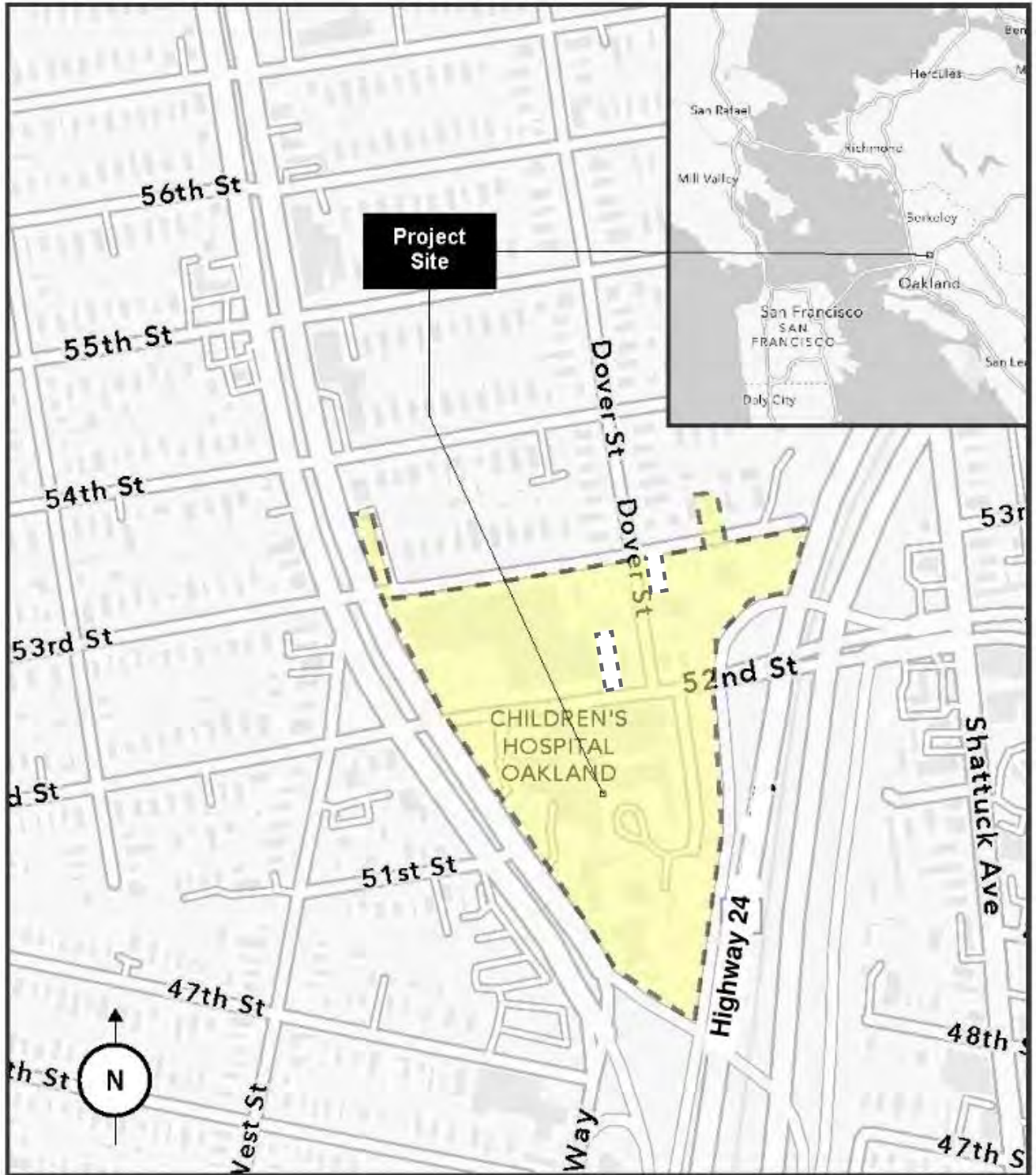
UCSF  
BCH Oakland Parking Structure  
Comparable Construction Analysis  
July 2024

ADJUSTED BUILDING CONSTRUCTION COSTS PER GSF  
WITH LINE OF AVERAGE



PROJECT LOCATION MAP

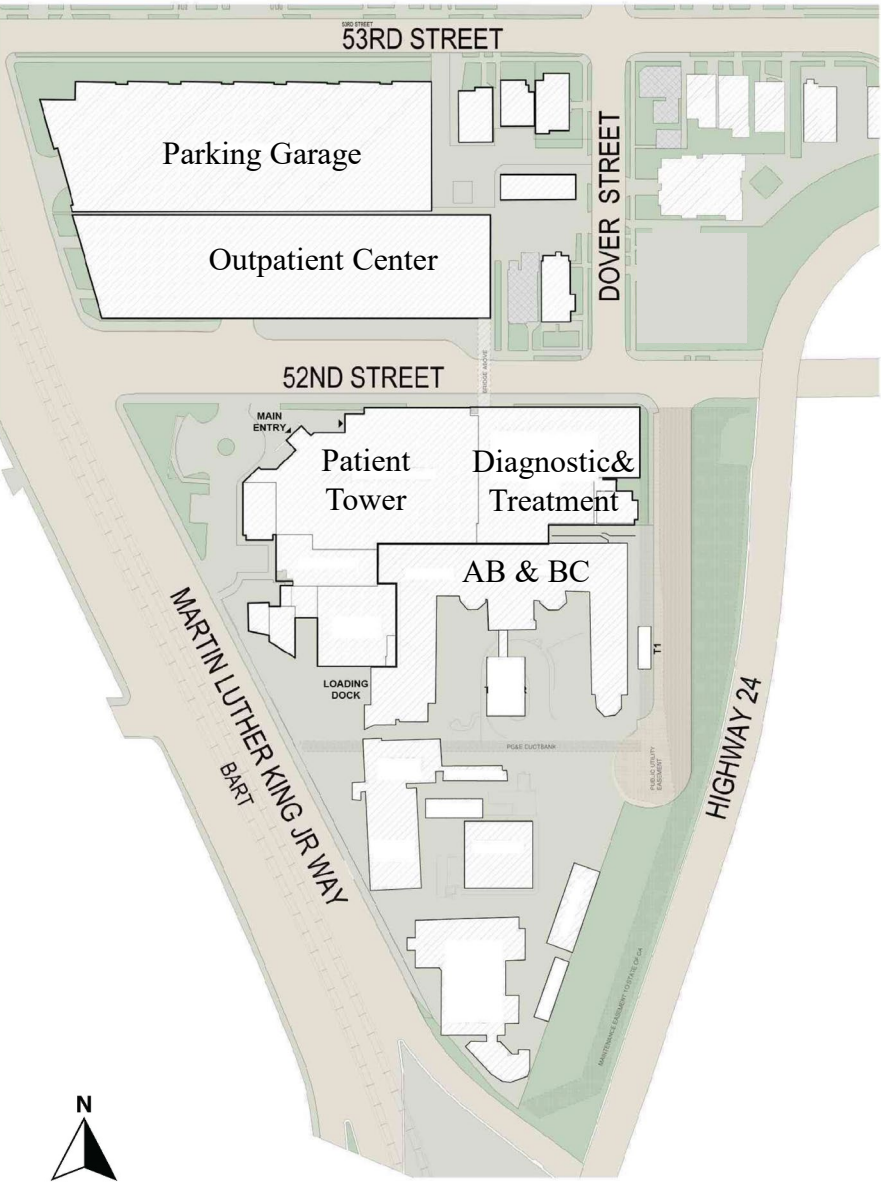






BCH Oakland New Hospital Building (NHB) Project- Overall Site Plan

New Construction Administrative Support Building (ASB) (Separately Approved, Complete in 2026)



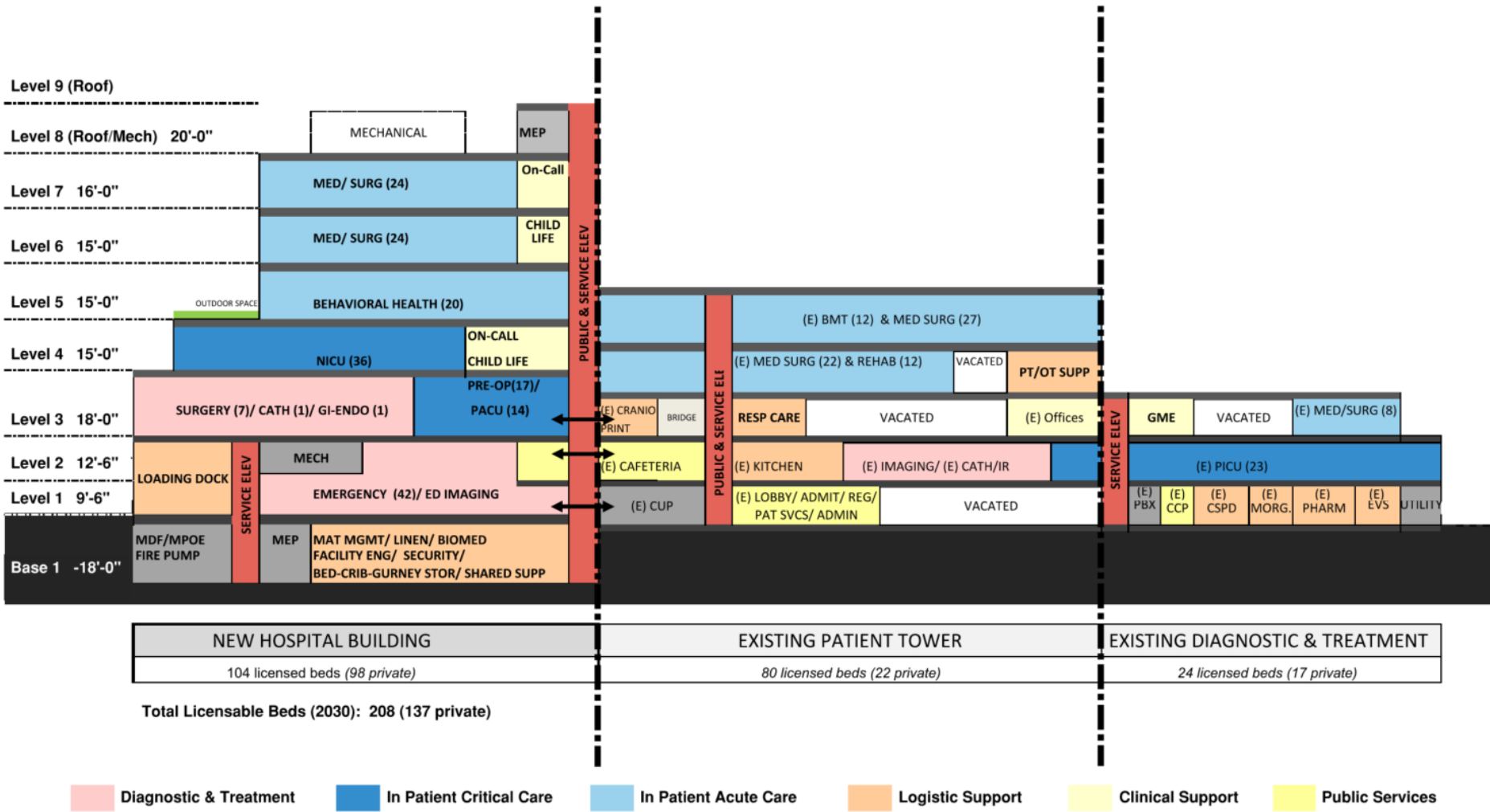
Existing Site Plan



Proposed Site Plan

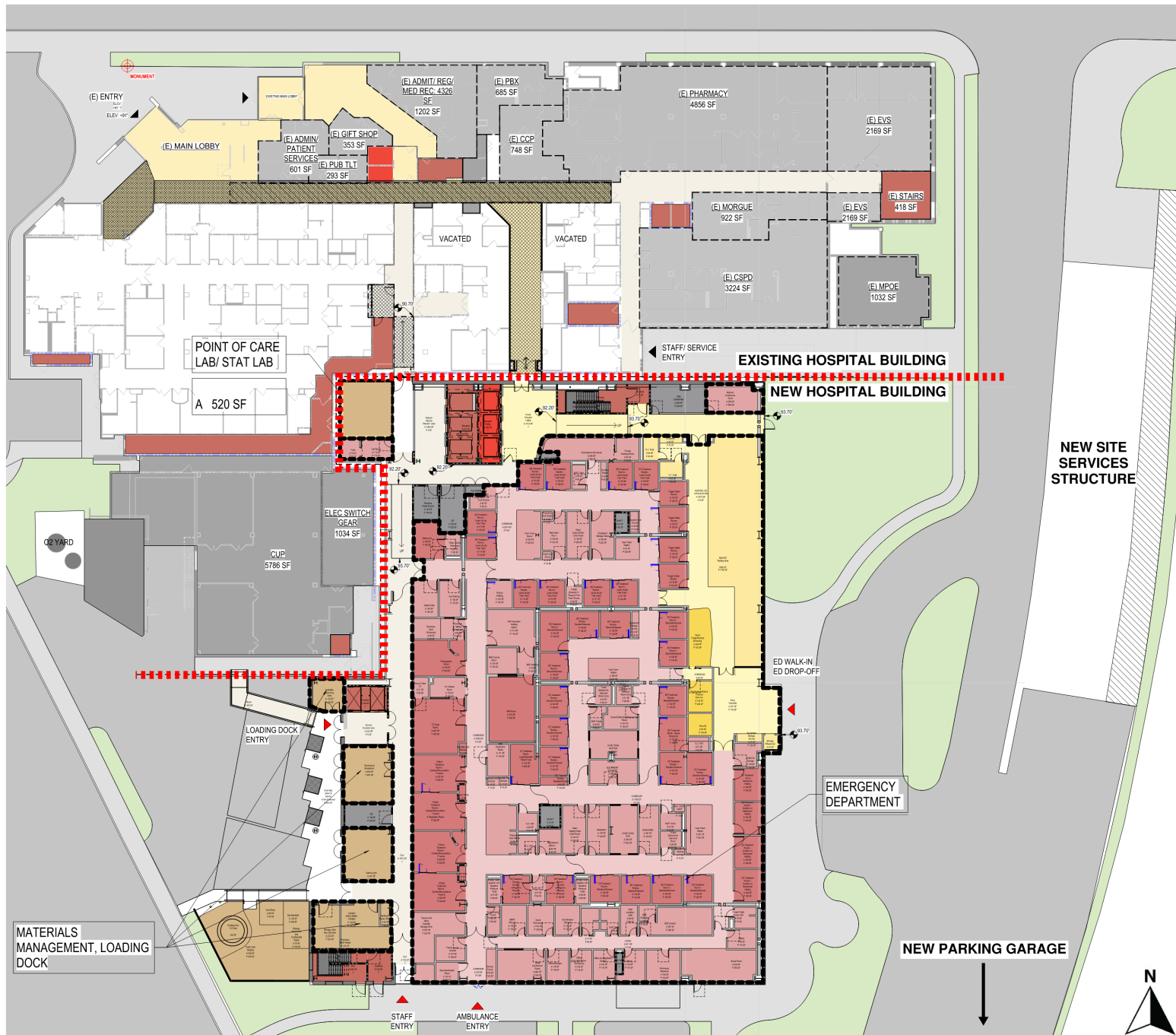


# Stacking Diagram



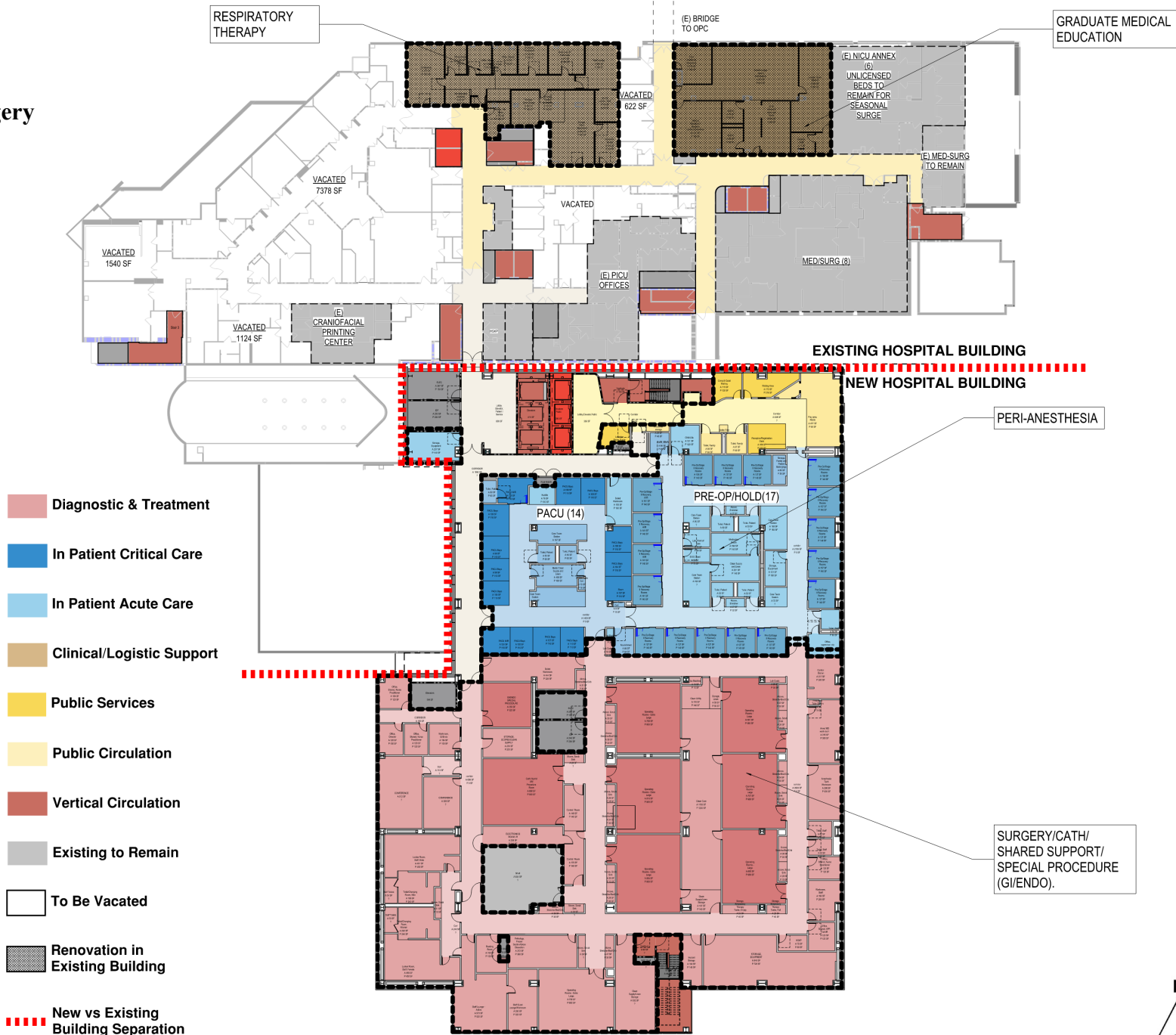
# Ground Floor Plan

- Diagnostic & Treatment
- In Patient Critical Care
- In Patient Acute Care
- Clinical/Logistic Support
- Public Services
- Public Circulation
- Vertical Circulation
- Existing to Remain
- To Be Vacated
- Renovation in Existing Building
- New vs Existing Building Separation





# Level Three Surgery Floor Plan



RESPIRATORY THERAPY

(E) BRIDGE TO OPC

GRADUATE MEDICAL EDUCATION

(E) NICU ANNEX (E) UNLICENSED BEDS TO REMAIN FOR SEASONAL SURGE

VACATED 622 SF

VACATED 7378 SF

VACATED

VACATED 1540 SF

VACATED 1124 SF

(E) CRANIOFACIAL PRINTING CENTER

(E) PICU OFFICES

MED/SURG (E)

(E) MED-SURG TO REMAIN

EXISTING HOSPITAL BUILDING  
NEW HOSPITAL BUILDING

PERI-ANESTHESIA

- Diagnostic & Treatment
- In Patient Critical Care
- In Patient Acute Care
- Clinical/Logistic Support
- Public Services
- Public Circulation
- Vertical Circulation
- Existing to Remain
- To Be Vacated
- Renovation in Existing Building
- New vs Existing Building Separation

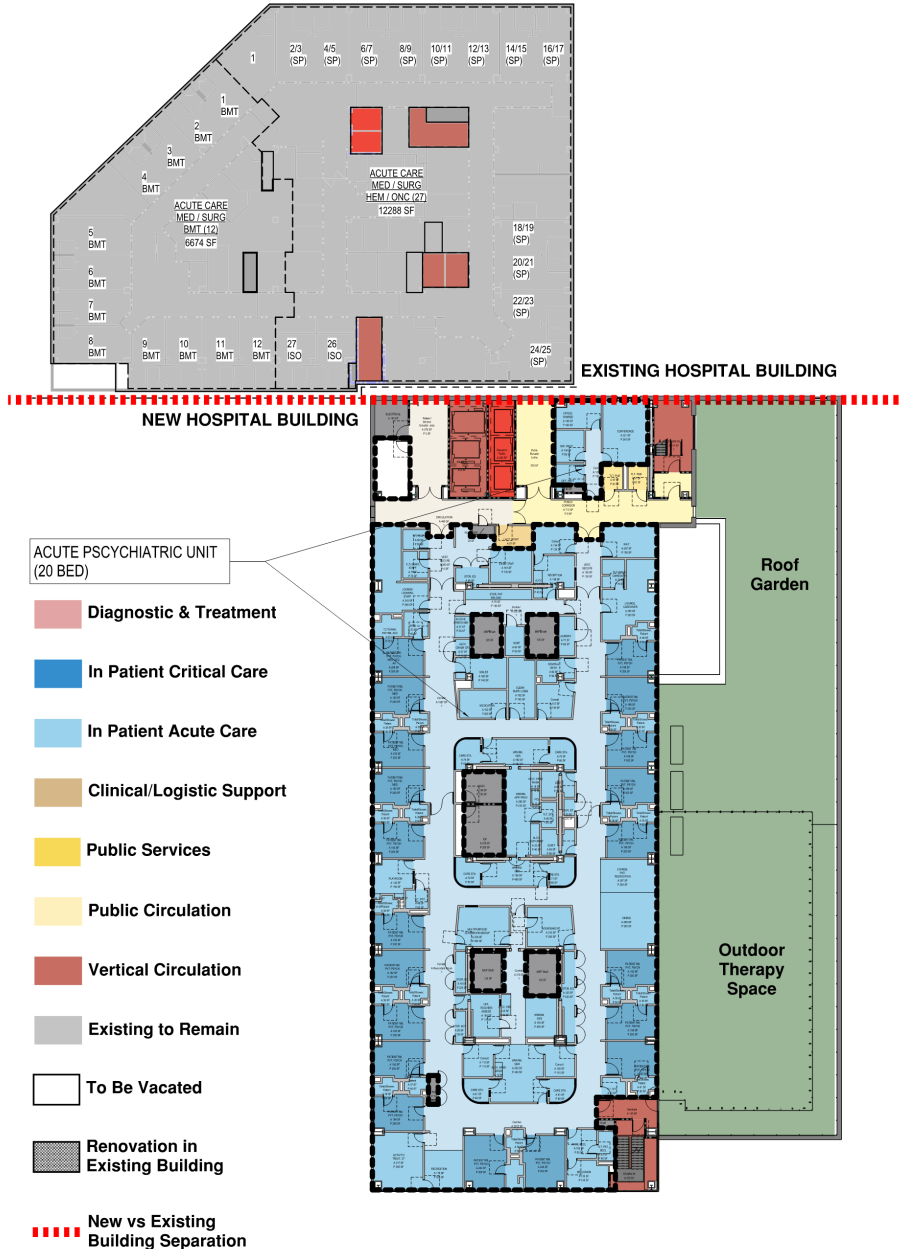
SURGERY/CATH/  
SHARED SUPPORT/  
SPECIAL PROCEDURE  
(GI/ENDO).



# Level Four Neonatal Intensive Care Unit Floor Plan



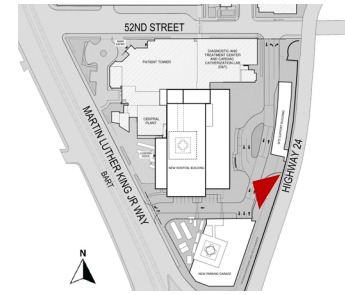
## Level Five Behavioral Health Floor Plan



## Level Six & Seven Typical Med/Surg Floor Plan

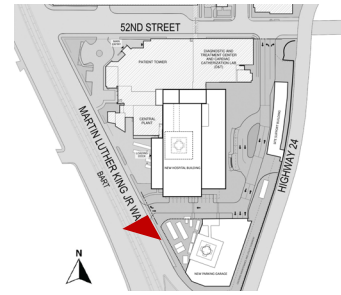


## View Looking Northwest from Dover St Extension





# View Looking North from BART Tracks and MLK

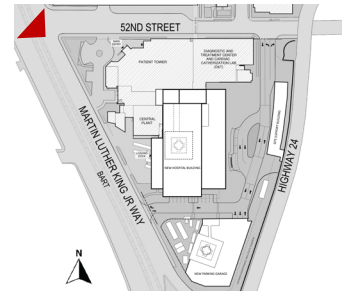




**View Looking Southeast from 52<sup>nd</sup> St and MLK**

**Existing Patient Tower**

**New Hospital Building**



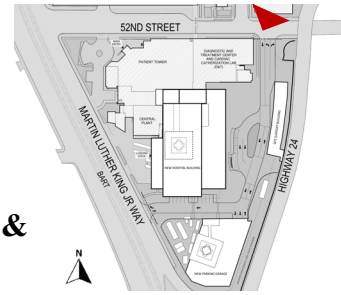
**View Looking Southwest from 52<sup>nd</sup> St and Dover St**

**New Site Services Building**

**New Parking Garage and Helistop**

**New Hospital Building**

**Existing Diagnostic & Treatment Building**





**Landscaping Images**

**Ground Floor Play Area**



**Behavioral Health Required Outdoor Area**





## Sustainability and Design Elements

- **LEED Gold certification target**
- **35% water reduction target**
- **Healthy and sustainable material selection**
- **High-performing systems to achieve indoor air quality**
- **Parksmart Silver certification target**
- **120 electric-vehicle charging spaces**



**Unitized Curtainwall System**

**Lightweight Integrated Composite Panels With Punched Openings**

# BCH-Oakland New Hospital Building

## UC OCEAN Report

Report prepared on May 24, 2024

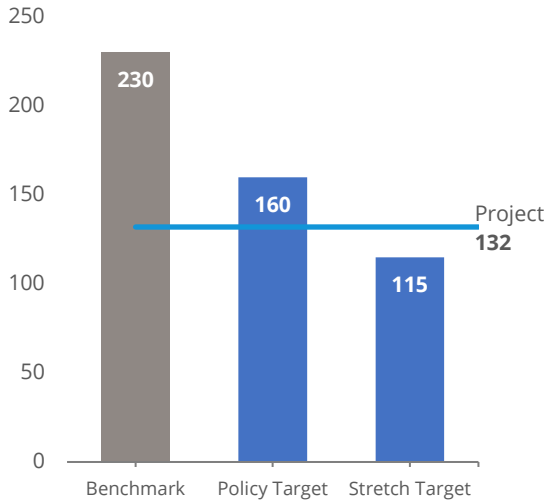
### PROJECT RESULTS

40-Year NPV Utility Costs **\$50,533,000**  
 Cumulative GHG Emissions **21,790 MTCO<sub>2</sub>e**

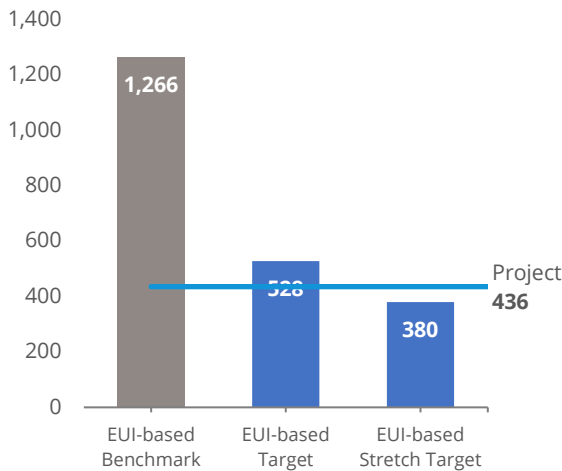
### PROJECT INPUTS

Campus *UCSF*  
 Project Size *277,500 sq ft*  
 Funding Stage *C-Funding*  
 Design Phase *Design Development*  
 Fuel Source *Mixed-fuel*  
 Electricity Provider *External Utility*  
 Cooling System *Stand-alone*  
 Heating System *Stand-alone*

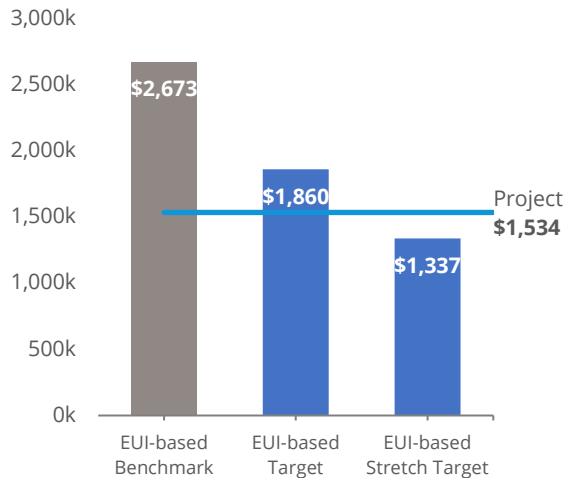
### SITE ENERGY USE INTENSITY (kBtu/sq ft)



### ANNUAL GHG EMISSIONS (MTCO<sub>2</sub>e/yr)



### ANNUAL UTILITY COSTS (\$k/yr)



### DEFINITIONS

**Benchmark:** UC Sustainable Practices Policy whole building energy use baseline benchmark based on building type and campus location.

**Policy Target and Stretch Target:** The UC Sustainable Practices Policy includes bi-annually updated minimum and stretch targets based on percent reduction in energy use from the Benchmark. See Table 1 of Section V.A.3 in the Policy for more information (<https://policy.ucop.edu/doc/3100155/SustainablePractices>).

