
PREAMBLE

On June 10, 2005, Ralph F. Marchese of The Marchese Company, Inc., on behalf of California Pacific Medical Center (hereinafter referred to variously as "CPMC" and "Project Sponsor"), submitted an Environmental Evaluation Application (EEA) with the Planning Department (hereinafter "Department"),
Case No. 2005.0555E. The Department issued a Notice of Preparation of Environmental Review on July 1, 2006, to owners of properties within 300 feet, adjacent tenants, and other potentially interested parties.

On January 13, 2009, CPMC revised its EEA to include updates regarding the LRDP Project, including the proposal for a new St. Luke's Replacement Hospital (Replacement Hospital) and St. Luke's Medical Office Building (St. Luke's MOB).

On June 10, 2010, the Project Sponsor submitted a request for the allocation of Office Space for approximately 99,848 s.f. of medical office space in the proposed St. Luke's MOB (Case No. 2009.0886B).

On June 10, 2010, the Project Sponsor submitted a request to amend the following sections of the General Plan: (1) "Map 4 – Height Map" of the Urban Design Element, to reflect a maximum height of 105'-0" applicable to the St. Luke's Campus (all of Assessor's Block 6575, Lot 021 in Block 6576, and a portion of San Jose Avenue between Cesar Chavez Street and 27th Street that will be vacated as part of the project, and their successor Blocks and Lots); and (2) "Map 5 – Bulk Map" of the Urban Design Element, to reflect the proposed maximum plan and maximum diagonal plan dimensions of 227' and 270', respectively, for the Replacement Hospital site, and 204' and 228', respectively, for the St. Luke's MOB site (2009.0886M).

On June 10, 2010, the Project Sponsor submitted a request to amend the following sections of the San Francisco Planning Code: (1) Add Section 249.68 to establish the Cesar Chavez/Valencia Streets Medical Use Special Use District (SUD) and allow a floor area ratio of 2.5 to 1 in the Cesar Chavez/Valencia Streets Medical Use SUD; and (2) to add Section 124(k) to allow a floor area ratio of 2.5 to 1 in the Cesar Chavez/Valencia Streets Medical Use SUD. (Case No. 2009.0886T).

On June 10, 2010, the Project Sponsor submitted a request to amend the following Zoning Maps of the San Francisco Planning Code: (1) Map HT07 to reclassify the Replacement Hospital site from 65-A to 105-E Height and Bulk District; and (2) Map SU07 to show the boundaries of the Cesar Chavez/Valencia Streets Medical Use SUD (Case No. 2009.0886Z).

On June 10, 2010, the Project Sponsor filed an application with the Department for Conditional Use authorization under Planning Code Sections 134, 136, 151, 303, 304, 209.3(a), 209.9(b), 253, 270, and 271, to amend the existing Planned Unit Development (hereinafter "PUD") for CPMC's St. Luke's Campus to allow construction of the Replacement Hospital, demolition of the existing St. Luke's Hospital Tower, and the construction of the St. Luke's MOB with (1) exceptions to/exemptions from the rear yard and off-street parking requirements of Planning Code Sections 134 and 151; (2) exceptions from the dimension limitations for projections over streets or alleys; (3) authorization for buildings over 40'-0" in an RH-2 District; and (4) deviation from otherwise applicable bulk limits, at Assessor's Block 6575/001, 002; 6576/021; and a portion of San Jose Avenue between Cesar Chavez Street and 27th Street (3555 Cesar Chavez Street, 3615 Cesar Chavez Street, 1580 Valencia Street), within an RH-2 (Residential, House, Two-Family) District and a 105-E and 65-A Height and Bulk District ("St. Luke's Replacement Hospital and MOB Project").

1 At the time of this application, the Cathedral Hill Hospital site was within the boundaries, and was governed by the land use controls, of the Western Addition A-2 Plan. Those controls expired on January 1, 2009.
On June 10, 2010, the Project Sponsor submitted a request for a General Plan Referral, Case No. 2009.0886R, regarding the vacation of the portion of San Jose Avenue between 27th and Cesar Chavez Streets; and sidewalk width changes to various streets adjacent to the campus (2009.0886R).