**Project:** Results are estimated based on currently available project details and campus-specific energy assumptions.

**EUI-based Benchmark, Target and Stretch Target:** GHG emission estimates, and utility cost estimates associated with the project Benchmark EUI, Policy Target EUI, and Stretch Target EUI.

**STATEMENT OF COMPLIANCE WITH SELECT UC POLICIES**

**Sustainable Practices Policy**

This project will comply with the University of California Sustainable Practices Policy. The Sustainable Practices Policy establishes goals for green building, clean energy, transportation, climate protection, facilities operations, zero waste, procurement, food service, and water systems. A full range of sustainability practices for design and operations is included in the budgeting, programming, and design effort for the project.

**Small Business Enterprises (SBEs) and Disabled Veteran Business Enterprises (DVBES)**

The campus is committed to promoting and increasing participation of Small Business Enterprises (SBEs) and Disabled Veteran Business Enterprises (DVBES) in all purchasing and contract business, subject to any applicable obligations under State and federal law, collective bargaining agreements, and University policies. The campus regularly communicates with interested contractors and consultants to provide information about how to find opportunities to work at the campus and to encourage them to respond to the annual announcement soliciting interest to perform services. Providing qualified SBEs with the maximum opportunity to participate will be encouraged with the selected design professionals and contractors with the goal of meeting 25 percent participation.

**Seismic Safety**

This project will comply with the University of California Seismic Safety Policy, including independent seismic peer review.

# AMENDMENT #11 TO THE 2014 LONG RANGE DEVELOPMENT PLAN

## SUMMARY OF CHANGES TO THE 2014 LONG RANGE DEVELOPMENT PLAN (LRDP) PER LRDP AMENDMENT #11

1. Chapter 1: Executive Summary
  - a. (Pages 7-8) Table 1: Summary of LRDP Proposals – Benioff Children’s Hospital Oakland (BCH Oakland) proposals have been added to reflect the addition of BCH Oakland. Amendment #11 changes are shown in red text.
  - b. (Page 9) Chapter Overview has been updated to reflect the inclusion of BCH Oakland. Chapter and page numbers have been adjusted to reflect this LRDP Amendment.
2. Chapter 2: Planning Context
  - a. (Pages 13 and 25) This chapter’s text has been updated with the addition of BCH Oakland.
3. Chapter 3: LRDP Framework
  - a. (Pages 32 and 46) This chapter has been updated to clarify that the BCH Oakland Community Advisory Board (CAB) provides advice and guidance on critical programs and initiatives at BCH Oakland.
4. Chapter 9: Benioff Children’s Hospital Oakland
  - a. (Pages 109-120) This entire chapter’s text and graphics have been updated with the addition of BCH Oakland and is therefore not shown in red. Chapter 9 was previously the Smaller Owned Site chapter. All chapter numbers and conforming changes following Chapter 9 have been updated respectively (i.e., Chapter 10 has been updated to “Chapter 10: Smaller Owned Sites”, Chapter 11 has been updated to “Chapter 11: Leased Sites”, Chapter 12 has been updated to “Chapter 12: Cross-Campus Support”, and Acknowledgements is now Chapter 13. Conforming figure numbers in Chapters 9 and 10 have been updated to reflect this LRDP Amendment.
5. Chapter 10: Smaller Owned Sites
  - a. (Pages 130-131) This chapter has been updated with smaller-owned off-site locations associated with BCH Oakland (MLK Jr. Way Building, Claremont Clinics at 5220 Claremont Avenue and 5400 Telegraph Avenue, 4701 Shattuck Avenue, and the Walnut Creek Outpatient Center)
6. Chapter 13: Acknowledgements
  - a. (Page 157) Page numbers for photo credits have been updated to reflect the addition of Chapter 9: Benioff Children’s Hospital Oakland.
7. Appendices
  - a. Appendix A: Existing and Proposed Space Program
    - i. (Pages 161-164) Existing and Proposed Space Program tables have been revised to include the space program for BCH Oakland.
  - b. Appendix B: Buildings by Campus Site
    - i. (Pages 165-169) Buildings by Campus Site tables have been updated to include the addition of owned buildings at BCH Oakland.
  - c. Appendix D: Community Planning Principles

- i. (Page 172) Community Planning Principles has been updated to clarify that the BCH Oakland Community Advisory Board (CAB) provides advice and guidance on critical programs and initiatives at BCH Oakland.

Table 1: Summary of LRDP Proposals (continued)

|   | LRDP OBJECTIVES                            |   |  |                                       |                          |                                 |
|---|--|---|--|---------------------------------------|--------------------------|---------------------------------|
|   | Responds to the City and Community Context | Accommodates UCSF's Growth Through 2035 | Ensures UCSF's Facilities are Seismically Safe | Promotes Environmental Sustainability | Minimizes Facility Costs | Other Primary Purposes          |
| <b>LRDP PROPOSALS</b>   |  |   |  |                                       |                          |                                 |
| <b>MISSION BAY</b>  |  |   |  |                                       |                          |                                 |
| Develop additional research capacity (Blocks 16, 18A, 23A, and 25B)   | √  | √                                       | √  |                                       |                          |                                 |
| Develop new housing (Block 15)  | √  | √                                       | √  | √                                     |                          | Helps meet housing goals        |
| Complete Phase 1 of the Medical Center (South Campus)   | √  | √                                       | √  | √                                     |                          |                                 |
| Expand the Mission Bay campus site to include Blocks 33 and 34 (East Campus)  | √  | √                                       | √  |                                       |                          | Improves operational efficiency |
| Develop additional open space (Blocks 15, 16, and 23A)  | √  |   |  | √                                     |                          | Promotes campus life            |
| Develop outdoor recreation space (Block 18C)  | √  |   |  | √                                     |                          | Promotes campus life            |
| Develop additional structured parking (Block 18B)   | √  | √                                       | √  |                                       |                          |                                 |
| Complete the street network   | √  | √                                       |  |                                       |                          | Improves connectivity           |
| Increase bicycle and motorcycle parking capacity  | √  | √                                       |  | √                                     |                          |                                 |
| <b>MOUNT ZION</b>   |  |   |  |                                       |                          |                                 |
| Renovate and reuse the existing hospital  |  |   | √  | √                                     | √                        |                                 |
| Demolish the Hellman, Harold Brunn Institute, and Dialysis Center buildings   |  |   | √  |                                       | √                        |                                 |
| Construct new clinical and/or research space  |  | √                                       | √  |                                       |                          |                                 |
| Retrofit or demolish the building at 2255 Post Street   |  |   | √  |                                       | √                        |                                 |
| Develop open space  | √  |   |  | √                                     |                          | Promotes campus life            |
| Provide additional parking  |  | √                                       | √  |                                       |                          |                                 |
| <b>SAN FRANCISCO GENERAL HOSPITAL</b>   |  |   |  |                                       |                          |                                 |
| Construct a new research building   | √  | √                                       | √  |                                       |                          |                                 |
| <b>BENIOFF CHILDREN'S HOSPITAL OAKLAND<sup>2</sup></b>  |  |   |  |                                       |                          |                                 |
| Construct an Administrative Support Building (ASB)  |  | √                                       | √  | √                                     | √                        |                                 |
| Demolish the Hospital Loading Dock, A/B Wing, B/C Wing, Bruce Lyon Memorial Research Laboratory, Bruce Lyon Addition, Helistop Structure, and Temporary Trailer buildings |  |   | √  |                                       | √                        |                                 |
| Construct a New Hospital Building (NHB) and Site Support Structure  |  | √                                       | √  | √                                     | √                        |                                 |
| Renovate the Patient Tower and the Ford Diagnostic and Treatment Center buildings   |  |   | √  | √                                     | √                        |                                 |
| Provide additional parking  |  | √                                       | √  |                                       |                          |                                 |
| Improve site circulation  | √  | √                                       |  |                                       |                          | Improves connectivity           |
| <b>MISSION CENTER</b>   |  |   |  |                                       |                          |                                 |
| Develop a new building, structured parking, and open space  | √  | √                                       | √  | √                                     |                          |                                 |
| <b>LAUREL HEIGHTS</b>   |  |   |  |                                       |                          |                                 |
| Reinvest in existing facilities, or relocate functions and sell or lease property   | √  |   |  | √                                     | √                        |                                 |

<sup>2</sup> Benioff Children's Hospital LRDP Proposals added by Long Range Development Plan Amendment #11

|   | LRDP OBJECTIVES                            |   |  |                                       |                          |                                 |
|---|--|---|--|---------------------------------------|--------------------------|---------------------------------|
|   | Responds to the City and Community Context | Accommodates UCSF's Growth Through 2050 | Ensures UCSF's Facilities are Seismically Safe | Promotes Environmental Sustainability | Minimizes Facility Costs | Other Primary Purposes          |
| <b>LRDP PROPOSALS</b>   |  |   |  |                                       |                          |                                 |
| <b>654 MINNESOTA STREET</b>   |  |   |  |                                       |                          |                                 |
| Continue programs and uses in existing building                                   |  | √                                       |  |                                       |                          |                                 |
| <b>BUCHANAN DENTAL CENTER</b>   |  |   |  |                                       |                          |                                 |
| Continue clinic in existing building  |  | √                                       |  |                                       |                          |                                 |
| <b>HUNTERS POINT</b>  |  |   |  |                                       |                          |                                 |
| Reinvest in existing facilities, or relocate functions and relinquish property    | √  |   |  | √                                     | √                        |                                 |
| <b>OYSTER POINT</b>   |  |   |  |                                       |                          |                                 |
| Reinvest in existing facilities, or relocate functions and relinquish property    | √  |   |  | √                                     | √                        |                                 |
| <b>FRESNO CENTER FOR MEDICAL EDUCATION AND RESEARCH</b>                           |  |   |  |                                       |                          |                                 |
| Continue programs and uses in existing building                                   |  | √                                       |  |                                       |                          |                                 |
| <b>LEASES</b>   |  |   |  |                                       |                          |                                 |
| Where and when possible and appropriate, relocate occupants into UCSF-owned space |  |   |  | √                                     | √                        | Improves operational efficiency |

## CHAPTER OVERVIEW<sup>4</sup>

The LRDP consists of 13 chapters, including this Executive Summary, plus several appendices. Chapter 2 provides an overview of UCSF's regional and national importance, historic development, and academic, research, and clinical programs. It also summarizes prior LRDPs and describes the relationship between this LRDP and UCSF's 2010 *Physical Design Framework*. Chapter 3 contains further explanation of the five LRDP Objectives, which are designed to provide overarching guidance for UCSF's physical development and enable the evaluation of future projects for general conformance with the LRDP. The five LRDP Objectives also are included in **Table 1** (previous pages), which shows how each LRDP proposal addresses these objectives.

The *Community Planning Principles*, discussed in Chapter 3 and included in full as **Appendix D**, were produced in collaboration with the UCSF Community Advisory Group. These principles will be used to aid in future planning as a framework for addressing neighborhood concerns that may arise as a result of UCSF's development under the LRDP. The *Community Planning Principles* support the LRDP Objectives by helping the University complement and advance the planning priorities of both its neighbors and the City and County of San Francisco (City).

Chapters 4, 5, 6, 9, 10, and 11 describe the existing conditions and LRDP proposals for UCSF's owned campus properties and significant leased sites. Parnassus Heights, Mission Bay, Mount Zion and **Benioff Children's Hospital Oakland**, are addressed in Chapters 4, 5, 6, and 9 respectively, which include site-specific objectives and proposed functional zones to guide future development. Chapters 7 and 8 lay out UCSF's plans for SFGH and the San Francisco Veterans Affairs Medical Center. Chapter 10 focuses on smaller owned sites while Chapter 11 discusses leased sites. Cross-campus support functions, such as child care and transportation, are addressed in Chapter 12. Chapter 13 contains Acknowledgements, and includes the membership of the LRDP Oversight Committee and its Subcommittees, the Community Advisory Group, and others who have contributed to the preparation of the LRDP.

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<sup>4</sup> Updated to reflect LRDP Amendment #11.



## 2.1 PURPOSE OF THE LRDP

Each University of California (UC) campus is required periodically to prepare a *Long Range Development Plan* (LRDP) to guide campus growth and future physical development. This LRDP is a comprehensive physical land-use plan and policy document that articulates a long-term development strategy for achieving the academic, clinical, and research missions of UC San Francisco (UCSF) through the year 2035. It contains objectives to guide decisions for future facilities to meet UCSF's needs over the next 20 years, and projects the quantities and uses of new building space needed during this time frame. Future individual construction projects will be evaluated for general conformity with the LRDP and considered for approval following a community process and any environmental analysis and public review required by the *California Environmental Quality Act* (CEQA).<sup>1</sup> A project is generally found to be in conformance with the LRDP if the proposed land use is consistent with established land use designations and complies with the LRDP objectives. The 2014 LRDP also includes *Community Planning Principles* (included in full as **Appendix D**), which were produced in collaboration with the UCSF Community Advisory Group. These will be used to aid in future planning as a framework for addressing neighborhood concerns that may arise as a result of UCSF's development under the LRDP.

The 2014 LRDP is an opportunity for UCSF to assess its needs, establish goals for the future, and provide a forum to discuss issues of mutual concern to UCSF, the City and County of San Francisco (City), and the communities surrounding UCSF's campus sites. The LRDP serves as UCSF's request to the Board of Regents of the University of California (Regents) for approval of proposed land use designations, program square footage, and population growth during the LRDP planning horizon.

Land use designations are described in the LRDP using functional zones, which provide guidance for where certain types of uses are best located based on desired land use adjacencies and other geographic considerations. The LRDP includes six categories of functional zones: research, clinical, support, housing, open space, and parking. **Functional zone maps are provided for Parnassus Heights, Mission Bay, Mount Zion and Benioff Children's Hospital Oakland to guide the location of future capital construction and infrastructure development.**<sup>2</sup>

The 1996 LRDP focused on the acquisition of, and planning for, a major new site, which led to the development of the Mission Bay campus site, toward which UCSF has directed

most of its capital resources in the intervening years. This LRDP contemplates investment in existing facilities and older sites, along with further development at Mission Bay.

The 2014 LRDP *Environmental Impact Report* (EIR)<sup>3</sup> was prepared in accordance with CEQA to analyze potential environmental impacts that could result from implementation of the LRDP. Following public review, the EIR and LRDP will be finalized and submitted to the Regents for their review and consideration. Upon adoption by the Regents, the 2014 LRDP will replace UCSF's 1996 LRDP, as amended.<sup>4</sup>

<sup>3</sup> [www.ucsf.edu/content/lrdp-environmental-impact-report-downloads](http://www.ucsf.edu/content/lrdp-environmental-impact-report-downloads)

<sup>4</sup> [www.ucsf.edu/sites/default/files/legacy\\_files/UCSF\\_LRDP\\_as%2520amended\\_web.pdf](http://www.ucsf.edu/sites/default/files/legacy_files/UCSF_LRDP_as%2520amended_web.pdf)

<sup>1</sup> [resources.ca.gov/ceqa/guidelines](http://resources.ca.gov/ceqa/guidelines)

<sup>2</sup> Updated to reflect LRDP Amendment #11.

and physician practices operated by the Medical Center and the School of Medicine) and UCSF Benioff Children's Hospital – and the UCSF Dental Center. UCSF Medical Center is the leading hospital in San Francisco and Northern California, and provides excellent primary care, in addition to being a destination for patients with complex health conditions from around the world.

UCSF provides medical expertise and treatment for all human conditions including cancer, heart disease, neurological disorders, organ transplantation, and orthopedics, as well as specialty services for women and children. UCSF Medical Center is a tertiary referral center<sup>18</sup> with major clinical sites at Parnassus Heights and Mount Zion. It is licensed for 722 beds, with 659 in use in 2013: 568 in Moffitt and Long Hospitals at Parnassus Heights and 91 at Mount Zion. In 2012, the Medical Center provided care for 28,900 hospital patients and 844,700 outpatients. These patients were attended to by approximately 1,000 faculty physicians from the UCSF Medical Group, a faculty practice organization within the School of Medicine. Similarly, faculty from the Schools of Nursing, Dentistry, and Pharmacy provide clinical care and student training in a variety of clinics and hospitals.

UCSF Medical Center has embarked on an ambitious plan to construct a new hospital complex at Mission Bay, the first phase of which is to open in February 2015. The new facilities address the mandates of the California *Alquist Seismic Safety Act*, which require that older inpatient hospitals (such as Moffitt Hospital and inpatient facilities at Mount Zion) either be upgraded to higher, more stringent seismic standards, or be decommissioned. Construction of UCSF Medical Center at Mission Bay will accommodate inpatient programs from Mount Zion and allow the vacated inpatient space to be reassigned to outpatient use. Inpatient care at Moffitt and Long Hospitals will continue after the Medical Center at Mission Bay is operational. UCSF Medical Center at Mission Bay will be the first new hospital built in San Francisco in 30 years, and will establish Mission Bay as a major site for patient care. The first phase consists of the new hospital complex, comprising the new UCSF Benioff Children's Hospital facility, UCSF Betty Irene Moore Women's Hospital, and UCSF Bakar Cancer Hospital, with a combined total of 289 beds; outpatient facilities; an energy center (central plant); parking; and a large public plaza along Fourth Street. Additional inpatient and outpatient facilities, support space, and parking will be developed in subsequent phases.

UCSF entered into an affiliation agreement with CHRCO in January 2014. **CHRCO remains a separate 501(c)3 not-for-profit corporation that is separately licensed.** Under the affiliation agreement, the University is responsible for CHRCO's Board appointments and financial obligations. CHRCO, located at 747 52nd Street at Martin Luther King Jr. Way in Oakland, operates the main Children's Hospital, an outpatient center, and adjacent clinics, as well as satellite locations around the Bay Area. **Following the 2014 agreement between CHRCO and UCSF, the hospital was renamed UCSF Benioff Children's Hospital Oakland (UCSF BCH Oakland).**<sup>19</sup>

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<sup>18</sup> This refers to specialized consultative care, usually on referral from primary or secondary medical care personnel. Specialist cancer care and neurosurgery are examples of tertiary care services.

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<sup>19</sup> Updated to reflect LRDP Amendment #11.

These objectives are intended to guide the development of future projects under the 2014 LRDP and enable the evaluation of future projects for general conformance with the LRDP.

### 3.1.1 OBJECTIVE 1: RESPOND TO THE CITY AND COMMUNITY CONTEXT

UCSF's owned and leased facilities are dispersed throughout San Francisco, a dense urban area with over 825,000 residents living in roughly 49 square miles. Because UCSF facilities are physically integrated into the fabric of the city, and UCSF provides clinical and research services that complement City services (e.g., community clinics) or are located in facilities owned by the City (e.g., San Francisco General Hospital [SFGH]), there is close collaboration between the two entities. In 1987, the City and UCSF entered into a *Memorandum of Understanding*, or MOU (attached hereto as **Appendix C**) to foster harmonious relations between the City and UCSF regarding the growth and development of UCSF facilities within the City's boundaries. The MOU describes the responsibilities of the City and UCSF for the oversight of their respective land uses and of the development, maintenance, and use of physical facilities, including methods of communication and consultation regarding UCSF's development.

UCSF consults with the City when planning new development, especially if improvements are being proposed within City rights-of-way adjacent to campus sites. The City coordinates with UCSF whenever changes are being planned in the public streets that run through or adjacent to campus sites. UCSF coordinates on a regular basis with the City of San Francisco Planning Department, Municipal Transportation Agency, Department of Public Works, and Office of Community Investment and Infrastructure, among other departments and agencies.

It is UCSF's intent to adhere, to the extent practicable, to City zoning codes related to building use, height, and bulk limitations; floor area ratios; and parking requirements or restrictions. At Mission Bay, campus development is subject to agreements that were negotiated by UCSF with the City and the developer as part of the *Mission Bay Redevelopment Area North and South Plans*.<sup>2</sup> UCSF is particularly sensitive to traffic impacts, which are considered along with other environmental impacts whenever new projects are proposed, as required by the *California Environmental Quality Act* (CEQA). At Mission Bay, UCSF has coordinated with the

City to ensure that the proposed increase in development capacity on the campus site would not generate traffic and infrastructure impacts that could not be mitigated. UCSF respects the City's *Transit First* policy,<sup>3</sup> and employs an aggressive Transportation Demand Management (TDM) program that includes an extensive shuttle system, among other alternative transportation opportunities. UCSF is also fully aware of the limited housing supply in the City and endeavors to address the need for campus housing by providing campus housing at Parnassus Heights and Mission Bay. For all these reasons, the relationship between UCSF and the City is a strong and supportive one.

### COMMUNITY ADVISORY GROUP

UCSF also works closely with surrounding community members in acknowledgement that UCSF impacts neighbors in both positive and negative ways. Based on UCSF's experience, neighbors' concerns regarding UCSF's physical development include: traffic and parking; building scale and design; open space treatment, and other impacts that an urban, densely populated institution can have on nearby residents, such as construction and operational noise. UCSF regularly consults two advisory groups, the San Francisco Community Advisory Group (CAG) and the BCH Oakland Community Advisory Board (CAB). Both have members that represent a diverse collection of neighborhood, labor, ethnic, and business leaders who have an active interest in UCSF's activities and physical development in their respective areas (see Chapter 13: Acknowledgements). CAG and CAB members typically provide feedback on all UCSF projects, not just those proposed in their own neighborhoods.<sup>4</sup>

The mission of the CAG is to:

- Serve as a community advisory body and sounding board for UCSF administration on planning issues based on both a neighborhood and city-wide perspective
- Assist UCSF in strengthening communication with and engagement of the public on broader issues of community concern
- Provide essential and relevant feedback on programs, campus planning and development activities
- Identify strategies and actions for addressing community concerns

In addition, UCSF regularly conducts community meetings for neighbors near campus sites regarding upcoming projects

<sup>2</sup> North plan: [www.sfocii.org/Modules/ShowDocument.aspx?documentid=775](http://www.sfocii.org/Modules/ShowDocument.aspx?documentid=775)

South plan: [www.sfocii.org/Modules/ShowDocument.aspx?documentid=777](http://www.sfocii.org/Modules/ShowDocument.aspx?documentid=777)

<sup>3</sup> The City's *Transit First* policy was adopted as part of the *Transportation Element of the San Francisco General Plan*. [www.sf-planning.org/ftp/general\\_plan/14\\_Transportation.htm#TRA\\_TF](http://www.sf-planning.org/ftp/general_plan/14_Transportation.htm#TRA_TF)

<sup>4</sup> Updated to reflect LRDP Amendment #11.

5. The total population across all campus sites is projected to increase by approximately 14,900. UCSF population includes students, clinical residents, faculty, staff, postdoctoral scholars, patients, and visitors.

## 3.5 COMMUNITY PLANNING PRINCIPLES

### 3.5.1 BACKGROUND

While the LRDP Objectives described above are intended to guide UCSF's physical development under the 2014 LRDP and serve as criteria for evaluating future projects for general conformity with the LRDP, UCSF has partnered with its neighbors to also prepare *Community Planning Principles*. These Principles formalize UCSF's commitment to communicate with neighbors regarding its space needs and potential future development, in order to identify potential community concerns that may arise from UCSF's physical development prior to the time that individual projects are brought forward for approval.

The *Community Planning Principles* are intended to aid UCSF in both complementing and advancing the planning priorities of the City and of its campus neighbors, and were jointly developed by the UCSF Community Advisory Group and the UCSF LRDP Oversight Committee. They are inspired by the 1996 *LRDP Goals and Objectives* as well as by the 2008 *UCSF Mission Bay Community Planning Principles*—all of which resulted from campus-community collaboration. The *Community Planning Principles* supersede the 1996 *LRDP Goals and Objectives* and the 2008 *UCSF Mission Bay Community Planning Principles*, and apply to UCSF's development throughout San Francisco, including at existing campus sites ("on-campus development") as well as at other locations ("off-campus development"), as of adoption of the 2014 LRDP and at locations which may be proposed in the future.

### 3.5.2 OVERARCHING PRINCIPLES

The *Community Planning Principles* include five Overarching Principles, augmented by *Community Planning Goals*. The five Overarching Principles, below, describe how UCSF will communicate with neighbors about its physical development plans both on- and off-campus, and consider the cushioning of impacts that result from UCSF's development. In order to support the implementation of these five Overarching Principles, *Community Planning Goals* are also identified covering a range of potential topic areas, representing what UCSF will strive for in implementing the overarching principles. The *Community Planning Principles* are presented together in **Appendix D**.

#### OP1. COMMUNITY CONSULTATION

Recognizing community concerns about the potential negative effects of UCSF's development on adjacent neighborhoods:

- To the extent allowed by confidentiality agreements governing real estate transactions, UCSF will consult with the community before initiating a project that could result in property acquisition if the proposed project might not conform to the use, height, bulk, density, design or open space restrictions established for the site by City zoning; would affect historic resources; or would require conditional use authorization or variance were the project to be developed by a private party.
- UCSF will consult with the community before decisions are made to intensify use of existing property. Optimizing use of its space and physical assets is a critical objective of UCSF during this next LRDP period.

This principle is not intended to eliminate the normal communication between UCSF and its neighbors during the life of a project regarding exterior design, landscaping, parking and traffic, or other project elements.

#### OP2. COMMUNITY NOTIFICATION

When UCSF acquires property it will list these acquisitions on a website and notify the [San Francisco Community Advisory Group \(CAG\)](#), [Oakland Community Advisory Board \(CAB\)](#), and other neighbors as requested [for properties in their respective areas](#).<sup>23</sup>

#### OP3. CUSHIONING OF IMPACTS

When UCSF acquires property,<sup>24</sup> or intensifies use of existing property,<sup>25</sup> it will, on a case-by-case basis, enter into discussions with community groups representing adjoining neighborhoods and/or with the City to identify neighborhood impacts, if any, of such lease, acquisition, development, and operations.

In the event that UCSF, the community groups, and/or the City agree that such impacts are likely to occur, UCSF will

<sup>23</sup> Updated to reflect LRDP Amendment #11.

<sup>24</sup> "Acquire property": acquire property through lease or purchase, or acquire property by gift, and develop such property for UCSF use.

<sup>25</sup> "Intensify use of existing property": develop or change the use of an existing property, if the proposed project would increase the square footage or population of the campus site in a manner that could reasonably be expected to trigger community concern.





9



UCSF Benioff Children's Hospital Oakland

# BENIOFF CHILDREN'S HOSPITAL OAKLAND

Emergency Parking Only

Outpatient Center







770 53RD STREET

670 53RD STREET

53rd Street

Dover Street

PARKING GARAGE

707 53RD STREET

NOT OWNED BY UCSF

679 53RD STREET

715 53RD STREET

5225 DOVER STREET

675 53RD STREET

671 53RD STREET

SITE OF 667 53RD STREET AND 663 53RD STREET BUILDINGS

SPORTS REHAB

FAMILY HOUSE

OUTPATIENT CENTER (OPC) 2

OUTPATIENT CENTER (OPC) 1

SITE OF FUTURE ADMINISTRATIVE SUPPORT BUILDING

52nd Street

PEDESTRIAN BRIDGE (ABOVE 52ND STREET)

5203 DOVER STREET

NOT OWNED BY UCSF

FORD DIAGNOSTIC AND TREATMENT (D&T) CENTER

PATIENT TOWER

CARDIAC CATHETERIZATION LAB

WESTERN EXPANSION BUILDING

CAFETERIA

B/C WING

A/B WING

CHILLER BUILDING

CENTRAL UTILITY PLANT

TRANSPORTABLE MRI

TEMPORARY TRAILER (T1)

HOSPITAL LOADING DOCK

51st Street

TEMPORARY TRAILER (T2)

TEMPORARY TRAILER (T3)

TEMPORARY TRAILER (T5)

815 51ST STREET

WEST LOT

HELISTOP

BRUCE LYON MEMORIAL RESEARCH CENTER

BRUCE LYON ADDITION

BCH OAKLAND, 2024



## 9.1 EXISTING SETTING<sup>1</sup>

The UCSF Benioff Children's Hospital Oakland (BCH Oakland) campus site is approximately 11.0 acres in the North Oakland neighborhood of the City of Oakland (**Figure 25**). The triangular campus site is roughly bounded by 53rd Street on the north, Martin Luther King (MLK) Jr. Way to the south and west, and State Route 24 (SR 24) on an embankment to the east. Elevated Bay Area Rapid Transit (BART) train tracks are located both in the center of MLK Jr. Way adjacent to the site on the west, and between the SR 24 freeway lanes adjacent to the site on the east. A BCH Oakland surface parking lot is located west of MLK Jr. Way, between 47th and 51st Streets. As indicated in Figure 25, there are two parcels within the campus site that are not owned by BCH Oakland.

The BCH Oakland campus site is surrounded by predominately residential uses, with commercial uses located along Telegraph Avenue to the east and Martin Luther King Jr. Way to the northwest. Helen McGregor Plaza, a public park, is located to the west across MLK Jr. Way.

Buildings at the BCH Oakland campus site vary considerably in age, height (one to five stories), and architectural style. Development south of 52nd Street is moderately dense and includes several interconnected hospital buildings, a 36-foot-tall helistop structure, additional support buildings, and temporary trailers housing office and administrative uses. Research and office uses are located at the southern end of the site. An outpatient center and a parking structure are located north of 52nd Street. A pedestrian bridge over 52nd Street connects outpatient and hospital buildings on either side of the street.

The northeastern area of the campus site near Dover Street between 52nd and 53rd Streets contains several one- and two-story structures originally constructed as single-family residences that are now occupied by office and other uses, along with the three-story Family House on Dover Street which provides housing for families of BCH Oakland patients. These buildings serve as a transition zone between the more densely developed portion of the campus site to the south and the neighboring residential area to the north.

The campus site contains limited useable open space, primarily consisting of a small courtyard between the A/B and B/C Wings, which is partially occupied by a temporary trailer housing Magnetic Resonance Imaging (MRI) equipment.

Clinical uses are predominant on the campus site. BCH Oakland owns buildings comprising 528,800 gsf, and leases another 42,100 square feet of space within a quarter-mile of the site, for a total of 570,900 gsf (**Appendix A**). BCH Oakland provides 177 licensed inpatient beds and an average daily census of 111 inpatients.

Aged facilities and functional obsolescence present challenges to the long-term viability of the BCH Oakland hospital, including seismically non-compliant buildings, capacity constraints, inefficient layouts, and undersized facilities. The UC Seismic Safety Policy requires that buildings and facilities where University operations and activities occur be acquired, built, maintained, and rehabilitated to an acceptable level of earthquake safety. In addition, in order to comply with state seismic safety standards, a substantial portion of the existing inpatient facilities at the UCSF BCH Oakland campus must be either structurally retrofitted or decommissioned and replaced by January 1, 2030. Also, the Office of Statewide Health Planning and Development (OSHPD) has mandated that inpatient uses in both the A/B and B/C Wings be discontinued by December 31, 2023.

Construction of a three-story, 31,300 gsf Administrative Support Building (ASB) is underway at the northeast corner of 52nd and Dover streets to provide relocation space for departments currently in buildings that do not meet seismic requirements, but which need to be located near hospital functions.

BCH Oakland's Community Advisory Board (CAB), comprised of 17 members representing a cross-section of the diverse Oakland community including representatives from community health clinics and community leaders, provides advice and guidance on critical BCH Oakland programs and initiatives.

<sup>1</sup> Chapter 9 added by Long Range Development Plan Amendment #11.

Figure 25: BCH Oakland Existing Conditions





## 9.2 BCH OAKLAND SITE-SPECIFIC OBJECTIVES

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Site-specific objectives for the BCH Oakland campus site are:

- A. Modernize the campus to ensure compliance with regulatory requirements and improve the level of services to patients and their families.
- B. Address seismically compromised and obsolete buildings.
- C. Develop new facilities to accommodate programmatic needs.



Main Hospital Entrance

## PROPOSALS FOR BCH OAKLAND

- Construct an Administrative Support Building (ASB)
- Demolish the Hospital Loading Dock, A/B Wing, B/C Wing, Bruce Lyon Memorial Research Laboratory, Bruce Lyon Addition, Helistop Structure, and Temporary Trailer buildings
- Construct a New Hospital Building (NHB) and Site Support Structure
- Renovate the Patient Tower and the Ford Diagnostic and Treatment Center buildings
- Provide additional parking
- Improve site circulation

## 9.3 BCH OAKLAND PLAN ELEMENTS

### 9.3.1 LAND USE

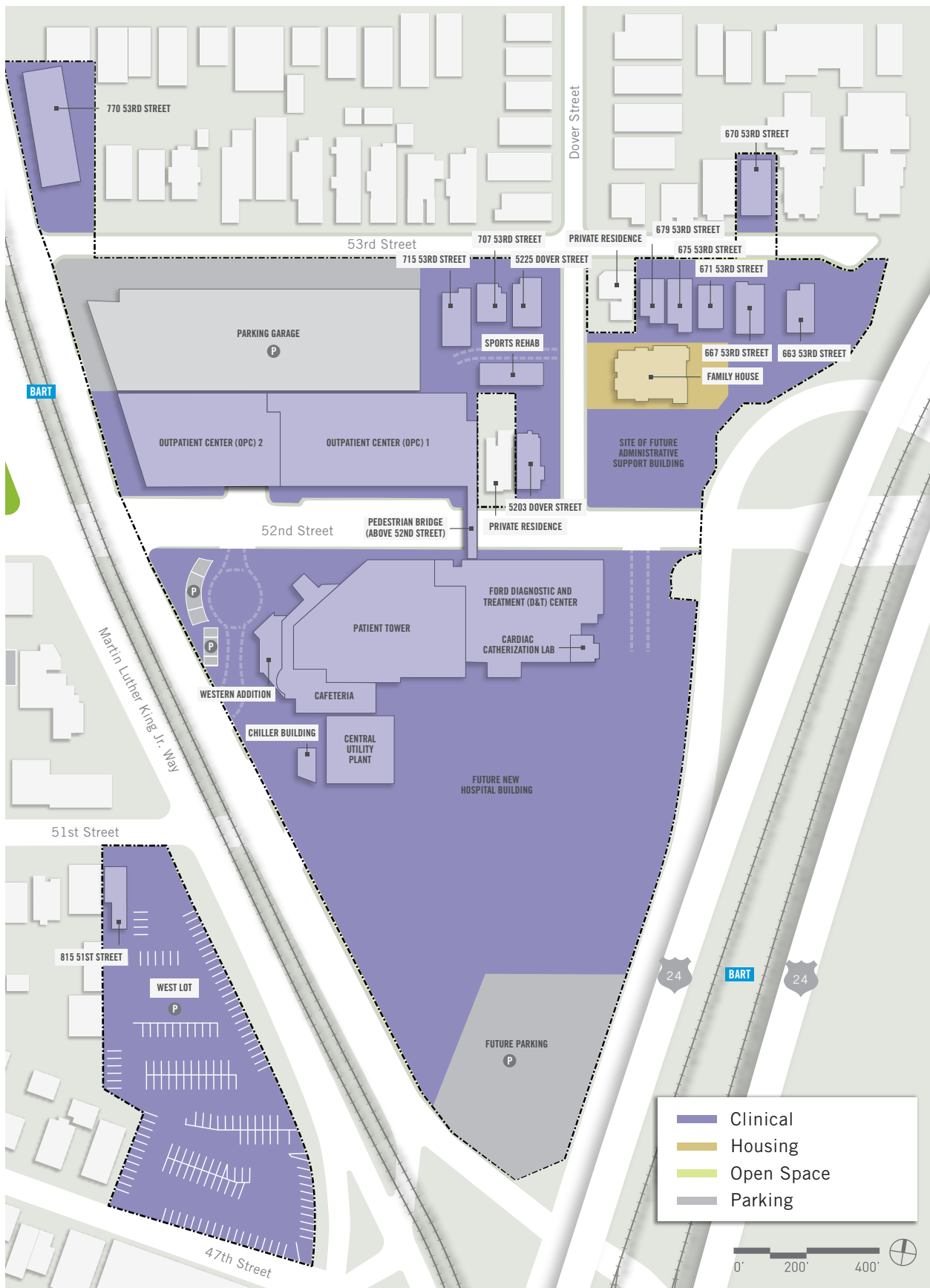
**Figure 26** illustrates the proposed campus boundary and functional zones. The proposed boundary encompasses only those buildings owned by BCH Oakland and excludes two small parcels on 52nd and 53rd Streets that are not owned by BCH Oakland. Since the site is primarily devoted to inpatient and outpatient uses, most of the site is within the Clinical functional zone. Exceptions are the existing parking structure on MLK Jr. Way between 52nd and 53rd streets and the area of the proposed parking structure at the southern end of the campus site which are in the Parking functional zone, and Family House which contains patient family housing which is in the Housing functional zone.<sup>2</sup>

The following LRDP proposals describe the current approach for fulfilling the site-specific objectives described above for the BCH Oakland campus site:

- **Construct an Administrative Support Building (ASB).** To provide relocation space for support and administrative functions currently in buildings that do not meet seismic requirements, construction of an ASB containing approximately 31,300 gsf is underway on the northeast corner of 52nd and Dover streets.
- **Demolish the Hospital Loading Dock, A/B Wing, B/C Wing, Bruce Lyon Memorial Research Laboratory, Bruce Lyon Addition, Helistop Structure, and Temporary Trailer buildings.** These buildings, which total approximately 110,800 gsf, are considered obsolete, and the A/B and B/C Wings carry a Structural Performance Category Rating of 1 (SPC-1), meaning that they currently pose a significant risk of collapse following a strong earthquake. An additional trailer containing a transportable MRI would be relocated.

<sup>2</sup> The existing surface parking lot west of MLK Jr. Way between 47th and 51st Streets is considered a temporary use located within the Clinical functional zone.

Figure 26: Proposed Functional Zones



- **Construct a New Hospital Building (NHB) and Site Support Structure.** In order to comply with the requirements of the State of California Alfred E. Alquist Hospital Facilities Seismic Safety Act of 1983, as amended, the NHB, containing approximately 277,500 gsf, is proposed on the site of the current Hospital Loading Dock, A/B Wing, B/C Wing, Helistop Structure, and several Temporary Trailer buildings. The NHB would provide new pediatric inpatient single occupancy rooms and modernize existing services by providing new operating rooms and a new emergency department, and would be connected to the existing Patient Tower and Diagnostic & Treatment Buildings. The proposed NHB would include a permanent loading dock in the same general location as the current hospital loading dock. Because the existing hospital loading dock would be inaccessible during construction, a Site Support Structure of approximately 5,000 gsf would be constructed at the eastern edge of the site for hospital loading activities during construction. The Site Support Structure would be repurposed for other support uses after the NHB opens. The existing helistop is proposed to be relocated on site.
- **Renovate the Patient Tower and the Ford Diagnostic and Treatment Center buildings.** To further support the hospital modernization effort, the two buildings would be renovated as necessary.

In total, approximately 313,800 gsf of new program space may be built at the BCH Oakland campus site through 2035. Accounting for the demolition of obsolete space, a net increase of about 203,000 gsf would result, increasing the amount of program space at the site from 528,800 gsf to 731,800 gsf. In addition, a new parking structure of approximately 103,200 gsf would be added at the BCH Oakland campus site.

### 9.3.2 OPEN SPACE

Useable open space on the BCH Oakland campus site is primarily limited to a courtyard between the A/B and B/C Wings. The development of the NHB may provide the opportunity to integrate a modest amount of open space into the design. In order to enhance the public realm, UCSF expects to provide new site landscaping with new facilities, and to coordinate with the City to consider potential improvements, such as street trees, in adjacent public rights-of-way.

### 9.3.3 CIRCULATION, TRANSPORTATION, AND PARKING

BCH Oakland is served by AC Transit and local bicycle routes, and a UCSF shuttle connects the BCH Oakland campus site with the MacArthur BART station. Existing transit, shuttle, and bicycle routes are depicted in **Figure 27**. Patient, visitor and staff parking is provided in a parking structure accessed off of MLK Jr. Way, and additional employee parking is provided in a surface lot west of MLK Jr. Way between 47th and 51st Streets. Parking and loading facilities at the BCH Oakland campus site are shown in **Figure 28**. UCSF will continue to enhance its Transportation Demand Management program at BCH Oakland to encourage the use of alternative modes of transportation.

- Provide additional parking. A new parking structure with up to approximately 270 spaces is proposed on the site of the current Bruce Lyon Memorial Research Laboratory, Bruce Lyon Addition, and Temporary Trailer buildings at the southern portion of the campus site.
- Improve site circulation. The principal vehicular access point to the proposed NHB and new parking structure would be on 52nd Street near Dover Street. An internal driveway would extend south from 52nd Street to access the hospital, emergency department, and new parking garage.

### 9.3.4 UTILITIES AND OTHER INFRASTRUCTURE

As a prerequisite for the NHB project, an existing PG&E electricity line that runs through the southern portion of the campus site would need to be relocated. Utility services to new facilities will be evaluated to maximize the value of existing infrastructure (e.g., the Central Utility Plant) and identify opportunities for building-specific equipment.

Figure 27: Circulation Plan





Figure 28: Parking & Loading Plan



## 9.4 POPULATION

About 1,510 UCSF faculty and staff currently work at the BCH Oakland campus site. There are about 785 daily patients and 1,332 daily visitors to its outpatient facilities. It is estimated that there are a daily average of 150 students and fellows at BCH Oakland. The total daily campus population is estimated at 3,777 employees, students and fellows, patients, and visitors.

There are about 200,140 annual outpatient visits to the BCH Oakland campus site. Based on BCH Oakland's outpatient projections, annual outpatient visits could increase to 211,420 with the implementation of the LRDP Proposals for the BCH Oakland campus site. It is projected that the average daily population at BCH Oakland would increase to approximately 4,500 employees, students, patients, and visitors, for an increase of approximately 700. About 75 percent of the population increase would be due to patients and visitors and about 25 percent due to additional faculty physicians, staff, volunteers, vendors, and students.



Outpatient Center

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## 10.7 2130 THIRD STREET <sup>2</sup>

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The Child, Teen, and Family Center and the Department of Psychiatry Building is located at 2130 Third Street, one block south of the Mission Bay campus site in the northern edge of San Francisco's Dogpatch neighborhood. The 0.77-acre project site is located on the northern portion of the block bound by 18th Street, Third Street, 19th Street, and Tennessee Street. In April 2015, the University entered into a gift agreement with a donor who agreed to donate the site to the University for the purpose of constructing a building for the proposed uses. The proposed building would be about 170,000 gsf with one level of below grade parking for up to 41 spaces with valet operations. The building would range from three to five stories in height. The facility would include outpatient clinics, education, research, department administrative spaces and a small retail space. It is anticipated that approximately 512 faculty, staff, and students would work in the building.

## 10.8 MINNESOTA STREET HOUSING <sup>3</sup>

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The Minnesota Street Graduate Student and Trainee Housing project is located a block south of the Mission Bay campus site in the northern edge of San Francisco's Dogpatch neighborhood, amidst a mix of industrial, residential and emerging commercial uses. The 1.8-acre project site is comprised of two parcels separated by 18th Street. UCSF acquired the parcels in October 2015. In response to the rapid increase in the cost of housing throughout San Francisco, UCSF proposes to develop the site with housing that is affordable to graduate students and trainees. The housing complex would be about 377,000 gsf and include about 600 units of housing, parking and a small retail space. The complex is expected to house up to 810 residents, which would include graduate students and trainees along with spouses or partners.

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<sup>2</sup> Added by [LRDP Amendment #3](#).

<sup>3</sup> Added by [LRDP Amendment #4](#).

## 10.9 2130 POST STREET <sup>4</sup>

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The 2130 Post Street site is located a block east of the Mount Zion campus site in the Lower Pacific Heights neighborhood of San Francisco, amidst a mix of residential, institutional, and open space uses. The 0.6-acre site contains a 119,000 G5F residential building including 71 units plus parking, and was acquired by UCSF in March 2018. In response to the rapid increase in the cost of housing throughout San Francisco, UCSF plans to use the existing building for faculty housing. The complex is expected to house approximately 135 residents, which would include faculty along with spouses, partners and children.

## 10.10 777 MARIPOSA <sup>5</sup>

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777 Mariposa Street is located along the northern edge of the Dogpatch neighborhood, just south of the UCSF Mission Bay campus site at the southwest corner of Mariposa and Minnesota Streets. The existing building, a one-story precast concrete structure of about 43,600 square feet, was acquired by the University in 2016. The site was previously used by a wholesale plumbing supply business and most recently used by UCSF for construction offices and storage. The future use of the site is to be determined.

## 10.11 MLK JR. WAY BUILDING<sup>6</sup>

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The MLK Jr. Way Building is located at 5700 Martin Luther King Jr. Way in Oakland, approximately 0.4 miles north of the BCH Oakland campus site. The approximately 6.5-acre site contains the former University High School that is a City of Oakland Landmark and listed on the National Register of Historic Places. The site contains a two-story, 129,800 gsf Main Building that functions as a medical research facility with some space leased to the North Oakland Senior Center, the 1,900 gsf HEDCO Health Sciences Building that houses medical research equipment, and a two-story, 24,400 gsf Gymnasium that does not meet standards for occupancy and is currently unused. A parking lot adjacent to the building on the north side of the property contains 99 spaces, and a parking lot on the south side contains 90 spaces.

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<sup>4</sup> Added by [LRDP Amendment #5](#).

<sup>5</sup> Added by [LRDP Amendment #6](#).

<sup>6</sup> Added by [LRDP Amendment #11](#).

## 10.12 CLAREMONT CLINICS<sup>7</sup>

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The Claremont Clinics consist of two parcels approximately 0.3 miles to the east of the BCH Oakland campus site, at 5220 Claremont Avenue and 5400 Telegraph Avenue, in a mixed-use area with neighborhood commercial and residential uses. The parcel at 5220 Claremont Avenue is approximately 0.5 acre and contains a two-story, 20,500 gsf building and a surface parking lot with 30 spaces. The parcel at 5400 Telegraph Avenue, a through block parcel also referred to as 5275 Claremont Avenue, is approximately 0.8 acre and contains a one-story, 17,300 gsf building and a surface parking lot with 28 spaces. Both buildings house pediatric primary care clinics.

## 10.13 4701 SHATTUCK AVENUE BUILDING<sup>8</sup>

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The Shattuck Avenue property is located approximately 0.4 miles southeast of the BCH Oakland campus site at 4701 Shattuck Avenue, in a mixed-use area with neighborhood commercial and residential uses. The parcel is approximately 0.3 acre and contains a four-story, 16,700 gsf building and a surface parking lot with 13 spaces. The building houses administrative offices including workstations, conference rooms and support spaces.

## 10.14 WALNUT CREEK OUTPATIENT CENTER<sup>9</sup>

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The Walnut Creek Outpatient Center is located at 2401 Shadelands Drive in Walnut Creek, approximately 16 miles east of the BCH Oakland campus site. The parcel is approximately 5.5 acres and contains a one-story, 79,600 gsf building and a surface parking lot with 330 spaces. The building houses outpatient clinical uses.

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7 Added by [LRDP Amendment #11](#).

8 Added by [LRDP Amendment #11](#).

9 Added by [LRDP Amendment #11](#).

## 13.2 PHOTO CREDITS<sup>1</sup>

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Cal-Pictures 16  
 Cindy Chew 18, Cover, Inside Cover  
 Brooke Duthie Cover  
 Elizabeth Fall Back Cover  
 Deanna Fitzmaurice 153  
 Hawkeye Aerial Photography 28  
 San Francisco General Hospital, Perretti & Park Pictures 103  
 San Francisco Veterans Affairs Medical Center 105, 107  
 SkyHawk Photography 99  
 Sutro Stewards 45  
 UCSF Archives & Special Collections 10, 15  
 UCSF Campus Planning 77, 113, 119  
 UCSF Campus Planning, Sharon Priest 128  
 UCSF Capital Programs, Eileen Jue 149  
 UCSF Community and Government Relations, Barbara Bagot-López 25,  
 Cover, Inside Back Cover  
 UCSF Document & Media, Tracy Long 140  
 UCSF Housing Services, Todd McGregor 67, 141  
 UCSF School of Medicine, Sarah Paris 47  
 UCSF School of Pharmacy, Frank Farm 123, 125  
 UCSF Transportation Services 38, 147  
 UCSF University Relations, Leland Kim 150  
 UCSF University Relations, Susan Merrell 1, 2, 9, 34, 69, 74, 87, 91,  
 94, 98, 114, 134, 137, 152, 161, 162

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<sup>1</sup> Updated to reflect Amendment #11.

APPENDIX A: EXISTING AND PROPOSED SPACE PROGRAM<sup>1</sup>

| EXISTING 2020 (GSF)              | MAIN CAMPUS SITES |             |            |             | SMALLER OWNED SITES |               |                        |               |              |                                |           |              |        |                                   |                       |                       |
|----------------------------------|-------------------|-------------|------------|-------------|---------------------|---------------|------------------------|---------------|--------------|--------------------------------|-----------|--------------|--------|-----------------------------------|-----------------------|-----------------------|
|                                  | PARNASsus HEIGHTS | MISSION BAY | MOUNT ZION | BCH OAKLAND | MISSION CENTER      | 654 MINNESOTA | BUCHANAN DENTAL CENTER | HUNTERS POINT | OYSTER POINT | TIDELANDS HOUSING <sup>a</sup> | 2130 POST | 777 MARIPOSA | FRESNO | MLK JR. WAY BUILDING <sup>b</sup> | 5220 CLAREMONT AVENUE | 5400 TELEGRAPH AVENUE |
| Instruction                      | 291,500           | 172,600     | 50,100     | -           | 4,200               | -             | 5,900                  | -             | -            | -                              | -         | -            | 19,000 | -                                 | -                     | -                     |
| Research                         | 701,700           | 919,200     | 108,500    | -           | 19,700              | -             | -                      | 3,500         | -            | -                              | -         | -            | -      | 87,500                            | -                     | -                     |
| Clinical                         | 1,039,600         | 1,052,200   | 472,700    | 516,200     | 32,400              | -             | 8,100                  | -             | -            | -                              | -         | 1,600        | -      | -                                 | 20,500                | 17,300                |
| Academic Support                 | 195,500           | 131,400     | 23,700     | -           | 16,000              | 600           | -                      | 16,400        | 200          | 3,800                          | -         | 6,100        | -      | -                                 | -                     | -                     |
| Academic & Campus Administration | 543,800           | 637,900     | 87,400     | -           | 192,100             | 49,800        | 1,200                  | -             | 9,500        | 4,200                          | -         | 50,500       | 3,000  | -                                 | -                     | -                     |
| Campus Community                 | 146,200           | 246,800     | 20,700     | -           | 12,200              | 1,500         | 1,000                  | -             | 1,300        | 1,600                          | -         | 5,100        | 27,900 | -                                 | -                     | -                     |
| Logistics                        | 106,500           | 58,100      | 13,900     | -           | 14,300              | 1,800         | 2,000                  | 600           | 133,400      | 9,700                          | -         | 1,900        | -      | -                                 | -                     | -                     |
| Housing                          | 240,500           | 387,500     | -          | 12,600      | -                   | -             | -                      | -             | -            | 301,100                        | 97,000    | -            | -      | -                                 | -                     | -                     |
| Vacant/Alteration                | 700               | 5,100       | 100        | -           | -                   | 11,800        | -                      | -             | -            | 8,200                          | -         | -            | 37,600 | -                                 | -                     | -                     |
| Total Space Excluding Parking    | 3,266,000         | 3,610,800   | 777,100    | 523,500     | 290,900             | 65,500        | 18,200                 | 20,500        | 144,400      | 328,600                        | 97,000    | 43,600       | 84,200 | 150,000                           | 20,500                | 17,300                |
| Structured Parking               | 653,700           | 680,500     | 176,500    | 255,000     | -                   | -             | -                      | -             | -            | 41,200                         | -         | -            | -      | -                                 | -                     | -                     |

Note: All gsf numbers are rounded to the nearest 100. Individual columns and rows may not total due to rounding.

<sup>a</sup> Tidelands Housing is also known as Minnesota Street Housing.

<sup>b</sup> For the sake of simplicity, the LRPD refers to all space, owned and leased, in terms of gsf, even though leased space is sometimes measured in sf rather than gsf, depending on type of space and/or lease.

<sup>c</sup> MLK Jr. Way Building accounts for gsf of the Main Building, HEDCO Health Sciences Building, and Gymnasium on site. Approximately 27,900 gsf of the MLK Jr. Way Building is leased to a non-UCSF entity, the North Oakland Senior Center (NOSC).

1 Appendix A amended by Long Range Development Plan Amendment #7, Amendment #8, & Amendment #11

APPENDIX A: EXISTING AND PROPOSED SPACE PROGRAM (CONTINUED)<sup>2</sup>

| EXISTING 2020 (GSF)                  | SMALLER OWNED SITES (CONTINUED) |                                | TOTAL OWNED GSF  | LEASED SITES  |                |                |                    | ALL SITES         |
|--------------------------------------|---------------------------------|--------------------------------|------------------|---------------|----------------|----------------|--------------------|-------------------|
|                                      | 4701 SHATTUCK AVENUE            | WALNUT CREEK OUTPATIENT CENTER |                  | BCH OAKLAND   | LAUREL HEIGHTS | ZSFG           | OTHER LEASED SITES |                   |
| Instruction                          | -                               | -                              | 543,300          | -             | 31,500         | 43,400         | 23,800             | 642,000           |
| Research                             | -                               | -                              | 1,840,100        | -             | 57,200         | 97,700         | 44,700             | 2,037,700         |
| Clinical                             | 16,700                          | 79,600                         | 3,256,900        | 42,100        | 35,100         | 14,400         | 631,500            | 3,980,000         |
| Academic Support                     | -                               | -                              | 393,700          | -             | 5,400          | 14,400         | 2,100              | 415,600           |
| Academic & Campus Administration     | -                               | -                              | 1,579,400        | -             | 190,300        | 85,600         | 297,700            | 2,153,000         |
| Campus Community                     | -                               | -                              | 464,300          | -             | 20,800         | 1,900          | 1,100              | 488,100           |
| Logistics                            | -                               | -                              | 385,800          | -             | 7,600          | 1,100          | 4,600              | 399,100           |
| Housing                              | -                               | -                              | 1,038,700        | -             | -              | -              | 11,000             | 1,049,700         |
| Vacant/Alteration                    | -                               | -                              | 63,500           | -             | 15,000         | 200            | 500                | 79,200            |
| <b>Total Space Excluding Parking</b> | <b>16,700</b>                   | <b>79,600</b>                  | <b>8,565,700</b> | <b>42,100</b> | <b>362,900</b> | <b>258,700</b> | <b>1,017,000</b>   | <b>11,246,400</b> |
| <b>Structured Parking</b>            | -                               | -                              | <b>1,803,900</b> | -             | <b>107,400</b> | -              | -                  | <b>1,911,300</b>  |

Note: All gsf numbers are rounded to the nearest 100. Individual columns and rows may not total due to rounding.

<sup>a</sup> Tidelands Housing is also known as Minnesota Street Housing.

<sup>b</sup> For the sake of simplicity, the LRPD refers to all space, owned and leased, in terms of gsf, even though leased space is sometimes measured in sf rather than gsf, depending on type of space and/or lease.

<sup>c</sup> MLK Jr. Way Building accounts for gsf of the Main Building, HEDCO Health Sciences Building, and Gymnasium on site. Approximately 27,900 gsf of the MLK Jr. Way Building is leased to a non-UCSF entity, the North Oakland Senior Center (NOSC).

APPENDIX A: EXISTING AND PROPOSED SPACE PROGRAM (CONTINUED)<sup>3</sup>

| PROPOSED 2035 (EXCEPT PARNASSUS 2050) (GSF) | MAIN CAMPUS SITES |                          |            |             | SMALLER OWNED SITES |               |                        |               |              |                                |           |              |         |         |                                   |                       |                       |
|---|-------------------|--------------------------|------------|-------------|---------------------|---------------|------------------------|---------------|--------------|--------------------------------|-----------|--------------|---------|---------|-----------------------------------|-----------------------|-----------------------|
|   | PARNASSUS HEIGHTS | MISSION BAY <sup>a</sup> | MOUNT ZION | BCH OAKLAND | MISSION CENTER      | 654 MINNESOTA | BUCHANAN DENTAL CENTER | HUNTERS POINT | OYSTER POINT | TIDELANDS HOUSING <sup>b</sup> | 2130 POST | 777 MARIPOSA | FRESNO  | ZSFG    | MLK JR. WAY BUILDING <sup>c</sup> | 5220 CLAREMONT AVENUE | 5400 TELEGRAPH AVENUE |
| Instruction                                 | 290,300           | 249,100                  | 65,000     | -           | 1,700               | -             | 5,900                  | -             | -            | -                              | -         | -            | 19,000  | 25,600  | -                                 | -                     | -                     |
| Research                                    | 1,018,700         | 1,719,800                | 139,300    | -           | 27,300              | -             | 3,500                  | -             | -            | -                              | -         | -            | -       | 79,400  | 87,500                            | -                     | -                     |
| Clinical                                    | 1,872,700         | 1,251,700                | 518,100    | 719,200     | 33,300              | -             | -                      | -             | -            | -                              | -         | 1,600        | 6,200   | -       | 20,500                            | 17,300                | -                     |
| Academic Support                            | 193,800           | 222,400                  | 45,700     | -           | 26,100              | 600           | 16,400                 | 200           | 3,800        | -                              | -         | 6,100        | 9,600   | -       | -                                 | -                     | -                     |
| Academic & Campus Administration            | 524,400           | 478,000                  | 111,100    | -           | 245,300             | 49,800        | 1,200                  | 9,500         | 4,200        | -                              | -         | 50,500       | 50,000  | 3,000   | -                                 | -                     | -                     |
| Campus Community                            | 170,500           | 255,400                  | 17,400     | -           | 23,300              | 1,500         | 1,000                  | 1,300         | 1,600        | -                              | -         | 5,100        | 1,800   | 27,900  | -                                 | -                     | -                     |
| Logistics                                   | 150,900           | 187,800                  | 44,100     | -           | 33,800              | 1,800         | 2,000                  | 600           | 9,700        | -                              | 43,600    | 1,900        | 2,400   | -       | -                                 | -                     | -                     |
| Housing                                     | 915,300           | 786,100                  | -          | 12,600      | -                   | -             | -                      | -             | 301,100      | 97,000                         | -         | -            | -       | -       | -                                 | -                     | -                     |
| Vacant/Alteration                           | 109,000           | 34,900                   | 9,000      | -           | -                   | 11,800        | -                      | -             | 8,200        | -                              | -         | -            | -       | 37,600  | -                                 | -                     | -                     |
| Total Space Excluding Parking               | 5,245,600         | 5,185,200                | 949,700    | 721,900     | 390,900             | 65,500        | 10,100                 | 144,400       | 328,600      | 97,000                         | 43,600    | 84,200       | 175,000 | 156,000 | 20,500                            | 17,300                | -                     |
| Structured Parking                          | 719,700           | 1,388,400                | 254,500    | 353,300     | 96,000              | -             | -                      | -             | 41,200       | -                              | -         | -            | -       | -       | -                                 | -                     | -                     |

Note: All gsf numbers are rounded to the nearest 100. Individual columns and rows may not total due to rounding.

<sup>a</sup> Does not include Phase 2 of the Medical Center at Mission Bay, which is assumed to be completed beyond the 2035 LRD P horizon.

<sup>b</sup> Tidelands Housing is also known as Minnesota Street Housing.

<sup>c</sup> For the sake of simplicity, the LRD P refers to all space, owned and leased, in terms of gsf, even though leased space is sometimes measured in sf rather than gsf, depending on type of space and/or lease.

<sup>d</sup> MLK Jr. Way Building accounts for gsf of the Main Building, HEDCO Health Sciences Building, and Gymnasium on site. Approximately 27,900 gsf of the MLK Jr. Way Building is leased to a non-UCSF entity, the North Oakland Senior Center (NOSC).