On July 21, 2010, the Draft Environmental Impact Report ("DEIR") for CPMC's Long Range Development Plan ("LRDP") Project, including the St. Luke's Replacement Hospital and MOB Project, was prepared and published for public review, and was available for public comment until October 19, 2010.

On September 23, 2010, the Planning Commission ("Commission") conducted a duly noticed public hearing at a regularly scheduled meeting to solicit comments regarding the DEIR. On March 29, 2012, the Department published a Comments and Responses document, responding to comments made regarding the DEIR prepared for the LRDP. Together, the Comments and Responses document, the DEIR, and any Errata Sheets, (the Appendices to the DEIR and C&R document), Department staff testimony and responses to questions and comments at the Commission's April 26, 2012, public hearing regarding certification of the Final EIR, and all of the supporting information that has been reviewed and considered by the Department comprise the Final EIR for the LRDP ("FEIR").

On March 30, 2012, the Project Sponsor submitted an Application for a Development Agreement relating to the construction and reconstruction of Health Care Facilities in furtherance of CPMC’s LRDP by and between the City and County of San Francisco and CPMC, pursuant to Administrative Code Section 56.4. This Application was endorsed and accepted as complete by the Planning Director on April 4, 2012.

On April 5, 2012, the Commission conducted a duly noticed public hearing at a regularly scheduled meeting and adopted Motion No. 18571, initiating the requested General Plan Amendments.

On April 10, 2012, the Mayor, at the Board of Supervisors hearing, introduced the (1) Planning Code Text Amendments in Board File No. 120358; (2) the Zoning Map Amendments in Board File No. 120360, (3) the street vacation ordinance in Board File No. 120361, (4) the Transfer Agreement in Board File No. 120363, (5) the Development Agreement in Board File No. 120366, and (5) sidewalk width legislation in Board File No. 120365.

On April 26, 2012, the Commission reviewed and considered the FEIR and found that the contents of said report and the procedures through which the FEIR was prepared, publicized, and reviewed complied with the California Environmental Quality Act (California Public Resources Code Sections 21000 et seq.) ("CEQA"), 14 California Code of Regulations Sections 15000 et seq. (the "CEQA Guidelines"), and Chapter 31 of the San Francisco Administrative Code ("Chapter 31") .

The Commission found the FEIR was adequate, accurate and objective, reflected the independent analysis and judgment of the Department and the Commission, and that the summary of comments and responses contained no significant revisions to the DEIR, and certified the FEIR for the LRDP Project in compliance with CEQA, the CEQA Guidelines and Chapter 31.

The Planning Department, Linda Avery, is the custodian of records, located in the File for Case No. 2005.0555E, at 1650 Mission Street, Fourth Floor, San Francisco, California.
Department staff prepared a Mitigation Monitoring and Reporting Program ("MMRP") for the LRDP Project, which material was made available to the public and this Commission for this Commission's review, consideration and action.

On April 26, 2012, the Commission (1) adopted Motion No. 18588 certifying the FEIR as accurate, adequate and complete, (2) adopted Motion No. 18589, adopting CEQA findings, including a Statement of Overriding Considerations, and adopting the MMRP, and (3) adopted other Motions and Resolutions with respect to the LRDP Project.

On April 26, 2012, the Planning Commission conducted a duly noticed public hearing at a regularly scheduled meeting and adopted: (1) Resolution No. 18590, recommending that the Board of Supervisors approve the requested General Plan Amendment; (2) Motion No. 18592, making findings of consistency with the General Plan and Planning Code Section 101.1; (3) Resolution No. 18593, recommending that the Board of Supervisors approve the requested Planning Code Text and Map Amendments; (4) Motion No. 18594, approving the proposed Conditional Use authorization; (5) Motion No. 18596, approving the General Plan Referral; and (6) Resolution No. 18602, recommending that the Board of Supervisors approve the proposed draft Development Agreement; and

The Planning Department, Linda Avery, is the custodian of records, located in the File for Case No. 2009.0886MTZCBRSK, at 1650 Mission Street, Fourth Floor, San Francisco, California.

On April 26, 2012, the Commission conducted a duly noticed public hearing at a regularly scheduled meeting on the allocation of Office Space requested in Application No. 2009.0886MTZCBRSK.