APPENDIX A: EXISTING AND PROPOSED SPACE PROGRAM (CONTINUED)<sup>4</sup>

| PROPOSED 2035 (EXCEPT PARNASSUS 2050) (GSF) | SMALLER OWNED SITES (CONTINUED) |                                | TOTAL OWNED GSF   | LEASED SITES    |               |                | ALL SITES         |
|---|---------------------------------|--------------------------------|-------------------|-----------------|---------------|----------------|-------------------|
|   | 4701 SHATTUCK AVENUE            | WALNUT CREEK OUTPATIENT CENTER |                   | TOTAL OWNED GSF | BCH OAKLAND   | ZSFG           |                   |
| Instruction                                 | -                               | -                              | 656,600           | -               | 17,100        | 24,000         | 697,700           |
| Research                                    | -                               | -                              | 3,075,500         | -               | 26,200        | 69,200         | 3,170,900         |
| Clinical                                    | 16,700                          | 79,600                         | 4,536,900         | 42,100          | 3,600         | 389,700        | 4,972,300         |
| Academic Support                            | -                               | -                              | 524,700           | -               | 9,300         | 2,600          | 536,600           |
| Academic & Campus Administration            | -                               | -                              | 1,527,000         | -               | 26,500        | 163,600        | 1,717,100         |
| Campus Community                            | -                               | -                              | 506,800           | -               | 500           | 600            | 507,900           |
| Logistics                                   | -                               | -                              | 612,000           | -               | 1,500         | 6,200          | 619,700           |
| Housing                                     | -                               | -                              | 2,112,100         | -               | -             | 9,100          | 2,121,200         |
| Vacant/Alteration                           | -                               | -                              | 210,500           | -               | -             | 200            | 210,700           |
| <b>Total Space Excluding Parking</b>        | <b>16,700</b>                   | <b>79,600</b>                  | <b>13,762,200</b> | <b>42,100</b>   | <b>84,700</b> | <b>665,200</b> | <b>14,554,200</b> |
| <b>Structured Parking</b>                   | -                               | -                              | <b>2,053,000</b>  | -               | -             | -              | <b>2,053,000</b>  |

Note: All gsf numbers are rounded to the nearest 100. Individual columns and rows may not total due to rounding.

<sup>a</sup> Does not include Phase 2 of the Medical Center at Mission Bay, which is assumed to be completed beyond the 2035 LRDH horizon.

<sup>b</sup> Tidelands Housing is also known as Minnesota Street Housing.

<sup>c</sup> For the sake of simplicity, the LRDH refers to all space, owned and leased, in terms of gsf, even though leased space is sometimes measured in sf rather than gsf, depending on type of space and/or lease.

<sup>d</sup> MLK Jr. Way Building accounts for gsf of the Main Building, HEDCO Health Sciences Building, and Gymnasium on site. Approximately 27,900 gsf of the MLK Jr. Way Building is leased to a non-UCSF entity, the North Oakland Senior Center (NOSC).

## APPENDIX B: BUILDINGS BY CAMPUS SITE

## PARNASSUS HEIGHTS

| BUILDING NAME                              | YEAR BUILT | BUILDING GSF | PARKING GSF |
|--|------------|--------------|-------------|
| 50 Kirkham Street                          | 1923       | 3,782        |             |
| 145 Irving Street                          | 2006       | 17,782       |             |
| 1320 Third Avenue                          | 1912       | 3,679        |             |
| 1322-24 Third Avenue                       | 1911       | 3,089        |             |
| 1326 Third Avenue                          | 1912       | 3,412        |             |
| 1332 Third Avenue                          | 1915       | 3,034        |             |
| 1338 Third Avenue                          | 1913       | 4,273        |             |
| 1344 Third Avenue                          | 1912       | 3,011        |             |
| 1350 Third Avenue                          | 1912       | 2,915        |             |
| 1356 Third Avenue                          | 1911       | 2,851        |             |
| 1362 Third Avenue                          | 1909       | 2,597        |             |
| 1420 Fifth Avenue                          | 1911       | 3,224        |             |
| 1422-24 Fifth Avenue                       | 1915       | 4,993        |             |
| 1428 Fifth Avenue                          | 1915       | 2,913        |             |
| 1432-34 Fifth Avenue                       | 1911       | 4,343        |             |
| 1440 Fifth Avenue                          | 1911       | 6,210        |             |
| 1442 Fifth Avenue                          | 1911       | 3,366        |             |
| 1452 Fifth Avenue                          | 1920       | 3,252        |             |
| 1454 Fifth Avenue                          | 1911       | 2,711        |             |
| 1460 Fifth Avenue                          | 1911       | 3,085        |             |
| 1464 Fifth Avenue                          | 1911       | 3,206        |             |
| 1468 Fifth Avenue                          | 1920       | 6,208        |             |
| 1472-74 Fifth Avenue                       | 1922       | 4,138        |             |
| 1478-80 Fifth Avenue                       | 1923       | 4,537        |             |
| 1482 Fifth Avenue                          | 1922       | 2,696        |             |
| 1486-88 Fifth Avenue                       | 1924       | 3,121        |             |
| 1490 Fifth Avenue                          | 1905       | 2,406        |             |
| Aldea Center on Mount Sutro (Aldea Center) | 2011       | 2,807        |             |
| Aldea Housing SMG 1                        | 1999       | 10,124       |             |
| Aldea Housing SMG 2                        | 1998       | 11,595       |             |
| Aldea Housing SMG 3                        | 1998       | 11,595       |             |
| Aldea Housing SMG 4                        | 1998       | 11,796       |             |
| Aldea Housing SMG 5                        | 1999       | 11,595       |             |
| Aldea Housing SMG 6                        | 1998       | 11,876       |             |
| Aldea Housing SMG 7                        | 1999       | 10,118       |             |
| Aldea Housing SMG 8                        | 1960       | 7,950        |             |
| Aldea Housing SMG 10                       | 1960       | 7,948        |             |
| Aldea Housing SMG 11                       | 1999       | 11,592       |             |
| Aldea Housing SMG 12                       | 1960       | 7,948        |             |
| Aldea Housing SMG 14                       | 1999       | 11,592       |             |
| Central Utility Plant (CUP)                | 1998       | 39,311       |             |
| Clinical Sciences                          | 1933       | 108,007      |             |
| Dental Clinics                             | 1979       | 134,951      |             |
| Dolby Regeneration Medicine                | 2010       | 69,084       |             |



## APPENDIX B: BUILDINGS BY CAMPUS SITE (CONTINUED)

## PARNASSUS HEIGHTS (CONTINUED)

| BUILDING NAME                               | YEAR BUILT | BUILDING GSF     | PARKING GSF    |
|---|------------|------------------|----------------|
| Environmental Health & Safety (EHS)         | 1971       | 6,120            |                |
| Environmental Health & Safety Annex (Annex) | 1953       | 2,599            |                |
| Faculty Alumni House (745 Parnassus Avenue) | 1915       | 7,210            |                |
| Health Sciences East                        | 1964       | 204,721          |                |
| Health Sciences West                        | 1964       | 237,437          |                |
| Kalmanovitz Library                         | 1991       | 132,438          | 52,416         |
| Kirkham Child Care Center                   | 2009       | 7,227            |                |
| Koret Vision Research (Koret)               | 1986       | 43,108           |                |
| Laboratory of Radiobiology                  | 1953       | 19,673           |                |
| Langley Porter Psychiatric Institute (LPPI) | 1941       | 104,757          |                |
| Long Hospital                               | 1982       | 365,786          |                |
| LPPI Butler                                 | 1964       | 1,013            |                |
| LPPI OPC                                    | 1979       | 2,723            |                |
| LPPI Paint Shop                             | 1966       | 214              |                |
| Lucia Child Care Center                     | 1978       | 3,704            |                |
| Mechanical Annex (Ammonia Tank)             | 1997       | 790              |                |
| Medical Building 1 (ACC)                    | 1972       | 262,985          | 338,929        |
| Medical Research 4 (MR4)                    | 1944       | 12,107           |                |
| Medical Sciences                            | 1954       | 392,409          |                |
| Millberry Union                             | 1955       | 114,715          |                |
| Millberry Union Garage                      | 1955       | 38,263           | 262,382        |
| Moffitt Hospital                            | 1955       | 387,053          |                |
| Parnassus Services (PSSRB)                  | 2005       | 88,813           |                |
| Proctor                                     | 1956       | 9,916            |                |
| School of Nursing                           | 1972       | 88,099           |                |
| Surge                                       | 1966       | 10,730           |                |
| UC Hall                                     | 1917       | 148,236          |                |
| University House                            | 1966       | 6,683            |                |
| Woods                                       | 1962       | 4,159            |                |
| <b>PARNASSUS HEIGHTS TOTAL</b>              |            | <b>3,294,411</b> | <b>653,727</b> |

## APPENDIX B: BUILDINGS BY CAMPUS SITE (CONTINUED)

## MISSION BAY

| BUILDING NAME                                | YEAR BUILT | BUILDING GSF     | PARKING GSF    |
|--|------------|------------------|----------------|
| Arthur and Toni Rembe Rock Hall (Rock Hall)  | 2003       | 170,565          |                |
| Byers Hall                                   | 2005       | 154,434          |                |
| Central Utility Plant                        | 2008       | 220              |                |
| Community Center Garage                      | 2005       | 2,603            | 206,397        |
| Genentech Hall <sup>a</sup>                  | 2002       | 384,879          |                |
| Helen Diller Family Cancer Research Building | 2008       | 160,540          |                |
| Mission Bay Child Care Center                | 2006       | 7,100            |                |
| Mission Bay Housing East (Block 20)          | 2005       | 105,420          |                |
| Mission Bay Housing North (Block 20)         | 2005       | 142,197          |                |
| Mission Bay Housing South (Block 20)         | 2005       | 96,801           |                |
| Mission Bay Housing West (Block 20)          | 2005       | 65,866           |                |
| Owens Street Garage (Hospital)               | 2013       | 100              | 223,772        |
| Sandler Neurosciences Center                 | 2012       | 237,000          |                |
| Smith Cardiovascular Research                | 2010       | 236,000          |                |
| Third Street Garage                          | 2005       | 4,247            | 250,251        |
| William J. Rutter Center                     | 2005       | 158,605          |                |
| <b>MISSION BAY TOTAL</b>                     |            | <b>1,926,577</b> | <b>680,420</b> |

<sup>a</sup> Does not include 53,482 sf of penthouse mechanical space.

## MOUNT ZION

| BUILDING NAME                                   | YEAR BUILT | BUILDING GSF   | PARKING GSF    |
|---|------------|----------------|----------------|
| 1600 Divisadero, Main Hospital (A)              | 1949       | 118,800        |                |
| 1600 Divisadero, Main Hospital (B)              | 1949       | 106,400        |                |
| 1600 Divisadero (D)                             | 1949       | 9,600          |                |
| 1600 Divisadero (R)                             | 1981       | 16,956         |                |
| 1657 Scott Street, Harold Brunn Institute (E)   | 1930       | 13,500         |                |
| 1675 Scott Street, Dialysis Center (G)          | 1962       | 5,300          |                |
| 1701 Divisadero                                 | 1997       | 57,980         | 60,160         |
| 2200 Post Street, Hellman Building (C)          | 1912       | 65,950         |                |
| 2255 Post Street (N)                            | 1948       | 7,450          |                |
| 2325 Post Street Parking Garage                 | 1980       | 10             | 15,024         |
| 2330 Post Street (Medical Building 1)           | 1996       | 50,491         |                |
| 2356 Sutter Street, Women's Health Center (J)   | 1996       | 53,500         |                |
| 2375 Post Street (P)                            | 1935       | 20,800         |                |
| 2420 Sutter Parking Garage                      | 2012       | 900            | 101,363        |
| Cancer Research                                 | 1996       | 109,671        |                |
| Helen Diller Family Comprehensive Cancer Center | 1999       | 89,862         |                |
| Osher Building                                  | 2010       | 50,000         |                |
| <b>MOUNT ZION TOTAL</b>                         |            | <b>777,170</b> | <b>176,547</b> |

APPENDIX B: BUILDINGS BY CAMPUS SITE (CONTINUED)<sup>5</sup>

## SMALLER OWNED SITES

| BUILDING NAME   | YEAR BUILT | BUILDING GSF     | PARKING GSF    |
|---|------------|------------------|----------------|
| 654 Minnesota Street                                  | 1982       | 65,525           |                |
| 4701 Shattuck Avenue                                  | 1920       | 16,700           |                |
| 5220 Claremont Avenue                                 | 1963       | 20,500           |                |
| 5400 Telegraph Avenue                                 | 1972       | 17,300           |                |
| Buchanan Dental Center                                | 1979       | 18,235           |                |
| Hunters Point 830 Palou Street                        | 1966       | 19,332           |                |
| Hunters Point 831 Palou Street                        | 1966       | 1,215            |                |
| Laurel Heights Annex                                  | 1955       | 13,958           |                |
| Laurel Heights Building                               | 1955       | 348,777          | 107,400        |
| Mission Center  | 1928       | 290,883          |                |
| MLK Jr. Way Building                                  | 1923       | 156,000          |                |
| Oyster Point  | 1973       | 144,429          |                |
| UCSF Fresno Center for Medical Education and Research | 2005       | 84,175           |                |
| Walnut Creek Outpatient Center                        | 1970       | 79,600           |                |
| <b>SMALLER OWNED SITES TOTAL</b>                      |            | <b>1,276,829</b> | <b>107,400</b> |

## BENIOFF CHILDREN'S HOSPITAL OAKLAND

| BUILDING NAME                           | YEAR BUILT | BUILDING GSF | PARKING GSF |
|---|------------|--------------|-------------|
| 5203 Dover Street                       | 1905       | 1,500        |             |
| 5225 Dover Street                       | 1908       | 2,000        |             |
| 663 53rd Street                         | 1922       | 1,000        |             |
| 667 53rd Street                         | 1922       | 1,400        |             |
| 670 53rd Street                         | 1916       | 2,400        |             |
| 671 53rd Street                         | 1906       | 1,300        |             |
| 675 53rd Street                         | 1911       | 1,300        |             |
| 679 53rd Street                         | 1921       | 2,100        |             |
| 707 53rd Street                         | 1912       | 1,900        |             |
| 715 53rd Street                         | 1906       | 1,600        |             |
| 770 53rd Street                         | 1965       | 13,800       |             |
| 815 51st Street                         | 1918       | 1,700        |             |
| A/B Wing                                | 1928       | 45,200       |             |
| B/C Wing                                | 1946       | 33,500       |             |
| Bruce Lyon Addition                     | 1992       | 4,500        |             |
| Bruce Lyon Memorial Research Laboratory | 1958       | 12,600       |             |
| Cafeteria                               | 1988       | 7,800        |             |
| Cardiac Catheterization Lab             | 1994       | 1,800        |             |
| Central Utility Plant                   | 1982       | 12,200       |             |
| Chiller Building                        | 2022       | 1,100        |             |

APPENDIX B: BUILDINGS BY CAMPUS SITE (CONTINUED)<sup>6</sup>

**BENIOFF CHILDREN'S HOSPITAL OAKLAND (CONTINUED)**

| BUILDING NAME                                    | YEAR BUILT | BUILDING GSF   | PARKING GSF    |
|--|------------|----------------|----------------|
| Family House                                     | 1988       | 12,600         |                |
| Ford Diagnostic and Treatment (D&T) Center       | 1961       | 44,200         |                |
| Helistop   | 2000       | 4,300          |                |
| Hospital Loading Dock                            | 1982       | 600            |                |
| Oakland Outpatient Center (OPC) 1                | 1994       | 116,000        |                |
| Oakland Outpatient Center (OPC) 2                | 2018       | 74,000         | 15,000         |
| Parking Garage                                   | 1992       | 0              | 240,000        |
| Patient Tower                                    | 1982       | 105,400        |                |
| Pedestrian Walkway                               | 1994       | 1,000          |                |
| Sports Rehab                                     | -          | 2,200          |                |
| Temporary Trailer (T1)                           | -          | 500            |                |
| Temporary Trailer (T2)                           | -          | 1,800          |                |
| Temporary Trailer (T3)                           | -          | 2,100          |                |
| Temporary Trailer (T5)                           | -          | 4,600          |                |
| Transportable MRI                                | -          | 1,100          |                |
| Western Addition                                 | 2009       | 7,700          |                |
| <b>BENIOFF CHILDREN'S HOSPITAL OAKLAND TOTAL</b> |            | <b>528,800</b> | <b>255,000</b> |

<sup>6</sup> Appendix B amended by Long Range Development Plan by Amendment #11

## APPENDIX D: COMMUNITY PLANNING PRINCIPLES

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### ORGANIZATION OF THE COMMUNITY PLANNING PRINCIPLES

The five overarching principles describe how UCSF will communicate with neighbors about its physical development plans both on- and off-campus (as of adoption of the 2014 LRDP), and consider the cushioning of impacts that result from UCSF's development. In order to support the implementation of these five Overarching Principles, *Community Planning Goals* are also identified covering a range of potential topic areas, representing what UCSF will strive for in implementing the overarching principles. The goals are presented in alphabetical order by category.

### OVERARCHING PRINCIPLES

#### OP1. COMMUNITY CONSULTATION

Recognizing community concerns about the potential negative effects of UCSF's development on adjacent neighborhoods:

- To the extent allowed by confidentiality agreements governing real estate transactions, UCSF will consult with the community before initiating a project that could result in property acquisition if the proposed project might not conform to the use, height, bulk, density, design, or open space restrictions established for the site by City zoning; would affect historic resources; or would require conditional use authorization or variance were the project to be developed by a private party.
- UCSF will consult with the community before decisions are made to intensify use of existing property. Optimizing use of its space and physical assets is a critical objective of UCSF during this next LRDP period.

This principle is not intended to eliminate the normal communication between UCSF and its neighbors during the life of a project regarding exterior design, landscaping, parking and traffic, or other project elements.

#### OP2. COMMUNITY NOTIFICATION

When UCSF acquires property, it will list these acquisitions on a website and notify the [San Francisco Community Advisory Group \(CAG\)](#), [Oakland Community Advisory Board \(CAB\)](#), and other neighbors as requested [for properties in their respective areas](#).<sup>7</sup>

#### OP3. CUSHIONING OF IMPACTS

When UCSF acquires property<sup>8</sup> or intensifies use of existing property,<sup>9</sup> it will, on a case-by-case basis, enter into discussions with community groups representing adjoining neighborhoods and/or with the City and County of San Francisco (City) to identify neighborhood impacts, if any, of such lease, acquisition, development and operations.

In the event that UCSF, the community groups, and/or the City agree that such impacts are likely to occur, UCSF will enter into further discussions with the community groups and/or the City to identify potential cushioning actions to offset such impacts. Any agreements by UCSF to undertake cushioning actions will be documented in a formal agreement between UCSF, the community groups, and/or the City. These agreements could utilize a community benefits district if one were to be established by the City.

The cushioning of impacts could be in addition to any mitigation measures that might otherwise be required to reduce significant impacts to a less-than-significant level as a result of any required CEQA review of a proposed project. OP3-guided actions are considered separate from and in addition to the proportional share funding described below in OP4.

As a state-supported institution, UCSF must manage its resources in a manner consistent with its mission. Therefore, monetary and non-monetary contributions to community facilities or programs must be consistent with UCSF's mission and directly benefit UCSF, its students, and its employees. Examples of voluntary community assistance measures might include (but are not limited to) physical improvements to open space facilities near UCSF sites; enhanced street lighting, landscaping, and street fixtures around the perimeter of campus facilities; shared open space on the UCSF campus; joint use of UCSF facilities for community and campus functions; and employment programs that serve the community and provide skilled workers for UCSF's programs.

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<sup>8</sup> "Acquire property": acquire property through lease or purchase, or acquire property by gift, and develop such property for UCSF use.

<sup>9</sup> "Intensify use of existing property": develop or change the use of an existing property if the proposed project would increase the square footage or population of the campus site in a manner that could reasonably be expected to trigger community concern.

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<sup>7</sup> Updated to reflect LRDP Amendment #11.

## ENVIRONMENTAL IMPACT CLASSIFICATION

### *Environmental Review Process*

Pursuant to State law and University procedures for implementation of the California Environmental Quality Act (CEQA), including Long Range Development Plan (LRDP) Amendment #11 to the UC San Francisco 2014 LRDP, the project has been analyzed in the UCSF Benioff Children's Hospital Oakland New Hospital Building Environmental Impact Report (Final EIR) (State Clearinghouse #2023050540).

The Draft Environmental Impact Report (Draft EIR) was published on January 16, 2024, commencing a 45-day public review period ending on March 1, 2024. Notices of availability of the document were widely distributed and advertised. The document was posted online on the BCH Oakland New Hospital Building website and UCSF Real Estate website. The Draft EIR was submitted to the State Clearinghouse and Notices of Availability were sent to other State, regional, and local public agencies.

### *Public Comments*

During the public review period, seven comment letters on the Draft EIR were received. Three individuals provided oral comments at the Draft EIR public hearing.

Among the seven comment letters received, three were from public agencies, as follows:

- California Department of Transportation (Caltrans) provided comments regarding the Vehicle Miles Traveled (VMT) analysis, the Caltrans Aeronautics process to obtain approval of the proposed helistop(s), and other code and permitting requirements under Caltrans purview that may be relevant to the project.
- Alameda County Department of Environmental Health provided comments regarding the hazardous materials analysis.
- East Bay Municipal Utility District provided comments regarding water service for the site, water conservation measures, wastewater treatment during dry and wet weather, and considerations for maintaining existing pipeline integrity should construction activities occur within the public right-of-way.

Written responses to all comments were prepared and included in the Final EIR. None of the issues raised by the commenters alters the conclusions of the environmental analysis.

### *Environmental Impacts*

The Draft EIR found that the project would have no significant environmental impacts with regard to the following topic areas: Aesthetics, Agriculture and Forestry Resources, Air Quality,



Energy, Greenhouse Gas Emissions, Land Use and Planning, Mineral Resources, Population and Housing, Public Services, Recreation, and Utilities and Service Systems.

With mitigation measures identified in the Draft EIR, potentially significant impacts of the project would be reduced to less-than-significant levels in these topic areas: Biological Resources, Cultural and Tribal Cultural Resources (Archaeology), Geology and Soils, Hazards and Hazardous Materials, Hydrology and Water Quality, Noise and Vibration, and Transportation.

The Draft EIR found that the project would result in significant impacts that would be unavoidable, even with identified mitigation measures, in the topic areas of Cultural Resources (Historical), and Noise (during construction).

The Draft EIR also analyzed cumulative impacts and found that the project would contribute to an existing significant cumulative impact in the topic area of Air Quality (during construction). Mitigation measures would reduce the impact, but not to a less-than-significant level. As such, the impact is Significant and Unavoidable.

To assure that all mitigation measures are implemented in accordance with CEQA, a Mitigation Monitoring and Reporting Program has been prepared and included with the Final EIR (Attachment 11). UCSF is responsible for implementing all mitigation measures of the project within the jurisdiction of the Regents.

### ***Findings***

The attached CEQA Findings (Attachment 12) discuss the project's impacts, mitigation measures, and conclusions regarding adoption of the Final EIR in conformance with CEQA. However, because the project, after incorporation of all feasible mitigation measures, will result in impacts that cannot be reduced to a less than significant level, a Statement of Overriding Considerations is proposed for approval and has been included in the CEQA Findings. The Statement of Overriding Considerations sets forth the specific reasons to support approval of the project notwithstanding its significant and unavoidable environmental impacts.

**CALIFORNIA ENVIRONMENTAL QUALITY ACT FINDINGS OF FACT  
REGARDING THE FINAL ENVIRONMENTAL IMPACT REPORT FOR THE  
NEW HOSPITAL BUILDING AT BENIOFF CHILDREN’S HOSPITAL,  
OAKLAND CAMPUS  
State Clearinghouse No. 2023050540**

**I. CERTIFICATION**

The University of California (“University” or the “Regents”) hereby certifies the Final Environmental Impact Report (“Final EIR” or “EIR”) for the University of California, San Francisco (“UCSF”) New Hospital Building at the Benioff Children’s Hospital Oakland (the “NHB”), which consists of the Draft Environmental Impact Report (“Draft EIR”), comment letters, responses to comments, text changes to the Draft EIR, and the Mitigation Monitoring and Reporting Plan (“MMRP”). In accordance with California Environmental Quality Act (“CEQA”) Guidelines § 15090, the University, as Lead Agency for the Project, certifies that:

- (1) The Final EIR has been completed in compliance with CEQA;
- (2) The Final EIR was presented to the University, and the University has received, reviewed, and considered the information contained in the Final EIR and in the administrative record prior to approving the Project;
- (3) The Final EIR reflects the University’s independent judgment and analysis.

The University has exercised its independent judgment in accordance with Public Resources Code § 21082.1(c) in retaining its own environmental consultant and directing the consultant in preparation of the EIR, as well as reviewing, analyzing and revising material prepared by the consultant.

In accordance with Public Resources Code § 21081 and CEQA Guidelines § 15091 and 15093, the University has made one or more specific written findings regarding significant impacts associated with the NHB. Those findings are presented below, along with the rationale behind each of the findings. Concurrent with the adoption of these findings, the University adopts the MMRP and the Statement of Overriding Considerations.

The documents and other materials that constitute the record of proceedings on which the Project findings are based are located at UCSF Real Estate – Campus Planning, 654 Minnesota Street, San Francisco, CA 94143-0287. The custodian for these documents is Diane Wong, Environmental Coordinator, UCSF Real Estate -- Campus Planning, 654 Minnesota Street, San Francisco, CA 94143-0287. This information is provided in compliance with Public Resources Code § 21081.6(a)(2) and CEQA Guidelines § 15091(e).

## **II. PROJECT BACKGROUND**

### **A. PROJECT DESCRIPTION SUMMARY**

The NHB project (or the “Project”) consists of the proposed New Hospital Building at Benioff Children’s Hospital Oakland (“BCH Oakland”) and related improvements. The NHB Project would address seismic safety requirements, other regulatory requirements, and industry standards for contemporary hospitals; increase inpatient beds; accommodate modern technologies; and enhance functionality and efficiency at the campus site.

The New Hospital is critical to address the seismic improvement need for acute inpatient care and outdated clinical facilities that lack the capacity to accommodate the immense need for pediatric care. The Project proposes to address seismic safety requirements; other regulatory requirements and industry standards for contemporary hospitals; provide additional inpatient beds; accommodate modern technologies; and enhance functionality and efficiency at the campus site. The Project, which is identified as the Project Variant in the EIR, would include the construction of an approximate 282,000 gross square foot (gsf) new hospital building; a 103,180 gsf, 270-stall parking structure with a rooftop helistop; a utility yard adjacent to the parking structure; a 5,000 gsf site support structure; renovation and/or structural retrofitting of existing buildings within the Project site; and a variety of transportation, infrastructure, and landscape improvements. The Project would also involve demolition of 109,632 gsf of existing buildings, relocation of the 1,065 gsf MRI trailer on the Project site or on another portion of the campus site, and renovation of approximately 11,800 gsf of existing building space. Construction of the Project, including site and make-ready work, would begin in mid-2025. The project would be completed and operational by early 2031, with the exception of renovations to existing buildings which would extend to early 2033.

The Project also includes an amendment to the UC San Francisco 2014 Long Range Development Plan (2014 LRDP) to add BCH Oakland to the LRDP. The LRDP Amendment would include a new chapter for the Benioff Children’s Hospital Oakland campus site with site-specific objectives to 1) modernize the campus to ensure compliance with regulatory requirements and improve the level of services to patients and their families, 2) address seismically compromised and obsolete buildings, and 3) develop new facilities to accommodate programmatic needs. The new chapter would include functional zones for the campus site consistent with the NHB project. In addition, several smaller off-site locations that are part of BCH Oakland would be added to the Smaller Owned Sites chapter of the LRDP, the existing and proposed space program of the LRDP would be revised to reflect BCH Oakland and the proposed NHB project, and other necessary conforming changes would be made to the LRDP.

In 2014, UCSF entered into an affiliation agreement with Children’s Hospital & Research Center Oakland (CHRCO) to align the two institutions. At that time, a Campus Master Plan (CMP) for the 11-acre campus, which provided for the development of new and replacement facilities within the existing campus, was already under review by the City of Oakland, which maintained land use jurisdiction and CEQA lead agency status for the campus as CHRCO was then a solely private institution.

In 2015, the City of Oakland certified the Children's Hospital and Research Center Oakland Campus Master Plan Project Final EIR (CHRCO CMP Project FEIR) and approved the CMP. The entitlements for the CMP included, among other things, a Planned Unit Development (PUD) permit. CMP Phase 2 included certain development on the NHB Project site, including a new Acute Care Patient Pavilion, a Link Building with a helipad on the roof, expansion of the central utility plant, a new parking structure, and demolition of several buildings. A Preliminary Development Plan (PDP) for Phase 2 was approved in 2015.

Following the 2014 agreement between CHRCO and UCSF, the hospital was renamed UCSF BCH Oakland. As the UCSF BCH Oakland campus site is now controlled by the University, UCSF has revised its approach to the modernization of the campus site. The proposed NHB Project represents the next stage of campus modernization. Although the proposed Project is conceptually the same as the Phase 2 development analyzed in the CHRCO CMP Project FEIR for the portion of the campus site south of 52nd Street, there are some differences in the proposed improvements. As such, the University, acting as the lead agency under CEQA, determined that it will prepare a project EIR that analyzes and discloses the environmental impacts of the proposed NHB Project.

The NHB Project EIR is a stand-alone project EIR. As such, while the NHB Project EIR draws from the CHRCO CMP Project FEIR for relevant background information where appropriate, it assesses all environmental topics required under CEQA without scoping out any issues, discloses all project and cumulative impacts, and identifies project-specific mitigation measures to reduce or avoid significant impacts.

## **B. PROJECT OBJECTIVES**

The fundamental objectives for the proposed NHB are as follows:

- Modernize the aging UCSF BCH Oakland campus to maintain and enhance its place as a premier children's hospital, educational, research, and clinical institution.
- Modernize the aging UCSF BCH Oakland campus to maintain and enhance its place as nationally recognized teaching hospital, providing accredited residency education in general pediatrics and fellowship education to pediatricians seeking subspecialty training.
- Modernize the UCSF BCH Oakland campus to address challenges that affect the long-term viability of the institution, such as aged, functionally obsolete, undersized and inefficient facilities.
- Meet seismic requirements of California Senate Bill 1953 by redeveloping a new, seismically-sound, state-of-the-art and sustainable inpatient facility.
- Maintain UCSF BCH Oakland's designation as the Bay Area's Level I pediatric trauma center with continued emergency service access via helicopter.
- Address the existing shortage of capacity and access to pediatric care by increasing the number of inpatient beds at UCSF BCH Oakland.
- Address the current unmet need for adolescent mental health care and services by providing behavioral health inpatient beds that meet code requirements, including required outdoor space, at UCSF BCH Oakland and providing such services.

- Address the current unmet need for ED patient services by increasing the size of the ED.
- Site and develop a new inpatient facility in a way that optimizes operational activities and maintains critical adjacencies with other clinical facilities on the site, such as the existing Patient Tower, the Ford D&T Center and Cardiac Catheterization Lab, and critical support functions.
- Develop a new inpatient facility that is optimized in its spatial layout for functionality in terms of workflow and wayfinding, and efficiency so as to not increase operational costs.
- Develop a new inpatient facility that is optimized in its spatial layout to enhance functionality and efficiency.
- Develop spaces for clinical and translational research and learning in or adjacent to clinical areas where patients are located.

The development objectives of the NHB are as follows:

- Develop a new inpatient facility that has sufficient space to accommodate modern regulatory requirements and industry standards of contemporary hospitals, such as construction codes, sizes of operating rooms, ratio of operating rooms to pre-and post-recovery areas, space for privacy and infection control issues.
- Develop a new inpatient facility that has sufficient space to accommodate patient satisfaction
- Develop a new inpatient facility that has sufficient space to accommodate modern technology, including telemedicine, and new diagnostic, imaging, testing, treatment, surgery and laboratory equipment, all requiring substantial infrastructure and space.
- Optimize the existing Patient Tower by making non-structural performance improvements and renovating it to continue to provide inpatient beds and necessary clinical and support functions.
- Develop a parking structure to meet the needs of essential healthcare providers and other staff, at a location that provides quick and safe access to patient facilities.
- Develop parking facilities to address patient parking needs, in particular ED patient parking.
- Maintain existing hospital operations throughout construction.

### **C. PROCEDURAL COMPLIANCE WITH CEQA**

The CEQA environmental review process for the NHB started on May 22, 2023, with UCSF's issuance of a Notice of Preparation ("NOP") of an EIR. A 30-day public comment period for the NOP ended on June 21, 2023. A scoping meeting was held on June 6, 2023 via Zoom to accept public input on environmental topics to be analyzed in the EIR and approaches to the impact analyses. A copy of the NOP is also included as Appendix A to the Draft EIR. Written comments received on the NOP and a transcript of the scoping meeting are included as Appendix B to the Draft EIR.

The Draft EIR for the NHB was published on January 16, 2024, and was made available for a 45-day public review and comment period that ended on March 1, 2024. A Draft EIR Public Hearing was held virtually on February 15, 2024 via the Zoom video conferencing platform, to receive input from agencies and the public. The Draft EIR was posted online on the UCSF website, and

hard copies were provided on request.

Comment letters received on the Draft EIR and a transcript of the oral testimony provided at the virtual public hearing are provided in their entirety in Section 8.5.2, Draft EIR Public Hearing Transcript, in the Final EIR.

UCSF received a total of eight comment letters, which included three from governmental agencies, two from organizations, and three from individuals. In addition, three members of the public spoke at the virtual public hearing on the Draft EIR. Comments, among others, were made regarding cultural resources, construction noise, and transportation impacts.

The Final EIR was completed and published on July 3, 2024. The Final EIR consists of two documents: the previously published Draft EIR and associated appendices and the Final EIR document and associated appendices, which includes comments received during the public review period for the Draft EIR and provides responses to those comments. The Final EIR also contains revisions to the Draft EIR to clarify, amplify, or correct information in the Draft EIR, and associated appendices.

#### **D. ENVIRONMENTAL IMPACTS AND FINDINGS**

Pursuant to Public Resources Code § 21081 and CEQA Guidelines §15091, no public agency shall approve or carry out a project for which an EIR has been certified which identifies one or more significant effects on the environment that would occur if the project is approved or carried out unless the public agency makes one or more of the following findings with respect to each significant impact:

1. Changes or alterations have been required in, or incorporated into, the project which mitigate or avoid the significant effects on the environment.
2. Those changes or alterations are within the responsibility and jurisdiction of another public agency and have been, or can and should be, adopted by that other agency.
3. Specific economic, legal, social, technological, or other considerations, including considerations for the provision of employment opportunities for highly trained workers, make infeasible the mitigation measures or alternatives identified in the EIR.

The University has made one or more of these specific written findings regarding each significant impact associated with the Project. Those findings are presented below, along with a presentation of facts in support of the findings.

These findings summarize the determinations of the Final EIR with respect to the Project's impacts before and after mitigation and do not attempt to describe the full analysis of each environmental impact considered in the Final EIR. Instead, the findings provide a summary description of each impact, describe the applicable mitigation measures, if any, identified in the Final EIR and adopted by the University for the Project, and state the University's findings regarding the significance of each impact with the adopted mitigation measures. The Final EIR contains a full explanation of



each impact, mitigation measure, and the analysis that led the University to its conclusions on those impacts. These findings hereby incorporate by reference the discussion and analysis in the Final EIR, which support the Final EIR's determinations regarding the Project's environmental impacts and mitigation measures. In making these findings, the University ratifies, adopts, and incorporates by reference the Final EIR's analysis, determinations, and conclusions relating to environmental impacts and mitigation measures, except to the extent that any such determinations and conclusions are specifically and expressly modified by these findings.

In adopting the mitigation measures described below, the University intends to adopt each of the mitigation measures recommended in the Final EIR related to the Project. Accordingly, in the event that a mitigation measure recommended in the Final EIR has been inadvertently omitted from these findings, that mitigation measure is hereby adopted and incorporated by reference in the findings. Additionally, in the event that the description of mitigation measures set forth below fails accurately to capture the substance of a given mitigation measure due to a clerical error (as distinct from specific and express modification by the University through these findings), the language of the mitigation measure as set forth in the Final EIR shall govern.

The EIR evaluation included a detailed analysis of impacts in fourteen environmental disciplines or issues, analyzing the Project and alternatives to the Project, including a No Project Alternative. The EIR discloses the environmental impacts expected to result from the construction and operation of the Project. Where possible, mitigation measures were identified to avoid or minimize significant environmental effects. In addition, the University committed to implementing measures in order to reduce the direct and indirect impacts that will result from Project activities. The mitigation measures identified in the EIR are measures proposed by the lead agency, responsible or trustee agencies or other persons that were not included in the Project, but could reasonably be expected to reduce adverse impacts if required as conditions of approving the Project, as required by CEQA Guidelines § 15126.4(a)(1)(A).

### **1. Findings on Less than Significant Impacts**

**FINDING:** Based on the issue area assessment in the EIR, the University has determined that the Project will have no impact or less than significant impacts for several issues as summarized in Table 1 below. The rationale for the conclusion that no significant impact would occur in each of the issue areas in Table 1 below is based on the discussion of these impacts in the detailed issue area and cumulative impacts analyses in Sections 4.1 (Air Quality), 4.2 (Biological Resources), 4.3 (Cultural Resources and Tribal Cultural Resources), 4.4 (Energy), 4.5 (Geology and Soils), 4.6 (Greenhouse Gas Emissions), 4.7 (Hazards and Hazardous Materials), 4.8 (Hydrology and Water Quality), 4.9 (Land Use and Planning), 4.10 (Noise and Vibration), 4.11 (Transportation), and 4.12 (Utilities and Service Systems) of the EIR that were found to have no impact or less than significant impacts. were addressed in Section 4.13 of the EIR: Effects Found Not to Be Significant and are summarized below. As described in Section 4.0.2 of the EIR, no analysis of aesthetic or parking impacts is required pursuant to CEQA Section 21099(d) because the Project is an employment center on an infill site and located within ½ mile of a Major Transit Stop pursuant to CEQA Section 21064.3 . Agriculture and Forestry Resources, Mineral Resources, Population and Housing, Public Services, and Wildfire were addressed in Section 4.13 of the EIR: Effects Found Not to Be

Significant, and are summarized below:

The Project would have less than significant impact on Agriculture and Forestry Resources, addressed in Section 4.13.1 of the EIR, because the Project site is designated for urban uses and no agricultural uses are located on the site. As a result, no land on the Project site is designated as Important Farmland. Thus, the Project would have no impact related to conversion of Important Farmland to a nonagricultural use. In addition, no portion of the Project site is zoned for agricultural use; as a result, the Project would not conflict with any zoning for agricultural use, and there would be no impact in this regard. Further, the Project site and its vicinity are not under any Williamson Act contracts or within any agricultural preserve. With respect to forestry resources, no forest land or existing timber harvest uses are located on or in the vicinity of the Project site. No areas of the Project site are zoned for timberland. As such, the Project would not result in the loss of forest land or conversion of forest land to non-forest uses, or conflict with existing zoning for timberland, and therefore would have no impact on forest land or timberland.

The Project would have less than significant impacts on Mineral Resources, addressed in Section 4.13.2 of the EIR, because the Project is located on land classified by the DOC Division of Mines and Geology as Mineral Resource Zone 1 (MRZ-1), an area where adequate geologic information indicates that no significant mineral deposits are present, or where it is judged that little likelihood exists for their presence. This zone is applied where well developed lines of reasoning indicate that the likelihood for occurrence of significant mineral deposits is nil or slight. There are no known significant mineral resources in the Project site or in the vicinity of the Project site. Additionally, there are no areas designated or zoned as mineral resource zones by the City's General Plan. Further, no mineral extraction activities currently occur or have historically occurred on the Project site and mineral extraction is not included in the Project's design. The Project would not result in the loss of availability of a known mineral resource that would be of value to the region and the residents of the state; and would not result in the loss of availability of a locally important mineral resource recovery site delineated on a local general plan, specific plan or other land use plan. As a result, approval of the Project would not interfere with any mineral extraction operations and would not result in the loss of land designated for mineral resources. Therefore, no impact to mineral resources would occur.

The Project would have less than significant impacts on Population and Housing, addressed in Section 4.13.3 of the EIR, because the proposed Project would not include new homes or businesses and would not result in the extension of new roads or other major infrastructure, such that direct population growth would result due to the Project. The proposed Project would add an estimated 135 staff, vendors and volunteers, 32 faculty, and 16 students and fellows to the UCSF BCH Oakland campus site by 2032. The Association of Bay Area Governments (ABAG) projects that total population and job growth within Oakland will increase by 35.5 percent (or 170,355 residents) and 8.1 percent (or 19,930 jobs), respectively, between 2020 and 2035. The Proposed Project's employment would represent less than one percent of this growth at Project completion. The growth in employment at the Project site would not represent significant unplanned growth because as noted above, the increase in Project employment would be within the projections for population and employment growth identified by ABAG. While it is likely that some of the new employees would already be living in the Bay Area at the time that they are hired by UCSF BCH Oakland, some of the new employees potentially could be new to the area and may move into the

Bay Area communities to work at the campus site. As the number of employees added by the proposed Project is small and housing is distributed throughout the Bay Area communities, the population associated with the proposed Project would be served by the existing and planned housing supply. Furthermore, as there are no residential units located on the Project site, the proposed Project would not displace substantial numbers of existing people or housing, necessitating the construction of replacement housing elsewhere. For these reasons, the proposed Project's impacts on population and housing would be less than significant.

The Project would have less than significant impacts on Public Services, addressed in Section 4.13.4 of the EIR, because:

- **Fire Services:** While development under the proposed Project would result in an increase in on-site population and building space and an incremental increase in demand for fire protection services at the Project site, the population increase associated with the proposed Project would be small in comparison to the population served by the existing fire stations near the campus site. In addition, the increase in calls for fire protection would not be substantial considering the existing demand and capacity for fire protection in the City. The Project site is in an urban area and would not extend demand for the Oakland Fire Department (OFD) beyond the current limits of its service area. Finally, the OFD has indicated that it can provide fire protection services to the proposed Project. For these reasons, the anticipated population and building space increase associated with the proposed Project would not adversely affect OFD service standards nor require an increase in OFD staff and/or equipment that would require the construction of new fire protection facilities. Furthermore, the proposed Project would be designed and constructed to comply with building and fire codes and include appropriate fire safety measures and equipment, including but not limited to, use of fire-retardant building materials, inclusion of emergency water infrastructure (e.g., fire hydrants and sprinkler systems), installation of smoke detectors and fire extinguishers, emergency response notification systems, and provision of adequate emergency access ways for emergency vehicles. As such, the existing fire stations in the vicinity of the campus site would be adequate to meet the increases in demand for fire protection services associated with the proposed Project, and no additional new or physically altered facilities would be necessary. Therefore, implementation of the proposed Project would have a less than significant impact regarding the construction of new or physically altered fire protection facilities.
- **Police Protection:** The UC Police Department (UCPD) provides police protection services to the UCSF BCH Oakland campus site, including the Project site. The UCPD is headquartered at 654 Minnesota Street in San Francisco, approximately 8.5 miles from the Project site. The UCPD also operates a patrol station at the UCSF BCH Oakland campus site. In addition, the Oakland Police Department (OPD) provides police protection services in the vicinity of the UCSF BCH Oakland campus site. The OPD is headquartered at 455 7th Street, approximately 2.6 miles south of the campus site. The increase in daily population associated with the proposed Project could increase demand for UCPD and OPD services. It is both UCPD's and OPD's practice to review staffing levels and to provide necessary staffing to meet standard response times (less than 3 minutes for emergency/in-progress calls and less than 5 minutes for normal service). Due to the small

increase in campus site daily population, it is unlikely that a substantial number of additional police officers and/or other UCPD and OPD staff would be needed. Furthermore, the increase in UCPD and OPD staff would be accommodated in existing facilities. In summary, population growth due to the proposed Project is not anticipated to substantially increase demand for UCPD and OPD services, and no new facilities would be required, the construction of which could result in significant environmental impacts. For these reasons, impacts to police protection services would be less than significant.

- **Schools:** The proposed Project does not include housing, and therefore, would not result in new school age children. As a result, the proposed Project would have no impact on schools.
- **Parks and Recreation:** The area near the campus site, including the Project site, is served by two community parks, three neighborhood parks, one active mini-park, one passive mini-park, two linear parks, and one swimming pool/arts studio complex. Dover Street Park, an approximately one-acre park that includes a play structure, community garden, benches, and lawn areas, is located about five blocks to the north of the campus site. In addition, Helen McGregor Plaza Park is located immediately northwest of the campus site, across Martin Luther King Jr. Way. This approximately quarter-acre park consists of a plaza with concrete seating areas utilized by people waiting for the bus, and landscaped trees. The proposed Project does not include any housing and would therefore not increase residential population in the project area that could increase the use of local parks. New employees at the Project site could incrementally increase the use of these parks as they access the facilities on their breaks or before or after their shifts; however, the increase in employment on the site is minor, and the additional Project employment would not be expected to increase the use of these facilities such that physical deterioration would occur or be accelerated, and this impact is less than significant. Other than a small play area for patients, the proposed Project does not include any recreational facilities. As a result, it does not include recreational facilities or require the construction or expansion of recreational facilities which might have an adverse physical effect on the environment, and no impact would occur.
- **Other Facilities:** The proposed project does not include housing, and therefore, would not result in an increase in residential population. As a result, the proposed Project would have no impact on other facilities, such as libraries and community centers.

The Project would have less than significant Wildfire impacts, addressed in Section 4.13.5 of the EIR, because the UCSF BCH Oakland campus site, including the Project site, is in a Local Responsibility Area (LRA) and a non-Fire Hazard Severity Zone. As such, the Project is not located in or near an SRA or lands classified as very high fire severity zones and is not susceptible to wildfires. The Project site is not immediately upstream of notably sloped or hillside areas, and thus would not expose people or structures to significant risks, including downslope or downstream flooding or landslides, because of runoff, post-fire slope instability, or drainage changes. For these reasons, no impact would occur with respect to wildfire.

**Table 1: Summary of Less Than Significant Impacts for the NHB**

| <b>Environmental Impacts</b>  |
|---|
| <b><i>EIR Section 4.1: Air Quality</i></b>  |
| Impact AIR-1: Implementation of the NHB Project would not conflict with or obstruct implementation of the 2017 Clean Air Plan.  |
| Impact AIR-2: Implementation of the NHB Project would not result in a cumulatively considerable net increase of any criteria pollutant for which the project region is non-attainment under an applicable federal or state ambient air quality standard.  |
| Impact AIR-3: Implementation of the NHB Project would not expose sensitive receptors to substantial pollutant concentrations.   |
| <b><i>EIR Section 4.2 Biological Resources</i></b>  |
| Impact BIO-3: Implementation of the NHB Project would not conflict with any local policies or ordinances protecting biological resources, such as a tree preservation policy or ordinance; or exceed the LRDP EIR standard of significance by damaging or removing heritage or landmark trees or native oak trees of a diameter specified in a local ordinance. |
| <b><i>EIR Section 4.4: Cultural Resources and Tribal Cultural Resources</i></b>   |
| Impact CUL-2: Implementation of the NHB Project would not result in significant impacts to the 55th and Dover Residential District.   |
| <b><i>EIR Section 4.5: Energy</i></b>   |
| Impact ENE-1: Implementation of the NHB Project would not result in a potentially significant environmental impact due to wasteful, inefficient, or unnecessary consumption of energy resources, during project construction or operation.  |
| Impact ENE-2: Implementation of the NHB Project would not conflict with or obstruct a state or local plan for renewable energy or energy efficiency.  |
| Impact C-ENE-1: The NHB Project, combined with cumulative development in the BCH Oakland campus site vicinity and citywide, would not result in significant cumulative energy impacts.  |
| <b><i>EIR Section 4.5: Geology and Soils</i></b>  |
| Impact GEO-1: Construction and operation of the NHB Project would not directly or indirectly cause substantial adverse effects, including the risk of loss, injury, or death involving strong seismic ground shaking.   |
| Impact GEO-2: Construction and operation of the NHB Project would not directly or indirectly cause substantial adverse effects, including the risk of loss, injury, or death involving strong seismic related ground failure, including liquefaction.   |
| Impact GEO-3: Construction and operation of the NHB Project would not have the potential to result in substantial erosion or the loss of topsoil.   |
| Impact GEO-4: The NHB Project would not be located on a geologic unit or soil that is unstable, or that would become unstable as a result of the Project, and potentially result in on- or off-site landslide, lateral spreading, subsidence, liquefaction or collapse.   |
| Impact GEO-5: The NHB Project would be located on expansive soils, but would not cause substantial direct or indirect risks to life or property.  |

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| Impact C-GEO-1: Implementation of the NHB Project, in combination with past, present and reasonably foreseeable future projects, would not result in significant cumulative impacts related to geology and soils.   |
| <b><i>EIR Section 4.6: Greenhouse Gas Emissions</i></b>   |
| Impact GHG-1: Construction and operation of the NHB Project would not generate greenhouse gas emissions, either directly or indirectly, that may have a significant impact on the environment.  |
| Impact GHG-2: Construction and operation of the NHB Project would not conflict with an applicable plan, policy or regulation adopted for the purpose of reducing the emissions of greenhouse gases.   |
| <b><i>EIR Section 4.7: Hazards and Hazardous Materials</i></b>  |
| Impact HAZ-1: Construction and operation of the NHB Project would not create a significant hazard to the public or the environment through the routine transport, use, or disposal of hazardous materials.  |
| Impact HAZ-2: Construction and operation of the NHB Project would not create a significant hazard to the public or the environment through reasonably foreseeable upset and accident conditions involving the release of hazardous materials into the environment.  |
| Impact HAZ-3: Construction and operation of the NHB Project would not emit hazardous emissions or handle hazardous or acutely hazardous materials, substances, or waste within one-quarter mile of an existing or proposed school.  |
| Impact C-HAZ-1: Construction and operation of the NHB Project, in conjunction with other cumulative development within the City of Oakland, would not create a significant hazard to the public or the environment through the routine transport, use, or disposal of hazardous materials or from risk of upset and accident conditions involving hazardous materials.  |
| <b><i>EIR Section 4.8: Hydrology and Water Quality</i></b>  |
| Impact HYD-2: Implementation of the NHB Project would not substantially decrease groundwater supplies or interfere substantially with groundwater recharge such that the project may impede sustainable groundwater management of the basin.  |
| Impact HYD-3: Construction and operation of the NHB Project would not substantially alter the existing drainage patterns of the site or area, in a manner that has the potential to result in substantial erosion or siltation on- or off- site; would not substantially increase the rate or amount of surface runoff in a manner that would result in flooding on or off site; and would not create or contribute runoff water that would exceed the capacity of existing or planned stormwater drainage systems or provide substantial additional sources of polluted runoff; or impede or redirect flow.  |
| Impact HYD-4: Implementation of the Project would not create a risk of release of pollutants due to project inundation in flood hazard, tsunami, or seiche zones.   |
| Impact C-HYD-2: Construction and operation of the NHB Project, in conjunction with other cumulative development, would not cumulatively alter the drainage pattern of the site or area, through the addition of impervious surfaces, in a manner which would result in substantial erosion or siltation on or off site; would not substantially increase the rate or amount of surface runoff in a manner which would result in flooding on or off site; would not create or contribute runoff water which would exceed the capacity of existing or planned stormwater drainage systems or provide substantial additional sources of polluted runoff; or impede or redirect flow. |

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| <b><i>EIR Section 4.9: Land Use and Planning</i></b>  |
| Impact LU-1: Implementation of the proposed NHB Project would not cause a significant environmental impact due to a conflict with land use plans, policies and regulations adopted for the purpose of avoiding or mitigating an environmental effect.   |
| Impact LU-2: Development under the proposed NHB would not conflict with local land use regulations such that a significant incompatibility with adjacent land uses is created.  |
| Impact C-LU-1: The proposed NHB Project, in combination with past, present, and reasonably foreseeable future projects, would not result in a conflict with land use plans, policies, and regulations adopted for the purpose of avoiding or mitigating an environmental effect or a conflict with local land use regulations such that a significant incompatibility with adjacent land uses is created.   |
| <b><i>EIR Section 4.10: Noise and Vibration</i></b>   |
| Impact NOI-2: Implementation of the NHB Project would not generate a substantial permanent increase in ambient noise levels in the vicinity of the project in excess of standards established in the local general plan or noise ordinance, or applicable standards of other agencies.  |
| Impact NOI-4: Operation of the NHB Project would not exceed an LRDP EIR operational standard of significance by contributing to an increase in average daily noise levels (Ldn) of 3 dB(A) or more at property lines, where ambient noise levels already exceed local noise levels set forth in local general plans or ordinances for such areas based on their use.  |
| Impact C-NOI-2: Implementation of the NHB Project, combined with cumulative development in the project area, would not generate substantial permanent increases in ambient noise levels in the vicinity of the project in excess of standards established in the local general plan or noise ordinance, or applicable standards of other agencies.  |
| Impact C-NOI-4: Implementation of the NHB Project, combined with cumulative development in the project area, would not exceed an LRDP EIR operational standard of significance by contributing to an increase in average daily noise levels (Ldn) of 3 dB(A) or more at property lines, if ambient noise levels in areas adjacent to proposed development already exceed local noise levels set forth in local general plans or ordinances for such areas based on their use. |
| <b><i>EIR Section 4.11: Transportation</i></b>  |
| Impact TRANS-1: Implementation of the NHB Project would not conflict with a program, plan, ordinance or policy addressing the circulation system, including transit, roadway, bicycle and pedestrian facilities.  |
| Impact TRANS-2: Implementation of the NHB Project would not conflict or be inconsistent with CEQA Guidelines Section 15064.3, subdivision (b).  |
| Impact TRANS-3: Implementation of the NHB Project would not substantially increase hazards due to a geometric design feature (e.g., sharp curves or dangerous intersections) or incompatible uses (e.g., farm equipment).   |
| Impact TRANS-4: Implementation of the NHB Project would not result in inadequate emergency access.  |
| Impact C-TRANS-1: Implementation of the NHB Project, in combination with past, present, and reasonably foreseeable future projects, would not result in a cumulatively considerable contribution to significant transportation impacts.   |



***EIR Section 4.12: Utilities and Service Systems***

Impact UTIL-1: Implementation of the proposed NHB Project would require or result in the construction of new or expanded water, wastewater treatment or storm water drainage, electric power, or telecommunications facilities, the construction or relocation of which would not cause significant environmental effects.

Impact UTIL-2: Sufficient water supply would be available from the EBMUD to serve the NHB Project and reasonably foreseeable future development under normal, dry and multi-dry years. EBMUD would address the anticipated shortfalls through rationing and conservation programs and/or develop new or expanded water supply facilities to address shortfalls during multiple dry years.

Impact UTIL-3: The wastewater treatment provider would have adequate wastewater treatment capacity to serve the NHB Project.

Impact UTIL-4: The NHB Project would not generate solid waste in excess of State or local standards, or in excess of the capacity of local infrastructure, or otherwise impair the attainment of solid waste reduction goals.

Impact UTIL-5: The NHB Project would comply with applicable management and reduction statutes and regulations related to solid waste.

Impact C-UTIL-1: The proposed NHB Project, in combination with past, present, and reasonably foreseeable future projects in the vicinity of the UCSF BCH Oakland campus site, would not result in significant cumulative impacts related to utilities and service systems.

2. **Findings on Significant Environmental Impacts That Can Be Reduced to a Less Than Significant Level**

**FINDING:** The University finds that the following environmental impacts can and will be mitigated to below a level of significance based upon the implementation of the mitigation measures in the EIR. These findings are based on the discussion of impacts in the detailed issue area and cumulative impact analyses in Sections 4.1 (Air Quality), 4.2 (Biological Resources), 4.3 (Cultural Resources and Tribal Cultural Resources), 4.5 (Geology and Soils), 4.7 (Hazards and Hazardous Materials), 4.8 (Hydrology and Water Quality), 4.10 (Noise and Vibration), and 4.11 (Transportation) of the EIR. An explanation of the rationale for each finding is presented below.

(a) ***Biological Resources***

- (i) ***Impact BIO-1: Implementation of the NHB Project could have a substantial adverse effect, either directly or through habitat modifications, on any species identified as a candidate, sensitive, or special status species in local or regional plans, policies, or regulations, or by the California Department of Fish and Wildlife or U.S. Fish and Wildlife Service.***

**FINDING:** For the reasons stated in the Draft EIR at page 4.2-9 to 4.2-11, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact BIO-1. Specifically, NHB Mitigation Measure BIO-1a and BIO-1b are feasible and are hereby adopted and incorporated into the NHB to mitigate significant effects from Impact BIO-1 to a less than significant level.

**Mitigation Measure BIO-1a: Protection of Nesting Birds**

- To the extent feasible, removal of any tree and/or other vegetation suitable for nesting of birds shall not occur during the bird breeding season of February 1 to August 15. If tree removal must occur during the bird breeding season, all trees to be removed shall be surveyed by a qualified biologist to verify the presence or absence of nesting raptors or other birds. Pre-removal surveys shall be conducted within 15 days prior to the start of work and shall be submitted to UCSF for review and approval.
  - If the survey indicates the potential presence of nesting raptors or other birds, the biologist shall determine an appropriately sized buffer around the nest in which no work will be allowed until the young have successfully fledged. The size of the nest buffer will be determined by the biologist in consultation with the California Department of Fish and Wildlife, and will be based to a large extent on the nesting species and its sensitivity to disturbance. In general, buffer sizes of 200 feet for raptors and 50 feet for other birds should suffice to prevent disturbance to birds nesting in the urban environment, but these buffers may be increased or decreased, as appropriate, depending on the bird species and the level of disturbance anticipated near the nest.
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**Mitigation Measure BIO-1b: Protection of Roosting Bats**

- Prior to project construction, a qualified bat biologist shall conduct a pre-construction survey for roosting bats in trees to be removed or pruned and structures to be demolished within the work area and within a 50-foot radius of the work area. If no roosting bats are found, no further action is required.
- If a non-maternal roost of bats is found in a tree or structure to be removed or demolished as part of project construction, the individuals shall be safely evicted, under the direction of a qualified bat biologist, by opening the roosting area to allow airflow through the cavity. Removal or demolition should occur no sooner than at least two nights after the initial minor site modification (to alter airflow). This action allows bats to leave during darkness, thus increasing their chance of finding new roosts with a minimum of disturbance. Departure of the bats from the construction area shall be confirmed with a follow-up survey by a qualified bat biologist prior to start of construction.
- If active maternity roosts are found in trees or structures that will be removed or demolished as part of project construction, tree removal or demolition of that tree or structure shall commence and be completed before maternity roosting colonies form (generally before March 1), or shall not commence until after young are flying (generally after July 31). Active maternity roosts shall not be disturbed between March 1 and July 31.

**Rationale for Finding:** Implementation of NHB Mitigation Measures BIO-1a and BIO-1b would require preconstruction nesting bird surveys and avoidance of active nests and pre-construction and pre-demolition roosting bat surveys, followed by bat-safe removal if suitable bat habitat is identified in a tree or structure to be removed. Implementation of these measures would reduce the impact on nesting bird and bat species to a less-than-significant level.

- (ii) *Impact BIO-2: Implementation of the NHB Project could interfere substantially with the movement of any native resident or migratory fish or wildlife species or with established native resident or migratory wildlife corridors, or impede the use of native wildlife nursery sites.*

**FINDING:** For the reasons stated in the Draft EIR at page 4.2-11 to 4.2-13, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact BIO-2. Specifically, NHB Mitigation Measure BIO-2 is feasible, and is hereby adopted and incorporated into the NHB to mitigate significant effects from Impact BIO-2 to a less than significant level.

**Mitigation Measure BIO-2: Bird Collision Reduction Measures.**

Bird safe measures would be developed in consultation with a qualified expert based on site-specific conditions. Preliminary construction and operational bird safe measures may include, but not limited to, the following:

- Construction areas requiring lights shall implement the following measures to the extent feasible:
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- Construction-related lighting shall be fully shielded and focused down to ensure no significant illumination passes beyond the immediate work area.
- Yellow or orange light shall be used where possible.
- Construction personnel shall reduce the amount of lighting to the minimum necessary to safely accomplish the work.

Building design shall:

- Avoid installation of lighting in areas where not required for public safety.
- Consider alternatives to all-night, floor-wide lighting when interior lights would be visible from the exterior or when exterior lights must be left on at night, including:
  - Installing motion-sensitive lighting
  - Installing task lighting
  - Installing programmable timers
- Installing lower-wattage, sodium, and yellow-red spectrum lighting fixtures (if compatible with personnel safety requirements)
- Use fully shielded exterior safety lights to contain and direct light away from the sky.
- Employ glazing options, such as use of either fritted glass, Dichroic glass, etched glass, translucent glass, or glass that reflects ultraviolet light in appropriate portions of the building façades.

**Rationale for Finding:** Implementation of Mitigation Measure BIO-2 would be refined in consultation with a qualified expert based on site-specific conditions. Implementation of these measures would reduce the potential adverse effect on resident and migrating birds to a less-than-significant level by reducing injuries associated with night lighting during construction and operation and requiring design features in new structures to make buildings more visible to birds.

- (iii) *Impact C-BIO-1: Implementation of the NHB Project could result in cumulatively considerable impacts on biological resources, in combination with past, present and reasonably foreseeable future projects in the vicinity of the Project site.*

**FINDING:** For the reasons stated in the Draft EIR at page 4.2-14, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact C-BIO-1. Specifically, Mitigation Measures BIO-1a and 1b and BIO-2 are feasible and are hereby adopted and incorporated into the NHB to mitigate significant effects from Impact C-BIO-1 to a less than significant level.

**Mitigation BIO-1a:** See discussion above.

**Mitigation BIO-1b:** See discussion above.

**Mitigation BIO-2:** See discussion above.

**Rationale for Finding:** As discussed above, the Project would result in minimal direct impacts on sensitive biological resources and would mitigate all direct and indirect impacts to special-status species with Mitigation Measures BIO-1a, BIO-1b, and BIO-2. Therefore, with mitigation, the development of the Project would not result in a cumulatively considerable contribution to cumulative impacts on biological resources. Thus, the project's cumulative impact on biological

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resources would be less than significant.

(b) ***Cultural Resources and Tribal Cultural Resources***

- (i) ***Impact CUL-3: Implementation of the NHB Project could cause a substantial adverse change in the significance of an archaeological resource pursuant to CEQA Guidelines Section 15064.5.***

**FINDING:** For the reasons stated in the Draft EIR at page 4.3-19 to 4.3-20, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact CUL-3. Specifically, NHB Mitigation Measure CUL-3 is feasible and is hereby adopted and incorporated into the NHB to mitigate significant effects from Impact CUL-3 to a less than significant level.

**Mitigation Measure CUL-3: Inadvertent Discovery of Archaeological Resources and Tribal Cultural Resources**

Prior to commencement of construction activities, all on-site personnel shall attend a mandatory pre-project training to outline the general archaeological and tribal cultural sensitivity of the project area. The training will include a description of the types of resources that could be encountered and the procedures to follow in the event of an inadvertent discovery of resources.

If pre-contact or historic-era cultural materials are encountered by construction personnel during ground-disturbing activities, all construction activities within 100 feet shall halt and the contractor shall notify the UCSF Environmental Coordinator (EC). The UCSF EC shall retain a qualified archaeologist who meets the Secretary of the Interior's Professional Qualification Standards to inspect the find within 24 hours of discovery. If it is determined that the project could damage a historical resource or a unique archaeological resource, construction shall cease in an area determined by the qualified archaeologist until a mitigation plan has been prepared and implemented [*CEQA Guidelines* 15064.5(b)(4)]. If the find is a potential tribal cultural resource, the UCSF EC shall contact a Native American representative or representatives (as provided by the Native American Heritage Commission) [PRC 21074(2)(c)]. The qualified archaeologist, in consultation with the UCSF EC and the Native American representative(s), shall determine when construction can resume.

If the resource is determined to be a historical resource or a unique archaeological resource, the preferred mitigation shall be preservation in place. In accordance with PRC Section 21083.2(b), preservation in place shall be accomplished through: (1) modifying the construction plan to avoid the resource; (2) incorporating the resource within open space; (3) capping and covering the resource; or (4) deeding the resource site into a permanent conservation easement. If preservation in place is not feasible, the qualified archaeologist, in consultation with the UCSF EC and the Native American representative(s) (if the resource is pre-contact), shall prepare and implement a detailed treatment plan. In all cases treatment will be carried out with dignity and respect (including protecting the cultural character, traditional use, and confidentiality of the resource). For pre-contact Native American resources, the

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Native American representative(s) will be consulted on the research approach, methods, and whether burial or data recovery or alternative mitigation is appropriate for the find. Treatment for most resources could consist of (but shall not be limited to) sample excavation, site documentation, and historical research, as appropriate to the discovered resource. The treatment plan shall include provisions for analysis of data in a regional context as appropriate to the discovered resource, reporting of results within a timely manner, and dissemination of reports to local and state repositories, libraries, and interested professionals.

**Rationale for Finding:** While the Project site has a long history of post-contact settlement and development, the Project site has undergone several phases of construction-related disturbances, and the potential for encountering intact historic-era resources is low. Nevertheless, the potential for uncovering pre-contact and historic-era archaeological resources cannot be entirely discounted. In the unlikely event that archaeological materials are discovered during Project construction (including grading, excavation and other earthmoving activities), implementation of Mitigation Measure CUL-3 would ensure that the Project will have a less-than-significant impact on previously unknown archaeological resources.

- (ii) **Impact CUL-4:** *Implementation of the NHB Project could disturb human remains, including those interred outside of dedicated cemeteries.*

**FINDING:** For the reasons stated in the Draft EIR at page 4.3-20 to 4.3-21, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact CUL-4. Specifically, NHB Mitigation Measure CUL-4 is feasible, and is hereby adopted and incorporated into the NHB to mitigate significant effects from Impact CUL-4 to a less than significant level.

**Mitigation Measure CUL-4: Inadvertent Discovery of Human Remains**

In the event of discovery or recognition of any human remains during ground-disturbing activities, treatment shall comply with all applicable state and federal laws. All construction activities within 100 feet shall halt and the contractor shall notify the UCSF Environmental Coordinator (EC). In accordance with PRC 5097.98, the UCSF EC shall contact the Alameda County Coroner to determine that no investigation of the cause of death is required. The County Coroner shall contact the Native American Heritage Commission (NAHC) within 24 hours if it is determined that the remains are Native American. The NAHC will then identify the person or persons it believes to be the most likely descendant (MLD) from the deceased Native American. Within 48 hours, the MLD shall make recommendations to the UCSF EC of the appropriate means of treating the human remains and any grave goods. Whenever the NAHC is unable to identify an MLD, the MLD fails to make a recommendation, or the parties are unable to agree on the appropriate treatment measures, the human remains shall be reinterred with appropriate dignity on the property in a location not subject to further and future subsurface disturbance.

**Rationale for Finding:** There are no known human remains, including those interred outside of dedicated cemeteries, located within the Project site. There still exists, however, the potential that

ground disturbance under the Project could impact previously undiscovered human remains. In the event that Project construction activities disturb unknown human remains, any inadvertent damage to human remains could be considered a significant impact. With implementation of Mitigation Measure CUL-4, development would have a less-than-significant impact on previously unknown human remains.

- (iii) ***Impact CUL-5:** Implementation of the NHB Project could cause a substantial adverse change in the significance of a tribal cultural resource, defined in PRC Section 21074 as either a site, feature, place, cultural landscape that is geographically defined in terms of the size and scope of the landscape, sacred place, or object with cultural value to a California Native American tribe.*

**FINDING:** For the reasons stated in the Draft EIR page 4.3-21 to 4.3-22, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact CUL-5. Specifically, NHB Mitigation Measures CUL-5a and CUL-5b are feasible and are hereby adopted and incorporated into the NHB to mitigate significant effects from Impact CUL-5 to a less than significant level.

**Mitigation Measure CUL-5a: Cultural Resources Awareness Training**

UCSF shall provide a cultural resources and tribal cultural resources sensitivity and awareness training program for all personnel involved in project construction, including field consultants and construction workers. UCSF shall invite affiliated Native American tribal representatives to participate. The training program shall include relevant information regarding sensitive cultural resources and tribal cultural resources, including applicable regulations, protocols for avoidance, and consequences of violating State laws and regulations. The training program shall also describe appropriate avoidance and minimization measures for resources that have the potential to be located in the Project site and shall outline what to do and who to contact if any potential cultural resources or tribal cultural resources are encountered. The training program shall emphasize the requirement for confidentiality and culturally appropriate treatment of any discovery of significance to Native Americans.

**Mitigation Measure CUL-5b: Cultural Resources Monitoring Plan**

Prior to authorization to proceed, a Secretary of the Interior-qualified archaeologist shall prepare a cultural resources monitoring plan. The plan shall be reviewed by the affiliated Native American tribe(s) and UCSF. The plan shall include (but not be limited to) the following components:

- Monitoring locations and circumstances based on soil types, geology, distance to known sites, and other factors;
  - Person(s) responsible for conducting monitoring activities, including a request to the culturally-affiliated Native American tribe(s) for a tribal monitor;
  - Person(s) responsible for overseeing and directing the monitors;
  - How the monitoring shall be conducted and the required format and content of
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- monitoring reports;
- Schedule for submittal of monitoring reports and person(s) responsible for review and approval of monitoring reports;
- Protocol for notifications in case of encountering cultural resources, as well as methods of dealing with the encountered resources (e.g., collection, identification, curation);
- Methods to ensure security of cultural resources if identified;
- Protocol for notifying local authorities (i.e. Sheriff, Police) should site looting and other illegal activities occur during construction.

During the course of the monitoring, the archaeologist and tribal monitor may adjust the frequency—from continuous to intermittent—of the monitoring based on the conditions and professional judgment regarding the potential to impact resources.

**Rationale for Finding:** Based on the background research and environmental context, there are no known tribal cultural resources in areas proposed for ground disturbance or other improvements within the Project site. While unlikely, there remains the potential that ground disturbance could impact previously undiscovered or buried cultural materials that could also be considered tribal cultural resources. Impacts to tribal cultural resources could be potentially significant. Based on the recommendations from the Tribe and with implementation of Mitigation Measure CUL-5a and Mitigation Measure CUL-5b, the Project would have a less-than-significant impact on previously unknown tribal cultural resources. Therefore, this impact would be less than significant with mitigation.

- (iv) *Impact C-CUL-1: Implementation of the NHB Project could result in cumulatively considerable impacts on cultural and/or tribal cultural resources, in combination with past, present and reasonably foreseeable future projects.*

**FINDING:** For the reasons stated in the Draft EIR page 4.3-23, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact C-CUL-1. Specifically, NHB Mitigation Measures CUL-3 and CUL-4 are feasible and are hereby adopted and incorporated into the NHB to mitigate significant effects from Impact C-CUL-1 to a less than significant level.

**Mitigation Measure CUL-3: See above.**

**Mitigation Measure CUL-4: See above.**

**Rationale for Finding:** The geographic scope for cumulative effects on archaeological resources, human remains, and tribal cultural resources includes the immediate vicinity of the Project site where the proposed Project could cause disturbance to archaeological resources, human remains, and/or tribal cultural resources. Cumulative projects in the vicinity could have a significant impact on previously undiscovered archaeological resources, including human remains interred outside of formal cemeteries, during ground-disturbing activities. The potential impacts of the project when considered together with similar impacts from other probable future projects in the vicinity could result in a significant cumulative impact on buried archaeological resources or human remains.

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However, implementation of Mitigation Measures CUL-3 and CUL-4 would require that work halt in the vicinity of a find until it is evaluated by a qualified archaeologist who meets the Secretary of the Interior's Professional Qualification Standards, and in the case of human remains the County Coroner. In addition, cumulative projects undergoing CEQA review would have similar types of inadvertent discovery measures. Therefore, with implementation of Mitigation Measures CUL-3 and CUL-4, the proposed Project's contribution to cumulative impacts would not be considerable, and the impact would be less than significant with mitigation.

(c) ***Geology and Soils***

- (i) ***Impact GEO-6: The NHB Project could directly or indirectly destroy a unique paleontological resource or site or unique geological feature.***

**FINDING:** For the reasons stated in the Draft EIR at page 4.5-18 to 4.5-19, the University finds that changes or alterations have been incorporated into the related improvements for the NHB which mitigate significant effects on the environment from Impact GEO-6. Specifically, NHB Mitigation Measure GEO-6 is feasible, and is hereby adopted and incorporated into the NHB to mitigate significant effects from Impact GEO-6 to a less than significant level.

**Mitigation Measure GEO-6:** Prior to commencement of construction activities, all on-site personnel shall attend a mandatory pre-project training to outline the general paleontological sensitivity of the project area. The training will include a description of the types of resources that could be encountered and the procedures to follow in the event of an inadvertent discovery of resources.

If paleontological resources, such as fossilized bone, teeth, shell, tracks, trails, casts, molds, or impressions are discovered during ground-disturbing activities, work shall stop in that area and within 100 feet of the find until a qualified paleontologist meeting the Society of Vertebrate Paleontology (SVP) Standards can assess the nature and importance of the find and, if necessary, develop appropriate salvage measures in conformance with SVP standards (2010). If the discovery can be avoided and no further impacts will occur, no further effort shall be required. If the resource cannot be avoided and may be subject to further impact, a qualified paleontologist shall evaluate the resource and determine whether it is "unique" under CEQA.

Any discovered paleontological resources that are determined by the qualified paleontologist to be "unique" in accordance with CEQA shall be subjected to appropriate salvage measures in conformance with SVP standards (2010).

**Rationale for Finding:** The proposed Project would have a significant effect on the environment if it directly or indirectly destroys a unique paleontological resource or site or unique geologic feature. There are no recorded paleontological resources (fossils) within the Project site nor does the Project site area contain a unique geological feature. The Project would include excavation to a maximum of up to 28 feet below grade for the new hospital building, which would be deep enough to encounter the older deposits that may contain paleontological resources. Should

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paleontological resources be encountered during ground-disturbing activities, this would be a potentially significant impact. To reduce impacts on paleontological resources, implementation of Mitigation Measure GEO-6 would be required.

(d) ***Hazards and Hazardous Materials***

- (i) ***Impact HAZ-4: The UCSF BCH Oakland campus site is included on a list of hazardous materials sites compiled pursuant to Government Code Section 65962.5. Contamination at the NHB Project site could be encountered during construction and could have the potential to create a significant hazard to the public or the environment.***

**FINDING:** For the reasons stated in the Final EIR (Draft EIR at page 4.7-27 to 4.7-29; Final EIR at page 8.5-10 to 8.5-25), the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact HAZ-4. Specifically, NHB Mitigation Measures HAZ-4a and HAZ-4b are feasible and are hereby adopted and incorporated into the NHB to mitigate significant effects from Impact HAZ-4 to a less than significant level.

**Mitigation Measure HAZ-4a, Soil and Groundwater Management Plan (SGMP):** Prior to development on the campus site, a SGMP shall be prepared by a qualified environmental consulting firm to reflect current regulatory requirements and risk management protocols that are in accordance with ACDEH oversight. The SGMP shall include measures to address protocols for identifying, handling, and characterizing suspect contaminated soils and/or groundwater, if encountered, as summarized below:

- Site description, including the hazardous materials that may be encountered.
  - Roles and responsibilities of onsite workers, supervisors, and the regulatory agency (ACDEH). Onsite personnel shall attend mandatory pre-project training regarding the SGMP.
  - Training for construction workers focused on the recognition of and response to encountering hazardous materials.
  - Protocols for the materials (soil and/or dewatering effluent) testing, handling, removing, transporting, and disposing of all excavated materials and dewatering effluent in a safe, appropriate, and lawful manner.
  - Specified personal protective equipment and decontamination procedures, if needed.
  - A requirement specifying that any construction worker who identifies hazardous materials has the authority to stop work and notify the site supervisor.
  - Procedures to follow if evidence of potential soil and/or groundwater contamination is encountered (such as soil staining, unusual odors, debris or buried storage containers). These procedures shall be followed in accordance with hazardous waste operations regulations and specifically include, but not
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be limited to, immediately stopping work in the vicinity of the unknown hazardous materials release; notifying the ACDEH; and retaining a qualified environmental firm to perform sampling and remediation.

Notification and sampling requirements for adequate characterization shall be in accordance with ACDEH requirements and any required removal or remediation work shall be completed to the overseeing agency's standards prior to occupancy of the new structure.

**Mitigation Measure HAZ-4b: Vapor Mitigation:** To mitigate exceedances of indoor air standards, the Project shall incorporate at least one or more of the vapor mitigation methods listed below in areas determined to have soil gas concentrations above soil gas screening levels. The proposed work-specific vapor mitigation must be in accordance with vapor mitigation guidance provided by the Department of Toxic Substances Control (DTSC), which provides vapor guidance information at <https://dtsc.ca.gov/vapor-intrusion>.

- Excavate and remove contaminated materials (soil and, if needed, groundwater), to levels where subsequent testing verifies that soil gas levels are below screening levels.
- Install a physical vapor barrier beneath the structure foundation that prevents soil gas from seeping into breathing spaces inside the structure, or
- Install a passive or powered vapor mitigation system that draws soil gas out of the under-foundation base rock and directs that soil gas to a treatment system to prevent people from being exposed outdoors to the extracted soil gas.

Upon completion, UCSF BCH Oakland shall prepare a report documenting the testing results and installed vapor mitigation method and submit the report to the regulatory agency with jurisdiction (i.e., DTSC). A copy of the report shall be provided to the UCSF Mitigation Monitor to inform them of compliance with this requirement. The implemented mitigation measure shall result in indoor air concentrations that do not exceed the screening levels provided in the DTSC Human Health Risk Assessment (HHRA) Note Number 3.

**Rationale for Finding:** Due to historical contamination at the Project site and on neighboring parcels, there is some risk that residual levels of PCE and TCE could be present in groundwater at the Project site and that lead and dieldrin may be present in the soil on the Caltrans Parcel (as defined in the Final EIR). Construction workers may encounter contaminated soil and groundwater. While unlikely, future occupants of the Project site could be exposed to PCE and TCE vapors migrating from groundwater up into breathing spaces of structures. Construction activities may also encounter previously unidentified contamination. If not identified and managed appropriately, construction workers, campus employees, and the public could be exposed to contaminants through direct contact (construction workers) or through soil vapor intrusion. Implementation of Mitigation Measures HAZ-4a, Soil and Groundwater Management Plan (SGMP) and HAZ-4b, Vapor Mitigation would ensure that any risk associated with potential contamination is mitigated to a less than significant level.

(e) ***Hydrology and Water Quality***

(i) ***Impact HYD-1: Implementation of the NHB Project would***

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*have the potential to violate water quality standards or waste discharge requirements, or otherwise substantially degrade surface or groundwater quality.*

**FINDING:** For the reasons stated in the Draft EIR at page 4.8-11 to 4.8-14, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact HYD-1. Specifically, NHB Mitigation Measures HAZ-4 is feasible, and is hereby adopted and incorporated into the NHB to mitigate significant effects from Impact HYD-1 to a less than significant level.

**Mitigation Measure HAZ-4:** See above.

**Rationale for Finding:** As explained in Impact HAZ-4 in Section 4.7, *Hazards and Hazardous Materials*, although there is no recorded history of subsurface contaminants on the Project site, there were two cases of subsurface contamination identified elsewhere within the campus site in proximity to the Project site; furthermore, the possibility exists for construction activities to encounter previously unidentified contamination on the Project site. In addition, since the proposed Project includes the excavation of soil during construction (in places up to 28 feet below grade), and existing groundwater levels have previously been estimated at variable depths ranging from 7.5 to 20 feet below grade, it is expected that dewatering would be required during construction. Excavation and dewatering activities could expose construction workers and the environment to hazardous materials if not managed appropriately. To reduce the potential significant impact to construction workers and the environment during excavation and dewatering activities, Mitigation Measure HAZ-4, Construction Soil and Groundwater Management Plan, is identified to be implemented prior to construction. The implementation of this mitigation measure would reduce potential water quality impacts associated with the discharge of contaminated groundwater extracted during site dewatering to a less than significant level. Furthermore, as applicable, any off-site improvements that would be constructed outside the campus site boundary would be subject to construction site runoff requirements in accordance with the City of Oakland's *Creek Protection, Stormwater Management, and Discharge Control Ordinance*. As such, any off-site construction impacts to water quality would similarly be less than significant.

- (ii) **Impact HYD-5:** *Implementation of the NHB Project could conflict with or obstruct implementation of a water quality control plan or sustainable groundwater management plan.*

**FINDING:** For the reasons stated in the Draft EIR at page 4.8-17 to 4.8-18, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact HYD-5. Specifically, NHB Mitigation Measure HAZ-4 is feasible, and is hereby adopted and incorporated into the NHB to mitigate significant effects from Impact HYD-5 to a less than significant level.

**Mitigation Measure HAZ-4:** See above.

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**Rationale for Finding:** To reduce the potential significant impact to construction workers and the environment during the excavation and dewatering activities, Mitigation Measure HAZ-4, Construction Soil and Groundwater Management Plan shall be implemented which would reduce impacts associated with potential releases of hazardous materials to surface and groundwater to a less than significant level. Compliance with the NPDES CGP regulations, and implementation of Mitigation Measure HAZ-4 identified in Section 4.7, would ensure Project construction would not result in substantial degradation of water quality, and thus, ensure that the Project would not conflict with or obstruct implementation of the Basin Plan, and the impact would be less than significant. The Project would include installation of surface water treatment project design features (e.g., bioretention areas), which would assist in ensuring that flows from the Project site would be properly treated and would not violate water quality standards or waste discharge requirements. Implementation of these Project design features would improve water quality, as these features are not part of the existing conditions at the Project site. Therefore, the proposed Project operations would be consistent with the Basin Plan, and the impact would be less than significant.

- (iii) *Impact C-HYD-1: Construction and operation of the NHB Project, in conjunction with other cumulative development, could cumulatively violate water quality standards or waste discharge requirements, or otherwise substantially degrade water quality.*

**FINDING:** For the reasons stated in the Draft EIR at page 4.8-19 to 4.8-20, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact C-HYD-1. Specifically, NHB Mitigation Measure HAZ-4 is feasible, and is hereby adopted and incorporated into the New Hospital and Renovation of Moffitt and Long Hospitals to mitigate significant effects from Impact C-HYD-1 to a less than significant level.

**Mitigation Measure HAZ-4:** See above.

**Rationale for Finding:** Compliance with the NPDES CGP requirements and implementation of Mitigation Measure HAZ-4 identified in Section 4.7 would prevent substantial degradation in water quality during construction of the NHB Project, and would be effective in ensuring that construction activities would result in a less than significant impact to water quality. Similarly, as demonstrated in Impacts HYD-1 through HYD-3 and Impact HYD-5, with the implementation of post-development BMP requirements, including LID measures, contained within the MRP, operation of the Project would not violate water quality standards or waste discharge requirements, or otherwise degrade surface or groundwater quality.

UCSF-proposed cumulative projects that would occur on or adjacent to the Project site include the BCH Oakland Infrastructure Improvements project, replacement of the existing fuel oil underground storage tank (UST) with an above ground fuel oil tank, and construction of the Administrative Support Building and related improvements. These cumulative projects could contribute construction related discharges of pollutants, and/or operational increases stormwater

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flows to the City and ACFCWD stormwater systems. These projects would similarly implement construction-phase controls and long-term stormwater management controls to ensure they would not result in a violation of water quality standards or waste discharge requirements, or otherwise degrade surface or groundwater quality.

Other reasonably foreseeable cumulative development within the Temescal Creek watershed would also contribute construction and/or operational pollutant discharges in stormwater flows to the City and ACFCWD stormwater systems. Similar to the Project, cumulative projects would be required to implement project-specific BMPs and comply with federal, State, as well as local regulations related to stormwater water quality. These regulations include, but are not limited to, the NPDES CGP and the City's Stormwater Management Ordinance. All cumulative projects that disturb more than one acre would include preparation and implementation of a SWPPP to reduce pollutants in stormwater and other non-point source runoff during construction. Cumulative projects that create or replace 5,000 square feet or more of impervious surfaces and have existing impervious surfaces greater than 50 percent must decrease the stormwater runoff rate and volume in accordance with the standards in the City's stormwater management requirements. These regulatory requirements also include LID design measures which must be implemented as part of each cumulative project design and are intended to minimize off-site discharges of stormwater and reduce pollutant loading.

With adherence to these existing regulatory requirements and implementation by UCSF of the proposed stormwater improvements under the Project, the Project's contribution to the potential cumulative impact related to a violation of water quality standards or waste discharge requirements would not be considerable.

(f) **Noise and Vibration**

- (i) **Impact NOI-3:** *Construction activities for the NHB Project and related improvements could result in generation of excessive groundborne vibration or groundborne noise levels.*

**FINDING:** For the reasons stated in the Draft EIR at page 4.10-43 to 4.10-46, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact NOI-3. Specifically, Mitigation Measure NOI-3 is feasible, and is hereby adopted and incorporated into the NHB to mitigate significant effects from Impact NOI-3 to a less than significant level.

**Mitigation Measure NOI-3: Assessment and Relocation/Retrofitting of Vibration-Sensitive Equipment**

UCSF shall evaluate the presence of vibration-sensitive equipment within 150 feet of construction and demolition areas. Any sensitive equipment shall be evaluated for the existing extent of vibration isolation and relocated, or vibration isolation shall be further embellished, as warranted. Based on available guidance (FTA, 2018), a performance standard of 65 VdB shall be implemented in lieu of any other available equipment-specific criterion.

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**Rationale for Finding:** The potential for human annoyance and sleep disturbance due to vibration are primarily a concern when substantial construction activities are proposed during the nighttime hours, which would not occur with implementation of Mitigation Measure NOI-1b: Construction Hours, above. Therefore, with mitigation, human annoyance and sleep disturbance impacts from vibration would be less than significant.

UCSF also operates vibration sensitive equipment in some of its existing buildings, such as magnetic resonance imaging (MRI) machines and electron microscopes and such equipment may be located within the campus site. Construction activities in close proximity to such equipment could generate vibration levels of 65 VdB or greater that could affect these operations, depending on the degree of vibration isolation designed into their systems. Therefore, there is a potential for a significant impact to vibration-sensitive equipment and Mitigation Measure NOI-3 would reduce such an impact to a less-than-significant level.

- (ii) *Impact C-NOI-1: Implementation of the NHB Project, combined with other concurrent construction projects in the project area, could generate a substantial temporary increase in ambient noise levels from construction activity in the vicinity of the project in excess of standards established in the local general plan or noise ordinance, or applicable standards of other agencies.*

**FINDING:** For the reasons stated in the Draft EIR at page 4.10-47 to 4.10-48, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact C-NOI-1. Specifically, Mitigation Measures NOI-1a, NOI-1b, and TRANS-5 are feasible and are hereby adopted and incorporated into the NHB to mitigate significant effects from Impact C-NOI-1 to a less than significant level.

**Mitigation Measure NOI-1a:** See below.

**Mitigation Measure NOI-1b:** See below.

**Mitigation Measure TRANS-5:** See below.

**Rationale for Finding:** There is one reasonably foreseeable off-site cumulative construction project in the Project vicinity: the City of Oakland's MLK Jr. Way Roadway Improvement Plan. This project would reduce the number of travel lanes from 3 to 2 in each direction and add protected bike lanes as well as repave MLK Jr. Way. Since the earliest this City roadway improvement project would start would be 2025, construction activities associated with this cumulative project could potentially overlap with Project construction. As indicated in Table 4.10-9, construction equipment associated with paving can generate noise levels of 77 to 85 dBA at 50 feet.

Construction activities for this project would be subject to the City of Oakland's Standard Conditions of Approval (SCA). Specifically, SCA 67 establishes limits on the hours and days of construction. SCA 68 requires project applicants to implement noise reduction measures to reduce

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noise impacts due to construction.

Other UCSF-planned cumulative projects within and/or adjacent to the campus site include the Administrative Support Building (ASB) Project, BCH Infrastructure Improvement Project, and the replacement of an underground storage tank. All of these projects would be subject to applicable SCAs identified in the CHRCO CMP Project FEIR and compliance with existing regulations. Consistent with the SCAs, during all construction activities, a 15-foot-high temporary noise barrier will be placed between the proposed construction site and receptor locations.

Implementation of the required City of Oakland SCAs and/or mitigation measures for the cumulative projects either within the campus site or Project vicinity would reduce noise from the individual projects. However, if construction activities for these other cumulative projects would require work during nighttime hours to avoid traffic impacts, most notably the City of Oakland's MLK Jr. Way Roadway Improvement Plan, then such a cumulative contribution could further exacerbate the significant and unavoidable impact of the Project with respect to work during extended or nighttime hours. However, Mitigation Measure TRANS-5, Construction Coordination and Monitoring Measures contains a measure that requires coordination with the City of Oakland Department of Transportation to ensure that the construction of the NHB Project and the City's MLK Jr. Way Complete Streets Paving Project, which are expected to overlap, do not conflict with each other, and minimize the potential combined effects of these construction projects on circulation for various travel modes. Hence, while the potential exists for cumulative projects to combine with the noise from the construction of the Project, mitigation measures would be in place to ensure that there would not be conflicts and would eliminate the potential for cumulative contributions to nighttime noise. Therefore, implementation of **Mitigation Measures NOI-1a, NOI-1b** and **TRANS-5** would serve to reduce the cumulative construction noise contributions to a less than significant level.

- (iii) ***Impact C-NOI-3: Implementation of the NHB Project, combined with cumulative construction in the project area, could result in generation of excessive groundborne vibration or groundborne noise levels.***

**FINDING:** For the reasons stated in the Draft EIR at page 4.10-48 to 4.10-49, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact C-NOI-3. Specifically, Mitigation Measure NOI-3 is feasible, and is hereby adopted and incorporated into the NHB to mitigate significant effects from Impact C-NOI-3 to a less than significant level.

**NHPH Mitigation Measure NOI-3:** See discussion above.

**Rationale for Finding:** Potential cumulative construction vibration impacts would be limited to other planned UCSF construction projects within the campus site. Architectural damage impacts to buildings in proximity to the Project site are not a concern in the cumulative scenario because the proposed Project is sufficiently distant from these cumulative projects so as to not cumulatively combine to result in architectural damage impacts. Consequently, cumulative vibration impacts of

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the Project would be similar to those analyzed above in Impact NOI-3 and would be less than significant with implementation of Mitigation Measure NOI-3.

(i) ***Transportation***

- (i) ***Impact TRANS-5: Construction of the NHB Project could temporarily impact travel conditions along sidewalks and roadways serving the campus site.***

**FINDING:** For the reasons stated in the Draft EIR at page 4.11-30 to 4.11-32, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact TRANS-5. Specifically, Mitigation Measure TRANS-5 is feasible, and is hereby adopted and incorporated into the New Hospital to mitigate significant effects from Impact TRANS-5 to a less than significant level.

**Mitigation Measure TRANS-5: Construction Coordination and Monitoring Measures**

In order to reduce potential conflicts between construction activities and pedestrians, bikes, buses, and autos during construction activities at the NHB Project site, UCSF shall require construction contractor(s) to coordinate with the relevant City of Oakland agencies to prepare Construction Transportation Management Plan to address the following during the major phases of project construction (e.g., demolition, construction of new building, or renovation of existing buildings):

- Construction Traffic Control Plan to identify construction truck routes, coordinate feasible measures to reduce traffic congestion, reduce potential traffic, bicycle, and transit disruption and pedestrian circulation effects, potential detours for motor vehicles, bicycles, and pedestrians if necessary, and location of off-site construction staging areas for materials and equipment if necessary.
  - Construction Worker Parking and Travel Management Plan to minimize parking demand and motor vehicle trips generated by construction workers and ensure that construction workers do not use the on-street parking in the nearby residential neighborhood. If parking demand for construction workers cannot be accommodated on-site, the Plan shall identify off-site parking facilities and if necessary, provide a shuttle service between the parking facility and the construction site.
  - Notification procedures for nearby residences and businesses and public safety personnel regarding construction activities, peak construction vehicle activities (e.g., concrete pours, excavation), and travel lane closures, via a newsletter, website, and/or regular construction update meetings with neighbors.
  - Coordination with the City of Oakland Department of Transportation to ensure that the final design and construction of the NHB Project and the City's MLK Jr. Way Complete Streets Paving Project, which are expected to overlap, do not conflict with each other, and minimize the potential combined effects of the two construction projects on circulation for various travel modes.
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- If necessary, make repair to damages to the public right-of way, including streets and sidewalks, caused by project construction within one week of the occurrence of the damage (or excessive wear), unless further damage/excessive wear may continue; in such case, repair shall occur prior to the completion of construction.

**Rationale for Finding:** The primary potential sources for transportation impacts related to construction activity are the closure of facilities (e.g., parking lane or lot) to provide construction staging, closures of travel lanes and/or sidewalks, truck trips associated with the delivery of construction materials, the off haul of demolition debris, excavated soil and construction wastes, and vehicle trips to and from the site by construction workers. These trips would have the potential to cause temporary disruptions to nearby streets, transit services, and pedestrian and bicycle facilities. Although construction activities for the NHB would be temporary, construction impacts would be considered potentially significant given the magnitude and duration of the construction and need for on-going coordination and monitoring. Implementation of Mitigation Measure TRANS-5 would reduce this impact to a less-than-significant level.

**3. Findings on Significant Environmental Impacts that Cannot Be Avoided or Reduced to a Less than Significant Level**

**FINDING:** Based on the issue area assessment in the EIR, the University has determined that the Project will have significant impacts in the resource areas discussed below, and that these impacts cannot be avoided or reduced despite the incorporation of all feasible mitigation measures. These findings are based on the discussion of impacts in the detailed issue impacts as set forth in Sections 4.1 (Aesthetics, Wind and Shadow) and 4.11 (Noise and Vibration) of the Draft EIR. For each significant and unavoidable impact identified below, the University has made a finding(s) pursuant to Public Resources Code § 21081. An explanation of the rationale for each finding is also presented below. The University finds these remaining significant impacts to be acceptable because the benefits of the Project outweigh the significant and unavoidable environmental impacts of these Project for the reasons set forth in the “Statement of Overriding Considerations” in Section III, below.

(a) ***Air Quality***

- (i) ***Impact C-AIR-1: The health risk from the NHB Project combined with health risk impacts from other sources in the Project vicinity would result in significant cumulative health risk impacts.***

**FINDING:** For the reasons stated in the Final EIR (Draft EIR at page 4.1-45 to 4.1-48), the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact C-AIR-1. Specifically, NHB Mitigation Measure C-AIR-1 is feasible, and is hereby adopted and incorporated into the NHB to mitigate significant effects from Impact C-AIR-1. However, even with implementation of this mitigation measure, significant unavoidable impacts will occur as described above. Therefore, the University

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finds that specific economic, legal, social, technological, or other considerations make it infeasible to reduce Impact C-AIR-1 to a less than significant level.

**NHB Mitigation Measure C-AIR-1: Clean Construction Equipment.**

- a) Electric engines shall be used for all equipment that is commercially available as plug-in or battery-electric equipment during each construction phase and activity. Portable equipment shall be powered by grid electricity if available. Electric equipment shall include, but not be limited to, concrete/industrial saws, sweepers/scrubbers, aerial lifts, welders, air compressors, fixed cranes, forklifts, and cement and mortar mixers, pressure washers, and pumps. To qualify for an exception, UCSF shall require construction contractors to provide evidence supporting the conclusion that electric equipment is not commercially available and shall use the next cleanest piece of off-road equipment in terms of DPM and PM2.5. “Commercially available” is defined as either: (1) being used for other large-scale projects in the region occurring at the same time; (2) can be obtained without significant delays to critical-path timing of construction; or (3) available within the larger northern California region. UCSF shall be responsible for the final determination of commercial availability, based on all the facts and circumstances at the time the determination is made. For UCSF to make a determination that such equipment is commercially unavailable, the operator must submit documentation from a minimum of three (3) electric off-road equipment dealers demonstrating the inability to obtain the required electric equipment needed within 6 months.
  
- b) The construction contractor shall ensure that all diesel off-road equipment shall have engines that meet the Tier 4 Final off-road emission standards, as certified by CARB, except as provided for in this section. This requirement shall be verified through submittal of an equipment inventory that includes the following information:  
(1) Type of Equipment, (2) Engine Year and Age, (3) Number of Years Since Rebuild of Engine (if applicable), (4) Type of Fuel Used, (5) Engine HP, (6) Verified Diesel Emission Control Strategy (VDECS) information if applicable and other related equipment data. A Certification Statement is also required to be made by the contractor for documentation of compliance and for future review by the BAAQMD as necessary. The Certification Statement shall state that the contractor agrees to compliance and acknowledges that a violation of this requirement shall constitute a material breach of contract.

The requirement for Tier 4 Final equipment may be waived only under the following unusual circumstances: if a particular piece of off-road equipment with Tier 4 Final standards is technically not feasible or not commercially available; the equipment would not produce desired emissions reduction due to expected operating modes; installation of the equipment would create a safety hazard or impaired visibility for the operator; or there is a compelling emergency need to use other alternate off-road equipment. For purposes of this mitigation measure, “commercially available” shall mean the availability of Tier 4 Final engines similar to the availability for other large- scale construction projects in the region occurring at the same time and taking into consideration factors such as (i) potential significant delays to critical-path timing of construction for the project and (ii) geographic

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proximity to the project site of Tier 4 Final equipment. Sufficient documentation must be provided when seeking any waiver described above. If the waiver is granted, the contractor must use the next cleanest piece of off-road equipment that is commercially available, or another alternative that results in comparable reductions of DPM and PM<sub>2.5</sub> emissions.

**Rationale for Finding:** Existing background health risks without the Project already exceed the BAAQMD's cumulative thresholds for incremental lifetime cancer risk and annual average PM<sub>2.5</sub> concentration of 100 in one million and 0.8 µg/m<sup>3</sup>, respectively. As the Project's health risks, when combined with background health risks, would exceed the BAAQMD's cumulative thresholds for incremental lifetime cancer risk and annual average PM<sub>2.5</sub> concentration, the cumulative impact would be significant. It should be noted that, as shown in Table 4.1-12, the Project's contribution to the cumulative impact at the off-site residential MEI is a maximum cancer risk level of 7.5 per million and 0.04 µg/m<sup>3</sup> in annual average PM<sub>2.5</sub> concentration, both of which are below the Project-level health risk thresholds. Therefore, the Project's contribution to the cumulative health risk would be relatively minor. Nevertheless, Mitigation Measure C-AIR-1: Clean Construction Equipment has been identified to reduce the Project's contribution to the cumulative health risk.

Implementation of Mitigation Measure C-AIR-1 would require the use of clean construction equipment which would substantially reduce the Project's contribution to cumulative health risks. Proposed back-up power generators would already meet tier 4 engine standards. Additional mitigation measures are not available. As shown in Table 4.1-13 of the Draft EIR, even with mitigation, the combined health risk impact of the Project and background sources in the area would exceed the BAAQMD's cumulative thresholds for incremental lifetime cancer risk and annual average PM<sub>2.5</sub> concentration. Therefore, this impact would remain significant and unavoidable.

(b) ***Cultural Resources and Tribal Cultural Resources***

- (i) ***Impact CUL-1: Implementation of the NHB Project would result in a substantial adverse change in the significance of known historical resources.***

**FINDING:** For the reasons stated in the Draft EIR at page 4.3-15 to 4.3-18, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact CUL-1. Specifically, Mitigation Measures CUL-1a and CUL-1b are feasible and are hereby adopted and incorporated into the NHB to mitigate significant effects from Impact CUL-1. However, even with implementation of these mitigation measures, significant unavoidable impacts will occur as described above. Therefore, the University finds that specific economic, legal, social, technological, or other considerations make it infeasible to reduce Impact CUL-1a to a less than significant level.

**Mitigation Measure CUL-1a: Documentation of the A/B Wing**

Prior to any demolition work initiated at the A/B Wing, UCSF shall ensure that a qualified architectural historian who meets the Secretary of the Interior's Professional Qualification Standards thoroughly documents the building and associated landscaping and setting. Documentation shall include still photography and a written documentary record of the

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building to the National Park Service's standards of the Historic American Buildings Survey (HABS), including accurate scaled mapping and architectural descriptions. If available, scaled architectural plans will also be included. Photographs include large-format (4"x5") black-and-white negatives and 8"x10" enlargements. Digital photography may be substituted for large-format negative photography if archived locally. The record shall be accompanied by a report containing site-specific history and appropriate contextual information relying as much as possible on previous documentation. Copies of the records shall be submitted to the Northwest Information Center at Sonoma State University and the Oakland History Center at the Oakland Public Library.

**Mitigation Measure CUL-1b: Public Interpretation and Salvage Plan for the A/B Wing**

Prior to any demolition work that would remove character-defining features of the A/B Wing, UCSF shall prepare a Salvage Plan for those components of the building suitable for salvage and/or reuse. A Salvage Plan shall be prepared by a qualified architectural historian or historic architect who meets the Secretary of the Interior's Professional Qualification Standards and presented to UCSF Planning staff. This would be a feasibility study to determine the structural integrity of the character-defining features associated with the A/B Wing, identify environmental factors that may require remediation prior to salvage (e.g., lead paint, chemicals, etc.), and present potential new uses of the salvaged features. The Salvage Plan will identify opportunities for UCSF to reuse character-defining features in the NHB Project.

Prior to any demolition activities that would remove character-defining features of, or demolish, an individual historical resource on the project site, UCSF shall prepare a plan for interpretive displays. The specific location, media, and other characteristics of such interpretive display(s) shall be included in this proposal. The historic interpretation plan shall be prepared in coordination with an architectural historian or historian who meets the Secretary of the Interior's Professional Qualification Standards and an exhibit designer or landscape architect with historical interpretation design experience. Interpretive display(s) shall document the individually eligible resource to be demolished. The interpretative plan should also explore contributing to digital platforms that are publicly accessible. A proposal describing the general parameters of the interpretive program and the substance, media, and other elements of such interpretive display shall be approved by UCSF Planning staff prior to commencement of any demolition activities.

Following any demolition activities within the project site, UCSF shall provide within publicly accessible areas of the project site a permanent display(s) of interpretive materials concerning the history and architectural features of the individual historical resources.

**Rationale for Finding:** UCSF has concluded that the A/B and B/C Wings are obsolete and cannot reasonably be retrofitted and renovated to meet modern requirements for a clinical care facility. The structural layout of the buildings, floor plate sizes, ceiling heights, and building infrastructure systems are such that it would be infeasible to retain, retrofit, and reuse the buildings for acute

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care. Current seismic requirements, technologies and patient care standards require a modern acute care facility that simply cannot be accommodated in the A/B and B/C Wings. Further, maintaining the A/B and B/C Wings in place constrains the site and compromises the ability of UCSF BCH Oakland to build a contemporary high-performing hospital for the community that meets the Project's fundamental and development objectives. While the impact cannot be mitigated to a less-than-significant level, implementation of Mitigation Measures CUL-1a and CUL-1b would require that UCSF prepare Historic American Buildings Survey (HABS)-like documentation of the A/B Wing and its associated landscape features prior to demolition and develop a public interpretation and salvage plan. Implementation of these measures would lessen the severity of the Project's significant impact on a historical resource but would not reduce the impact to a less-than-significant level.

Additionally, UCSF has pledged to voluntarily implement certain measures that would incorporate enhancements that are sensitive to the loss of historical resources resulting from the Project as follows:

- **Magnolia Tree Propagation.** UCSF shall continue to contract with a qualified tree company to take seeds or cuttings from the existing Southern magnolia. The contracted firm will propagate these seeds or cuttings and continue to grow them until they reach a typical landscape tree size, 24" box minimum. Numerous offspring trees have already been established.
  - **Magnolia Tree Replacement.** Within the constraints of the site plan, UCSF will incorporate a new magnolia tree into the site plan of the Project, as close as possible to the historic location of the existing magnolia tree (#82). Possible locations to be considered include near a retaining wall, and adjacent to Martin Luther King Jr. Way. UCSF will select the largest, good-quality, boxed specimen, and the tree company shall grow the tree for five more years. The tree will be installed on the BCH Oakland campus site. UCSF will also review the feasibility of planting these trees at the Dover Street entrance where space may be limited.
  - **Magnolia Tree Plaque.** Prior to Project completion, UCSF will install a permanent, high-quality plaque or simple interpretive panel near the replacement magnolia tree that includes information about the magnolia tree. It will be similar to the plaque that is currently located under the existing magnolia tree (the existing plaque is not historic and does not need to be retained), and it shall clearly state that the tree is a new replacement tree in order to avoid potential false historicism. The content of the plaque/panel will feature the tree's historic relation to the site and as the source of inspiration for the nickname "the Branches," which is what the A/B Wing was called during the 1920s and 1930s.
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(c) **Noise and Vibration**

- (i) **Impact NOI-1:** *Construction activities under the NHB Project would generate a substantial temporary increase in ambient noise levels in the vicinity of the Project site in excess of standards established in the local general plan or noise ordinance, or applicable standards of other agencies.*

**FINDING:** For the reasons stated in the Draft EIR at page 4.10-21 to 4.10-27, the University finds that changes or alterations have been incorporated into the NHB which mitigate significant effects on the environment from Impact NOI-1. Specifically, Mitigation Measures NOI-1a, NOI-1b, NOI-1c, and NOI-1d are feasible, and are hereby adopted and incorporated into the NHB to mitigate significant effects from Impact NOI-1. However, even with implementation of these mitigation measures, significant unavoidable impacts will occur as described above. Therefore, the University finds that specific economic, legal, social, technological, or other considerations make it infeasible to reduce Impact NOI-1 to a less than significant level.

**Mitigation Measure NOI-1a: Construction Noise Control Measures**

UCSF contractors shall employ site-specific noise attenuation measures during construction of the Project to reduce the generation of construction noise. These measures shall be included in a Noise Control Plan that shall be submitted for review and approval by UCSF to ensure that construction noise is consistent with the standards set forth in the City's Noise Ordinance. Measures specified in the Noise Control Plan and implemented during project construction shall include, at a minimum, the following noise control strategies:

- Equipment and trucks used for construction shall use the best available noise control techniques (e.g., improved mufflers, equipment redesign, use of intake silencers, ducts, engine enclosures, and acoustically attenuating shields or shrouds).
  - Impact tools (e.g., jack hammers, pavement breakers, and rock drills) used for construction shall be hydraulically or electrically powered wherever possible to avoid noise associated with compressed air exhaust from pneumatically powered tools. Where use of pneumatic tools is unavoidable, an exhaust muffler on the compressed air exhaust shall be used; this muffler can lower noise levels from the exhaust by up to about 10 dBA. External jackets on the tools themselves shall be used where feasible; this could achieve a reduction of 5 dBA. Quieter procedures, such as the use of drills rather than impact tools, shall be used where feasible.
  - Stationary noise sources shall be located as far from adjacent receptors as possible, and they shall be muffled and enclosed within temporary sheds, incorporate insulation barriers, or include other measures.
  - Shield staging areas where adjacent sensitive receptors have direct line-of-sight and are within 200 feet of loading and delivery activities. Shielding may consist of plywood fencing with no gaps or acoustical paneling erected in K-rails.
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**Mitigation Measure NOI-1b: Construction Hours**

Construction hours shall be restricted to the hours listed in the table below. However, in rare circumstances, work may need to occur outside of these work hour limits. For example, there may be times when heavy machinery must be delivered outside the extended hours (during times of low traffic); or concrete pours must occur outside the extended hours. In such cases, UCSF Community and Government Relations will receive advance notice from the project manager, at least one week in advance as feasible, and will engage the community to identify measures to minimize potential impacts. These measures may include, but not be limited to, restricting work to smaller time windows, condensing the overall duration of nighttime work to the degree feasible, and erecting temporary barriers to shield the short-term nighttime activity.

| <b>Construction Hours</b> |                                     |                                   |                               |                                   |
|---------------------------|-------------------------------------|-----------------------------------|-------------------------------|-----------------------------------|
|                           | <b>“Not Noisy” Work<sup>a</sup></b> |                                   | <b>Noisy Work<sup>a</sup></b> |                                   |
|                           | <b>Regular hours</b>                | <b>Extended hours<sup>b</sup></b> | <b>Regular hours</b>          | <b>Extended hours<sup>b</sup></b> |
| <b>Monday - Friday</b>    | 7:00 AM to 5:00 PM                  | 5:00 PM to 8:00 PM                | 8:00 AM to 5:00 PM            |                                   |
| <b>Saturday</b>           |                                     | 8:00 AM to 5:00 PM                |                               | 9:00 AM to 4:00 PM                |
| <b>Sunday</b>             |                                     | 8:00 AM to 5:00 PM                |                               |                                   |

NOTES:

- a. “Not Noisy” work = 80 decibels or less at 100 feet; “Noisy” work = more than 80 decibels at 100 feet.
- b. Extended hours to be considered by UCSF Community and Government Relations with advance notice from the project manager.

**Mitigation Measure NOI-1c: Construction Noise Complaints**

UCSF shall establish a formal set of procedures for responding to and tracking complaints received pertaining to construction noise and shall implement the procedures during construction. Procedures shall be established prior to commencement of construction. At a minimum, the procedures shall include:

- Designation of an on-site construction complaint and enforcement manager for the project;
- A large on-site sign near the public right-of-way containing permitted construction days/hours, complaint procedures, and phone numbers for the project complaint manager;
- Protocols for receiving, responding to, and tracking received complaints; and
- Maintenance of a complaint log that records received complaints and how complaints were addressed.
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**Mitigation Measure NOI-1d: Pile-Installation Noise-Reducing Techniques**

Noise-reducing pile-installation techniques shall be employed during project construction. These techniques shall include:

- Installing cast-in-place concrete piles. Noise from auger drilling is 17 dBA less than an impact pile driver.

- Vibrating piles into place, where feasible.
- Implement “quiet” pile-installation technology (such as pre-drilling of piles).

**Mitigation Measure TRANS-5:** See above.

**Rationale for Finding:** Mitigation Measure NOI-1a, which is detailed above, would require the preparation and implementation of a Noise Control Plan to ensure that construction noise is reduced consistent with UCSF standard construction hours which are more stringent than the standards set forth in the City’s noise ordinance established by Section 17.120.050 of the Oakland Municipal Code. Mitigation Measure NOI-1c would establish a formal set of procedures for responding to and tracking construction noise complaints. Mitigation Measure NOI-1d would require implementation of noise-reducing pile installation techniques during Project construction. Implementation of Mitigation Measures NOI-1a, NOI-1b and NOI-1c would reduce noise levels associated with construction activities. Furthermore, as discussed in Mitigation Measure TRANS-5 in Section 4.11, *Transportation*, the construction contractor(s) would be required to coordinate with the relevant City of Oakland agencies to prepare a Construction Transportation Management Plan that would be implemented to reduce temporary construction related conflicts.

Mitigation Measures NOI-1a, NOI-1b and NOI-1d would reduce the severity of noise generated by demolition and construction activities and reduce the potential annoyance to nearby residents and others who could be disturbed by these activities. Implementation of Mitigation Measures NOI-1a and NOI-1b is projected to reduce noise levels associated with demolition and construction activities for Project construction by 5 to 10 dBA, while Mitigation Measure NOI-1d would reduce noise levels associated with pile installation activities by 17 dBA. These reductions would be sufficient for construction activities of the proposed Project to achieve the City of Oakland’s 65 dBA daytime noise standard. However, in rare circumstances work beyond the 7:00 PM daytime construction workday restriction may still exceed existing ambient levels and therefore, continue to result in nighttime noise levels that would exceed the standards of the City’s noise ordinance and the Project’s construction noise impact would be significant and unavoidable with mitigation.

## **E. FINDINGS ON PROJECT ALTERNATIVES**

### **1. Alternatives Screened Out from Detailed Consideration in the EIR**

The University finds that all of the alternatives eliminated from further consideration in the Draft EIR are infeasible, would not meet most project objectives and/or would not reduce or avoid any of the significant effects of the proposed project, for the reasons detailed in Section 6.4 of the Draft EIR. These alternatives include the following: (1) Locate Proposed Parking Structure on Annex Parking Lot; (2) Helistop Alternate Location; and (3) Off-Site Alternative.

The potential Locate Proposed Parking Structure on Annex Parking Lot alternative was screened from further consideration for a number of reasons. To begin, the residential neighborhood to the west of the parcel consists of 1- and 2-story single-family residential uses, and a proposed 2-level

parking structure could be objectionable to the immediate neighbors. Furthermore, existing surface parking on the annex parking lot would need to be replaced. The most likely option to accomplish this would be to add the displaced parking to the proposed parking structure, if financially feasible, thus increasing its height to a 4-level parking structure, which could make it further objectionable to immediate neighbors. If the existing parking was not replaced, this would cause employees to search for parking in surrounding neighborhoods, thus resulting in increased competition with neighbors for limited on-street parking. In addition, placement of the parking garage on this parking lot would result in all pedestrians, both visitors and staff, using the at-grade crossings across MLK Jr. Way which would not be desirable. Note that a pedestrian bridge was considered and rejected in the CHRCO CMP Project FEIR as the BART tracks make a such crossing infeasible. Furthermore, UCSF 2014 LRDP has a policy to prioritize parking for ED and health workers. Locating the parking garage at the annex parking lot site would locate the parking further away and would not be consistent with that policy. This alternative would also lead to all vehicles turning on to 51st and 47th Streets to access the parking structure, and thus increasing traffic on neighborhood streets. Finally, this alternative would remove the 175 existing parking spaces during the construction of the garage, resulting in a shortfall of parking at the campus site for the duration of the garage construction.

The Helistop Alternate Location alternative is an alternative to place the helistop off-site to reduce noise impacts to the surrounding community. Both off-site and on-site (i.e., a location somewhere other than the proposed location on top of the proposed New Hospital or proposed parking structure) were rejected from further analysis for the reasons stated below. All of the existing hospitals in the Oakland area were contacted and none of them currently have an on-site helipad that could be used in place of the proposed helistop. The nearest hospitals with a helipad include John Muir Medical Center in Walnut Creek and Eden Medical Center in Castro Valley. The use of these existing helipads or the facilities at Oakland International Airport, was rejected from further analysis because for the hospital to provide adequate care, the helicopter landing location needs to be as close as possible to emergency facilities as patients arriving by helicopter are typically in critical condition, and the use of these distant facilities for this function would result in delays due to travel time and congestion on the area freeways, especially during commute hours. Any location for the helistop that is not on the same site as the emergency care facilities would add additional ground transport time and increase the risks to the patient. In addition, UCSF BCH Oakland is the Bay Area's only California State-designated Level 1 pediatric trauma center. Removal of the helistop from the Project site would result in the inability of this facility to operate in this capacity. Relocating the helistop to another parcel on the UCSF BCH Oakland campus site was also rejected from further analysis based on current site constraints and concerns related to increased noise impacts to the community. The only undeveloped site on the campus site where it would be feasible to relocate the helistop would be on the existing annex parking lot located across MLK Jr. Way from the Project site. As discussed above, a residential neighborhood is located directly to the west of this parcel, and the impact of noise generated by helistop operations on this site on nearby residences would be more severe than under the proposed Project.

A few potential alternatives were considered for an off-site location for continued operation and expansion of hospital facilities. Considerations included potential expansion or relocation of wards/patient rooms to UCSF Benioff Children's Hospital on the UCSF Mission Bay campus site

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or to locations at UC Berkeley. An off-site alternative to develop the proposed Project at the UCSF BCH Mission Bay campus site was rejected for further analysis for the following reasons. The UCSF Mission Bay campus site does not have adequate space to accommodate UCSF BCH Oakland's program. UCSF's 2014 LRDP envisioned Phase 2 of the Medical Center at Mission Bay to accommodate future demand for adult and children's inpatient services there. The NHB Project, if located at Mission Bay, would consume nearly all of the available capacity for future expansion of adult and children's inpatient service in San Francisco. In addition, the proposed Project is meant to serve the pediatric emergency needs of children in the East Bay and placing the proposed Project across the bay would defeat this fundamental purpose. There are no locations at UC Berkeley that can accommodate UCSF BCH Oakland and that campus is already impacted in finding space for both educational programming and student housing. Moreover, locating the NHB Project away from the other services provided by the existing UCSF BCH Oakland buildings would not meet any of the project's fundamental objectives.

## 2. Alternatives Analyzed in the EIR

In compliance with CEQA and the CEQA Guidelines, the EIR evaluated a reasonable range of alternatives to the Project. The EIR's analysis examined the potential feasibility of each alternative, its environmental effects, and its ability to meet the project objectives. The alternatives analysis included analysis of a no-project alternative and identified the environmentally superior alternative. Section 6.3 of the Draft EIR evaluated four alternatives to the Project: Alternative 1: No Project Alternative, consisting of Alternative 1: No Project, Alternative 2: New Hospital Project per the 2015 CHRCO CMP; Alternative 3: Modified Hospital Design Project; and Alternative 4: Reduced Project.

Brief summaries of these alternatives and findings regarding these alternatives are provided below.

### (a) *Alternative 1: No Project Alternative*

The No Project Alternative assumes that the proposed Project, which includes a 282,000 gross square foot (gsf) new hospital building, a 103,180 gsf new parking structure with a rooftop helistop, a utility yard adjacent to the parking structure, a 5,000 gsf site support structure, 11,800 gsf of building renovations, and related improvements, would not be constructed, and none of the existing buildings on the Project site would be demolished. State law (SB 1953) requires that the existing inpatient facilities that are non-compliant (A/B and B/C Wings) undergo seismic retrofit if their use as inpatient facilities is to be continued. UCSF has determined that the A/B and B/C Wings cannot be retrofitted to accommodate patient care in a manner that would meet the California Department of Health Care Access and Information (HCAI) seismic classifications. As indicated in Chapter 3, *Project Description*, under *Project Need*, UCSF has concluded that the A/B and B/C Wings are obsolete and cannot reasonably be retrofitted and renovated to meet modern requirements for a clinical care facility.

It is therefore assumed that under the No Project alternative, seismic retrofit in compliance with SB 1953 would not be completed and the existing acute care functions currently located in A/B and B/C Wings would be relocated elsewhere on the campus site or off-site. Further, UCSF has determined that it would also not be cost effective to complete a seismic retrofit of A/B and B/C Wings in compliance with the UC *Seismic Safety Policy*. Therefore, such a seismic retrofit would



not occur, and the spaces would not be backfilled with non-acute care uses. Due to the potential for these buildings to experience structural damage as a result of a major earthquake, the vacated buildings would be modified to structurally separate from them from adjoining buildings and would be mothballed. It is assumed any minor exterior modifications to the A/B Wing would be conducted in compliance with the Secretary of the Interior's Standards for the Treatment of Historic Properties (Standards), as applicable.

**FINDING:** Pursuant to Public Resources Code section 21081(a)(3) and CEQA Guidelines section 15091(a)(3), the University finds that the specific economic, legal, social, technological, or other considerations, including failure to meet project objectives, render Alternative 1: No Project Alternative infeasible. While this alternative would avoid significant and unavoidable project impacts, including cumulative health risk impacts associated with the emission of toxic air contaminants (TACs), impacts to cultural resources, and construction- and demolition- generated noise effects, and it would not achieve any of the fundamental objectives for the proposed Project, including modernizing the aging UCSF BCH Oakland campus to maintain and enhance its place as a premier children's hospital, educational, research, and clinical institution, and as a nationally recognized teaching hospital; and address challenges that affect the long-term viability of the institution. Furthermore, this alternative would not serve to meet the fundamental objectives of meeting State seismic requirements for hospitals (SB 1953); maintaining UCSF BCH Oakland's designation as the Bay Area's Level I pediatric trauma center; addressing the existing shortage of capacity and access to pediatric care; addressing the current unmet need for adolescent mental health care and services; providing inpatient beds and associated facilities for behavioral health services; optimizing operational activities and maintaining critical adjacencies with other clinical facilities on the site, and optimizing spatial layout to enhance functionality and efficiency. Similarly, this alternative would not achieve any of the proposed Project's development objectives for a new inpatient facility, including developing a new inpatient facility that has sufficient space to accommodate modern regulatory requirements and industry standards, and patient satisfaction requirements of, contemporary hospitals; and has sufficient space to accommodate modern technology. Furthermore, this alternative would not meet the Project's development objectives to develop spaces for clinical and translational research and learning in or adjacent to clinical areas where patients are located. This alternative would also not optimize the existing Patient Tower by making non-structural performance improvements and renovating it to continue to provide inpatient beds and necessary clinical and support functions. Lastly, this alternative would not develop a parking structure to meet the parking needs of essential healthcare providers, other staff, or patients and visitors. The University therefore rejects this alternative as impractical and infeasible for the reasons listed above and as stated in the Final EIR. (Draft EIR at Section 6.3.1).

(b) *Alternative 2: New Hospital Project per the 2015 CHRCO CMP*

This alternative represents a hospital project on the Project site that would be similar to that previously proposed to be developed as part of the 2015 Children's Hospital and Research Center Oakland (CHRCO) Campus Master Plan (CMP) and analyzed in the CHRCO CMP Project FEIR for its environmental impacts. Under this alternative, the same total number of inpatient beds (210) would be provided at the campus site as under the Project. However, less existing building space would be demolished, and a smaller amount of new building space would be constructed, under

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this alternative compared to the Project. Notably, this alternative would not demolish the A/B Wing that is proposed to be demolished under the Project, although, as indicated in Chapter 3, *Project Description*, under *Project Need*, UCSF has concluded that the A/B and B/C Wings are obsolete and cannot reasonably be retrofitted and renovated to meet modern requirements for a clinical care facility nor used for non-acute care services.

The existing A/B Wing and loading dock, both proposed to be removed under the Project, would be retained under this alternative. Due to the potential for the A/B Wing to experience structural damage as a result of a major earthquake, the vacated building would be modified to structurally separate it from adjoining buildings and would be mothballed. It is assumed any minor exterior modifications to the A/B Wing would be conducted in compliance with the Secretary of the Interior's Standards, as applicable.

Demolition under this alternative would include the B/C Wing, Bruce Lyons Memorial Research Laboratory and Bruce Lyon Addition, remaining on-site trailers, and existing helistop structure, and relocation off-site of the MRI trailer, which would together amount to 64,883 gsf of space. This would be approximately 41 percent less than the 110,697 gsf of existing building space and structures that would be demolished or relocated under the proposed Project.

**FINDING:** Pursuant to Public Resources Code section 21081(a)(3) and CEQA Guidelines section 15091(a)(3), the University finds that the specific economic, legal, social, technological, or other considerations, including failure to meet project objectives, render Alternative 2: New Hospital Project per the 2015 CHRCO CMP infeasible. The environmental conditions would be essentially similar to those described for the campus site in the 2015 CHRCO CMP Project FEIR and this alternative would have some lesser environmental impact as compared to the proposed NHB. For instance, this alternative would avoid significant and unavoidable project impacts including cultural resource impacts. However, significant and unavoidable cumulative health risk impacts associated with the construction and operation of the Project would still occur under this alternative as the reduction in emissions of TACs under this alternative would not be enough to reduce the impact to a less-than-significant level. Construction noise impacts would also remain significant and unavoidable. With respect to project objectives, this alternative would achieve some fundamental objectives, such as meeting the State seismic requirements for new hospitals SB 1953 and maintaining the hospital's designation as the Bay Area's Level I pediatric trauma center with continued emergency service access via helicopter. However, because space requirements for modern hospitals have increased since approval of the 2015 CHRCO CMP, this alternative would not fully meet many of the other fundamental objectives of the proposed Project, including the need to modernize the campus to address challenges of undersized and inefficient facilities that affect the long-term viability of the institution; address the existing shortage of capacity and access to pediatric care; address the current unmet demand for adolescent mental health care services; and adequately support ED patient volumes. It would not meet the objective of developing a new hospital that is optimized in its spatial layout to enhance functionality in terms of workflow and wayfinding, and efficiency so as to not increase operational costs, because the new hospital would not be connected to the Ford D&T Building, one of the two existing inpatient facilities.

With respect to the development objectives, this alternative would optimize the existing Patient Tower by making non-structural performance improvements and renovating it to continue to

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provide inpatient beds and necessary clinical and support functions; and develop a parking structure to meet the parking needs of essential healthcare providers, other staff, or patients and visitors. However, this alternative would not develop a new inpatient facility that has sufficient space to accommodate modern regulatory requirements and industry standards and patient satisfaction requirements of contemporary hospitals; and accommodate modern technology. The University therefore rejects this alternative as impractical and infeasible for the reasons listed above and as stated in the Final EIR. (Draft EIR at Section 6.3.2).

(c) *Alternative 3: Modified Hospital Design Project*

Under this alternative, the proposed new hospital building would be redesigned, such that the A/B Wing would be retained, although, as indicated in Chapter 3, *Project Description*, under *Project Need*, UCSF has concluded that the A/B and B/C Wings are obsolete and cannot reasonably be retrofitted and renovated to meet modern requirements for a clinical care facility nor retrofitted for non-clinical uses. This alternative assumes the same approximate amount of new building space (i.e., 390,180 gsf, when accounting for new hospital building, site support structure and parking structure) would be developed on the Project site. However, because the area occupied by the A/B Wing would not be used for the construction of the new hospital, the height of the proposed new hospital building would be increased to provide the needed hospital space within a smaller building footprint (i.e., an increase of 3 stories), and an additional mechanical floor would be needed for the air handling units (AHU) that would serve the lower levels which would not be able to accommodate air handling equipment due to the narrow building footprint. Due to the smaller footprint of this alternative, two important departments, the Emergency Department and Operating Suite, would be required to be split across two floors. The splitting of these departments across two floors would require duplicate support spaces to be built. In order to provide the duplicate support spaces on two floors for these departments without increasing building size and construction costs, space planned for other programs would need to be reduced under this alternative. The total number of inpatient beds (210) that would be provided at the Project site under this alternative would be the same as under the proposed Project.

**FINDING:** Pursuant to Public Resources Code section 21081(a)(3) and CEQA Guidelines section 15091(a)(3), the University finds that the specific economic, legal, social, technological, or other considerations, including failure to meet project objectives, render Alternative 3: Modified Hospital Design Project infeasible. This alternative would result in the same amount of new development on the Project site as the Project, and thus emissions of criteria pollutants and TACs during construction and operation as well as construction noise under this alternative would remain the same as under the proposed Project. This alternative would avoid the significant and unavoidable impacts to cultural resources associated with the demolition of the A/B wing. While this alternative would achieve many of the fundamental objectives of the proposed Project, such as modernizing the aging UCSF BCH Oakland campus to maintain and enhance its place as a premier children's hospital, educational, research, and clinical institution and maintaining its place as a nationally recognized teaching hospital, it would not meet the fundamental objective of addressing the current unmet need for code compliant inpatient adolescent mental health care and services. It would also not meet the objective of developing a new hospital that is optimized in its spatial layout to enhance functionality in terms of workflow and wayfinding, and efficiency so as to not increase operational

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costs, because the new hospital under this alternative would not be directly connected to the Ford D&T Building, one of the two existing inpatient facilities. This alternative would also not meet several of the development objectives of the proposed Project due to the smaller hospital building floorplate which would result in space inefficiencies. Specifically, as a result of the smaller footprint of this alternative, two important departments would be required to be split across two floors. These departments are the ED (currently slated for Level 1) and the Operating Suite (currently slated for Level 3). The splitting of these departments across two floors would require duplicate support spaces to be built out and staffed on multiple floors, driving up both the cost of construction as well as ongoing costs to operate. More importantly, the splitting of these departments would make them less efficient to operate and not recommended from a patient care and best practice perspective. To provide the duplicate support spaces on two floors for ED and Operating Suite without increasing building size and construction costs, space planned for other programs would need to be reduced under this alternative. The proposed NICU floor would need to be reduced to accommodate the narrower floorplate which would result in the need to shift to more shared rooms rather than private rooms. Provision of private rooms for the NICU department is a key project goal and best practice to improve patient outcomes and better support families and staff. Behavioral Health would also be compromised with the narrower footprint, which likely would not enable this floor to include the code required outdoor space as part of its program. Other impacts of this narrowed footprint would be that the new hospital would likely only be able to connect to the existing Patient Tower at Level 1 rather than Levels 1 through 3 as planned under the proposed Project and direct connections to the Ford D&T Building would not be feasible. This would result in less efficient travel through the facility as a whole for both people and materials and create wayfinding challenges. In fact, hospital operations would become infeasible with the loss of connections on Levels 2 and 3. Therefore, the alternative would not meet the objectives of siting and developing a new inpatient facility in a way that optimizes operational activities with other clinical facilities on the site; developing a new inpatient facility that is optimized in its spatial layout to enhance functionality and efficiency; and developing spaces for clinical and translational research and learning in or adjacent to clinical areas where patients are located. The University therefore rejects this alternative as impractical and infeasible for the reasons listed above and as stated in the Final EIR. (Draft EIR at Section 6.3.3; Final EIR at Section 6.3.3).

(d) ***Alternative 4: Reduced Project***

Under this alternative, the proposed Project would be reduced by approximately one-third in development size. As such, it is assumed that the overall size of the new hospital building under this alternative would be reduced by one-third or about 94,000 gsf, to approximately 188,000 gsf (compared to the approximately 282,000 gsf new hospital building proposed under the Project). It is also assumed that the new hospital building under this alternative would maintain approximately the same building footprint as that proposed under the Project, and the new hospital building would be reduced by approximately two floors.

It is further assumed all hospital services with the smaller new hospital building, including inpatient and support, diagnostic and treatment, clinical support and general support services associated with the new hospital building under this alternative would be reduced proportionally. As such, the proposed increase in inpatient beds would be reduced by one-third, amounting to an

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increase of 26 inpatient beds over existing conditions, for a total of approximately 203 inpatient beds at the Project site under this alternative (compared to 210 inpatient beds under the proposed Project).

The parking structure developed under this alternative would also be reduced by approximately one-third in size, with up to 178 parking stalls (as opposed to up to 270 parking stalls under the Project). It is also anticipated that under this alternative, the parking structure would be reduced by one floor (to 4 stories). However, the helistop structure would be constructed to provide a similar landing height as that proposed under the Project. It is assumed that the site support structure under this alternative would also be reduced in size by approximately one-third. All existing building and structures proposed to be demolished (Loading Dock, A/B Wing, B/C Wing, Bruce Lyons Memorial Research Laboratory and Bruce Lyon Addition, on-site trailers, and existing helistop structure) or relocated (MRI Trailer) under this alternative would be the same as under the Project.

**FINDING:** Pursuant to Public Resources Code section 21081(a)(3) and CEQA Guidelines section 15091(a)(3), the University finds that the specific economic, legal, social, technological, or other considerations, including failure to meet project objectives, render Alternative 4: Reduced Project alternative infeasible. Although this alternative would involve less overall development, and thus the significant cumulative health risk impacts associated with the construction and operation of the Project would be proportionally reduced, these impacts would still be significant, and the same mitigation measures would be required. The cumulative impact would still remain significant and unavoidable. In addition, the same demolition would be required, including demolition of the A/B Wing, and, as such, impacts to cultural resources would remain significant and unavoidable. Construction noise impacts would remain significant and unavoidable as well. This alternative would modernize the aging UCSF BCH Oakland campus, although would provide one fifth less new building space than the Project. As such, this alternative would only partially meet the fundamental objectives of the Project as it relates to maintaining and enhancing UCSF BCH Oakland's place as a premier children's hospital, educational, research, and clinical institution; maintaining its place as a nationally recognized teaching hospital; and addressing challenges that affect the long-term viability of the institution. This alternative would achieve the fundamental objectives of meeting State seismic requirements for hospitals (SB 1953) maintaining UCSF BCH Oakland's designation as the Bay Area's Level I pediatric trauma center with continued emergency service access via helicopter; and developing a new inpatient facility in a way that optimizes operational activities with other clinical facilities on the site. However, this alternative would not fully meet the fundamental objectives of addressing the existing shortage of capacity and access to pediatric care since it would provide a smaller increase in inpatient beds at UCSF BCH Oakland than the NHB Project; would not fully meet projected ED patient volumes; and would not fully address the pressing, current unmet need for adolescent inpatient mental health care and services.

Due to its reduced size, this alternative would not meet many of the development objectives of the Project, including the objective to develop an inpatient facility that has sufficient space to accommodate modern regulatory requirements and industry standards of contemporary hospitals, such as construction codes, sizes of operating rooms, ratio of operating rooms to pre-and post-recovery areas, space for privacy and infection control issues; develop a new inpatient facility that

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has sufficient space to accommodate modern technology, including telemedicine, and new diagnostic, imaging, testing, treatment, surgery and laboratory equipment, all requiring substantial infrastructure and space; and develop a new inpatient facility that has sufficient space to accommodate patient satisfaction requirements of contemporary hospitals, as fewer private patient rooms and patient rooms of sufficient size to accommodate family overnight stays would be provided. The University therefore rejects this alternative as impractical and infeasible for the reasons listed above and as stated in the Final EIR. (Draft EIR at Section 6.3.4).

(e) *Environmentally Superior Alternative*

Section 15126.6(e)(2) of the CEQA Guidelines requires the identification of an environmentally superior alternative to the proposed project. If the environmentally superior alternative is the “no project” alternative, the EIR shall also identify an environmentally superior alternative among the other alternatives.

**FINDING:** The Draft EIR identified Alternative 1: No Project Alternative as the environmentally superior alternative. Out of the remaining alternatives that are not the no project alternative, the Draft EIR identified Alternative 2: New Hospital Project per the 2015 CHRCO CMP as the environmentally superior alternative. Alternative 2 and Alternative 3 would both avoid the significant and unavoidable Impact CUL-1 associated with the demolition of A/B Wing, a historic resource. Due to its smaller size and limitations, it would be expected to generate somewhat less operational impacts than the proposed Project (e.g., generate less traffic and associated air quality and GHG emissions, and less utility and service demands). However, both alternatives would still result in the other two significant and unavoidable impacts of the proposed Project, namely the cumulative human health risk impact related to TAC emissions and the project-level construction noise impact. However, on balance, Alternative 2: New Hospital Project per the 2015 CHRCO CMP Alternative is considered the environmentally superior alternative. New Hospital Project per the 2015 CHRCO CMP Alternative would involve the least amount of demolition and new construction of the build alternatives; and would also represent the smallest and shortest New Hospital. As such, this alternative would have incrementally less construction-related impacts than the other two build alternatives.

While the New Hospital Project per the 2015 CHRCO CMP Alternative would provide the same number of inpatient beds as under the Project, it would not meet space requirements for modern hospitals, mental health and ED requirements, and would limit private rooms. In addition, as discussed previously, this alternative is infeasible because it would fail to meet many of the proposed Project’s fundamental and development objectives, including the need to modernize the campus to address challenges of undersized and inefficient facilities that affect the long-term viability of the institution; address the existing shortage of capacity and access to pediatric care; address the current unmet demand for adolescent mental health care services; and adequately support ED patient volumes. It would not meet the objective of developing a new hospital that is optimized in its spatial layout to enhance functionality in terms of workflow and wayfinding, and efficiency so as to not increase operational costs, because the new hospital would not be connected to the Ford D&T Building, one of the two existing inpatient facilities. In addition, this alternative would not develop a new inpatient facility that has sufficient space to accommodate modern

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regulatory requirements and industry standards and patient satisfaction requirements of contemporary hospitals; and accommodate modern technology.

## **F. FINDINGS ON MITIGATION MEASURES AND ALTERNATIVES PROPOSED IN COMMENTS**

Some comments on the Draft EIR suggested additional mitigation measures and/or project alternatives. As discussed in Final EIR Section 8.6, Revisions to the Draft EIR, the Final EIR incorporates the following revisions to Mitigation Measures CUL-1a and CUL-1b in response to comments received on the Draft EIR:

### **Mitigation Measure CUL-1a: Documentation of the A/B Wing**

Prior to any demolition work initiated at the A/B Wing, UCSF shall ensure that a qualified architectural historian who meets the Secretary of the Interior's Professional Qualification Standards thoroughly documents the building and associated landscaping and setting. Documentation shall include still photography and a written documentary record of the building to the National Park Service's standards of the Historic American Buildings Survey (HABS), including accurate scaled mapping and architectural descriptions. If available, scaled architectural plans will also be included. Photographs include large-format (4"x5") black-and-white negatives and 8"x10" enlargements. Digital photography may be substituted for large-format negative photography if archived locally. The record shall be accompanied by a report containing site-specific history and appropriate contextual information relying as much as possible on previous documentation. Copies of the records, including photographs, shall be submitted to the Northwest Information Center at Sonoma State University, and the Oakland History Center ~~at~~, the Temescal Branch, and the proposed Hoover Branch of the Oakland Public Library. In addition, a complete documentation package will be offered to the Bancroft Library on the University of California, Berkeley Campus for inclusion in their digital repository.

### **Mitigation Measure CUL-1b: Public Interpretation and Salvage Plan for the A/B Wing**

Prior to any demolition work that would remove character-defining features of the A/B Wing, UCSF shall prepare a Salvage Plan for those components of the building suitable for salvage and/or reuse. A Salvage Plan shall be prepared by a qualified architectural historian or historic architect who meets the Secretary of the Interior's Professional Qualification Standards and presented to UCSF Planning staff. This would be a feasibility study to determine the structural integrity of the character-defining features associated with the A/B Wing, identify environmental factors that may require remediation prior to salvage (e.g., lead paint, chemicals, etc.), and present potential new uses of the salvaged features. The Salvage Plan will identify opportunities for UCSF to reuse character-defining features in the NHB.

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Prior to any demolition activities that would remove character-defining features of, or demolish, an individual historical resource on the project site, UCSF shall prepare a plan for interpretive displays. The specific location, media, and other characteristics of such interpretive display(s) shall be included in this proposal. The historic interpretation plan shall be prepared in coordination with an architectural historian or historian who meets the Secretary of the Interior's Professional Qualification Standards and an exhibit designer or landscape architect with historical interpretation design experience. Interpretive display(s) shall document the individually eligible resource to be demolished. The interpretative plan should also explore contributing to digital platforms that are publicly accessible. A proposal describing the general parameters of the interpretive program and the substance, media, and other elements of such interpretive display shall be approved by UCSF Planning staff prior to commencement of any demolition activities.

Following any demolition activities within the project site, UCSF shall provide within publicly accessible areas of the project site a permanent display(s) of interpretive materials concerning the history and architectural features of the individual historical resources. All materials will be made accessible to patients and visitors, and to the greatest extent possible, these materials will also be made accessible to the general public and passers-by.

Where the suggestions requested minor modifications to mitigation measures, requested mitigation for impacts that the Draft EIR determined were less than significant, or requested mitigation for impacts for which the Draft EIR already identified measures that would reduce the impact to less than significant, these requests were declined as unnecessary. The University adopts and incorporates by reference the specific reasons for declining such measures contained in the responses to comments in the Final EIR (see Sections 8.4 and 8.5 of the Final EIR) as its grounds for rejecting these measures.

Additionally, certain mitigation measures and/or alternatives suggested in comments could reduce impacts that would otherwise be significant, but implementation of measures and/or alternatives would be infeasible.

With respect to off-site alternatives, one commenter suggests that the following alternative should be analyzed: “[a]n additional alternative that may satisfy at least some of Alternative 3’s concerns would be to construct a portion of building A above the ground floor driveway connecting to MLK Way, thereby connecting the upper floors of building A to the parking garage. This may allow shifting the building A site south to allow retention of the A/B wings.” As discussed in Section 8.5 of this Final EIR, this suggestion would elongate the new hospital and create further inefficiencies by increasing the distance physicians, nurses, and other clinical and nonclinical staff must travel within the new hospital. The increased distance creates a burden and fatigue for those staff who tend to be on their feet for a large portion of the day. In addition, the commenter’s suggestion does not resolve the issue that the A/B Wing remains uninhabitable for clinical and non-clinical uses due to the non-code compliance and obsolescence of the building. As discussed in the Alternatives section, it is not feasible to bring the building into compliance with code and current standards while maintaining the historical character-defining features of the building.

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**FINDING:** The University finds that specific economic, legal, social, technological, or other considerations make infeasible the above-described mitigation measures or project alternatives identified in the Final EIR, for the reasons explained above.

**G. FINDING ON RESPONSES TO COMMENTS ON THE DRAFT EIR,  
PROJECT REFINEMENTS, AND REVISIONS TO THE FINAL EIR**

Chapter 8 of the EIR includes the comments received on the Draft EIR and responses to those comments. The focus of the responses to comments is on the disposition of significant environmental issues as raised in the comments, as specified by CEQA Guidelines § 15088(a).

Two mitigation measures, Mitigation Measures CUL-1a and CUL-1b, were revised in response to comments received on the Draft EIR. Mitigation Measure CUL-1a relating to Documentation of the A/B Wing was revised to clarify that records of the site-specific history of the A/B Wing shall include photographs and to expand the locations at which copies of such records shall be available. Mitigation Measure CUL-2b, regarding the Public Interpretation and Salvage Plan for the A/B Wing, was revised to clarify that all materials will be made accessible to patients and visitors, and to the greatest extent possible, these materials will also be made accessible to the general public and passers-by.

In addition, staff-initiated text changes to the Hazards Section of the Draft EIR, including minor clarifying revisions to Mitigation Measure HAZ-4, are described in Section 8.6 of the Final EIR. These changes were made to clarify environmental condition of the Project site following further study.

Lastly, UCSF BCH Oakland has refined certain aspects of the proposed Project, as part of the ongoing planning, development, design, and cost alignment process, including, among other things, a smaller, shorter and redesigned new hospital building; a reshaped, slightly taller parking garage; a change from a site support building to a slightly smaller site support structure; and a proposed new surface utility yard. All Project Refinements are discussed in Section 8.3 of the Final EIR document and the text revisions associated with the Project Refinements are in Section 8.6 of the Final EIR document.

The University finds that responses to comments made on the Draft EIR, Project Refinements, and revisions to the Draft EIR merely clarify and amplify the analysis presented in the document and do not trigger the need to recirculate per CEQA Guidelines §15088.5(b). In addition, the University finds that the Project Refinements do not result in any new or more significant impacts than identified in the Draft EIR.

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## H. OTHER FINDINGS

### 1. Absence of Significant New Information

CEQA Guidelines section 15088.5 requires that a lead agency recirculate an EIR for additional review and comment when significant new information is added to the EIR after the public comment period but before certification of the EIR. Such information can include changes in the project or environmental setting, but that information is not significant unless the EIR is changed in a manner that deprives the public of a meaningful opportunity to comment upon a substantial adverse environmental effect of the project or a feasible way to mitigate or avoid such an effect that the project's proponent declines to implement.

Some text changes and clarifications were made to the Draft EIR and are incorporated in the Final EIR. None of the minor text changes or classifications substantially alters the analysis in the Draft EIR, and they do not trigger the criteria for recirculation.

The University finds that no significant new information was added to the Draft EIR after the public review period. The University specifically finds that: no new significant environmental impact would result from the Project or from the implementation of a mitigation measure; no substantial increase in the severity of an environmental impact would result, or if such an increase would result, the University has adopted mitigation measures to reduce the impact to a level of insignificance; the University has not declined to adopt any feasible project alternative or mitigation measures considerably different from others previously analyzed that would clearly lessen the environmental impacts of the Project; and the Draft EIR is not so fundamentally and basically inadequate in nature that it precluded meaningful public review.

Having reviewed the information in the Draft EIR, Final EIR, and administrative record, as well as the requirements under CEQA Guidelines Section 15088.5 and interpretive judicial authority regarding recirculation of Draft EIRs, the University finds that no new significant information was added to the EIR following public review, and recirculation of the EIR is therefore unnecessary and not required by CEQA.

### 2. Differences of Opinion Regarding the NHB's Impacts

In making its determination to certify the Final EIR and to approve the Project, the University recognizes that the Project involves several controversial environmental issues and that a range of opinion exists with respect to these issues. Through its review of the Final EIR, the comments received on the Draft EIR, and the responses to comments, the University has acquired a comprehensive understanding of the scope of such issues. This has enabled the University to make fully informed and thoroughly considered decisions after taking into account the various viewpoints on the important environmental issues involved in the NHB's implementation. Considering the evidence and analysis presented in the Final EIR and the administrative record as a whole, the University finds that the findings herein are based on a full appraisal of all viewpoints expressed throughout the CEQA review process, as well as other relevant information contained in the administrative record.

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### **III. STATEMENT OF OVERRIDING CONSIDERATIONS**

CEQA requires the decision-making agency to balance, as applicable, the economic, legal, social, technological, or other benefits of a proposed project against its unavoidable environmental risks when determining whether to approve the project. If the specific economic, legal, social, technological, or other benefits of a proposed project outweigh the unavoidable adverse environmental effects, the adverse environmental effects may be considered “acceptable.” (CEQA Guidelines § 15093.) When the lead agency approves a project which will result in the occurrence of significant effects which are identified in the final EIR but are not avoided or substantially lessened, the agency must state in writing the specific reason to support its actions based on the final EIR and/or other information in the record. The statement of overriding considerations shall be supported by substantial evidence in the record. (CEQA Guidelines § 15093.)

Having (i) adopted all feasible mitigation measures, (ii) recognized all significant, unavoidable impacts, and (iii) balanced the benefits of the Project against its significant and unavoidable impacts, the University finds that the Project’s benefits outweigh and override its significant unavoidable impacts for the reasons stated below. Each benefit set forth below constitutes an overriding consideration warranting approval of the Project, independent of the other benefits, despite each and every unavoidable impact.

1. The Project will maintain and enhance UCSF BCH Oakland campus as a premier children’s hospital, educational, research, and clinical institution.
  2. The Project will maintain and enhance UCSF BCH Oakland campus place as nationally recognized teaching hospital, providing accredited residency education in general pediatrics and fellowship education to pediatricians seeking subspecialty training.
  3. The Project will modernize the UCSF BCH Oakland campus to address challenges that affect the long-term viability of the institution, such as aged, functionally obsolete, undersized and inefficient facilities.
  4. The Project will meet seismic requirements of California Senate Bill 1953 by redeveloping a new, seismically-sound, state-of-the-art and sustainable inpatient facility.
  5. The Project will maintain UCSF BCH Oakland’s designation as the Bay Area’s Level I pediatric trauma center with continued emergency service access via helicopter.
  6. The Project will address the existing shortage of capacity and access to pediatric care by increasing the number of inpatient beds at UCSF BCH Oakland.
  7. The Project will address the current unmet need for adolescent mental health care and services by providing behavioral health inpatient beds that meet code requirements, including required outdoor space, at UCSF BCH Oakland and providing such services.
  8. The Project will address the current unmet need for ED patient services by increasing the size of the ED.
  9. The Project will site and develop a new inpatient facility in a way that optimizes operational activities and maintains critical adjacencies with other clinical facilities on the site, such as the existing Patient Tower, the Ford D&T Center and Cardiac Catheterization Lab, and critical support functions.
  10. The Project will Develop a new inpatient facility that has sufficient space to accommodate
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modern regulatory requirements and industry standards of contemporary hospitals, such as construction codes, sizes of operating rooms, ratio of operating rooms to pre-and post-recovery areas, space for privacy and infection control issues.

11. The Project will develop a new inpatient facility that has sufficient space to accommodate patient satisfaction requirements of contemporary hospitals such as private patient rooms, patient rooms of sufficient size to accommodate family overnight stays, and outdoor space for children.
  12. The Project will develop a new inpatient facility that has sufficient space to accommodate modern technology, including telemedicine, and new diagnostic, imaging, testing, treatment, surgery and laboratory equipment, all requiring substantial infrastructure and space.
  13. The Project will optimize the existing Patient Tower by making non-structural performance improvements and renovating it to continue to provide inpatient beds and necessary clinical and support functions.
  14. The Project will develop a parking structure to meet the needs of essential healthcare providers and other staff, at a location that provides direct and safe access to patient facilities.
  15. The Project will develop parking facilities to address patient parking needs, in particular ED patient parking.
  16. The Project will maintain existing hospital operations throughout construction.
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**IV. APPROVALS**

The University hereby takes the following actions:

1. Certify the Environmental Impact Report for the UCSF Benioff Children's Hospital Oakland New Hospital Building Project;
  2. Adopt the Mitigation Monitoring and Reporting Program for the UCSF Benioff Children's Hospital Oakland New Hospital Building Project and make a condition of approval the implementation of applicable mitigation measures within the responsibility and jurisdiction of the San Francisco campus.
  3. Adopt the CEQA Findings and Statement of Overriding Considerations for the UCSF Benioff Children's Hospital Oakland New Hospital Building Project.
  4. Approve Amendment No. 11 to the UC San Francisco 2014 Long Range Development Plan.
  5. Approve the design of the UCSF Benioff Children's Hospital Oakland New Hospital Building Project, San Francisco Campus.
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**HOW UCSF AND BCH OAKLAND HAVE ENGAGED THE COMMUNITY  
AND GAINED SUPPORT FOR THE PROJECT**

| <h2 style="text-align: center;">Outreach</h2>  | <h2 style="text-align: center;">Partnerships</h2>  | <h2 style="text-align: center;">Support</h2>   |
|--|--|--|
| <p><b>7 Community Meetings</b></p> <p><b>Small neighborhood group meetings</b></p> <p><b>Historic Design Advisory Group</b></p> <p><b>Elected Briefings</b></p> <ul style="list-style-type: none"> <li>• Oakland Mayor Sheng Thao</li> <li>• Councilmember Dan Kalb</li> <li>• Supervisor Keith Carson</li> <li>• Supervisor Lena Tam</li> <li>• Senator Nancy Skinner</li> <li>• Assemblymember Mia Bonta</li> </ul> <p><b>Community Presentations</b></p> <ul style="list-style-type: none"> <li>• Oakland’s Chambers of Commerce</li> <li>• San Francisco Bay Area Planning and Urban Council</li> <li>• Oakland Heritage Alliance</li> </ul> | <p><b>City of Oakland</b></p> <ul style="list-style-type: none"> <li>• Letter of Commitment</li> <li>• Oakland Planning Commission</li> <li>• Oakland Landmarks Advisory Board</li> </ul> <p><b>Community Advisory Board</b></p> <ul style="list-style-type: none"> <li>• 17 members representing a cross section of the diverse Oakland Community</li> </ul> <p><b>Building and Construction Trades Council of Alameda County</b></p> <ul style="list-style-type: none"> <li>• Community Workforce Agreement</li> </ul> | <p><b>Multi-Sector</b></p> <ul style="list-style-type: none"> <li>• FQHC Health Clinics</li> <li>• Economic Development</li> <li>• Housing</li> <li>• Workforce Development</li> <li>• Behavioral Health</li> <li>• Chambers of Commerce</li> <li>• Business Improvement District</li> </ul> <p><b>Neighborhood Residents</b></p> <p><b>Patient Advocacy Groups</b></p> <p><b>California Children’s Hospital Association</b></p> <p><b>Oakland elected delegation-<br/>City, County and State.</b></p> |