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

MOVED, that the Commission hereby authorizes the allocation of Office Space requested in Application No. 2009.0886MTZCBRSK, subject to the conditions contained in “EXHIBIT A” of this motion, based on the following findings:

**FINDINGS**

Having reviewed the materials identified in the preamble above, and having heard all testimony and arguments, this Commission finds, concludes, and determines as follows:

1. The above recitals are accurate and constitute findings of this Commission.

2. **Site Description and Present Use.** St. Luke's Hospital is located in the southeastern quadrant of the City and occupies a full city block plus a surface parking lot on a portion of the adjacent block, totaling approximately 3.6 acres. It is bounded by Cesar Chavez Street, Valencia Street, Duncan Street, one lot to the west of San Jose Avenue, and 27th Street. The St. Luke's Campus currently contains eight buildings, totaling approximately 451,868 gsf of floor area and 329
parking spaces. The Hospital (comprised of the 1970 Tower, 1957 Building and Hartzell Building, described below) is licensed by the California Department of Public Health (CDPH) for 229 hospital beds.

More specifically, the Campus includes the following facilities:

- The St. Luke's Hospital Tower has 12 stories above ground and one story below ground, is approximately 197,983 gsf, and is primarily used for inpatient care, skilled nursing, and administrative support. There are eight surface parking spaces north of the Hospital Tower.

- The 1957 Building has four stories above ground and is approximately 31,724 gsf. It is primarily used for the Emergency Department, diagnostic and treatment space, and support space. There are 106 parking spaces associated with this building; 74 spaces on a surface parking lot; and 32 street spaces along San Jose Avenue.

- The 1912 Building has four stories above ground, is approximately 26,280 gsf, and is primarily used for hospital administration, outpatient care, diagnostic and treatment space, support space, and the chapel.

- The Monteagle Medical Center has eight stories above ground and one story below ground and is approximately 90,005 gsf which includes medical office space, outpatient care space, diagnostic and treatment space, and support space.

- The Redwood Administration Building is a portable one-story building containing approximately 2,400 gsf which is used for hospital administration.

- The Hartzell Building has two stories above ground and one story below ground and has approximately 18,506 gsf primarily used for office and educational uses for the Samuel Merritt School of Nursing.

- The Duncan Street Parking Garage is two stories above ground and contains approximately 83,370 gsf for 215 parking spaces. With the additional 114 off-street surface parking spaces on the St. Luke's Campus (described above), there are a total of 329 parking spaces on the campus.

- The one story MRI Trailer contains 1,600 gsf used for diagnostic and treatment space.

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

Gradual building development at St. Luke's has occurred since 1875, when St. Luke's moved into a new facility at its present location at Valencia and Cesar Chavez Streets. Today, the oldest building remaining on the Campus is the 1912 Building. The existing St. Luke's Hospital Tower was approved in 1967 when the Planning Commission authorized a conditional use for the St. Luke's Campus (Resolution No. 6078). In 1968, a revocable encroachment permit was issued to allow a portion of San Jose Avenue (between Cesar Chavez Street and 27th Street) to be used as
parking for the St. Luke’s Campus. In 1971, further development was approved (Resolution No. 6714) including the construction of the Monteagle Medical Center, Duncan Street Parking Garage, and surface parking. In 2001, St. Luke’s Hospital became an affiliate of Sutter Health and formally merged with CPMC in 2007.

The St. Luke’s Campus is located in the RH-2 Zoning District (Residential, House, Two-Family). The RH-2 Districts are devoted to one-family and two-family houses. In some cases, group housing and institutions are found in these areas, although nonresidential uses tend to be quite limited. Hospitals and medical centers are permitted in this District with Conditional Use authorization.

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

There have been recent efforts to improve the streetscape and calm traffic on San Jose Avenue, Guerrero Street and Cesar Chavez Street. The proposed Cesar Chavez Street Design Plan is a detailed design effort to re-envision Cesar Chavez Street from Hampshire Street to Guerrero Street in the Mission District, and identifies ways to make Cesar Chavez Street a safe, pleasant, and attractive corridor for people, bikes, and transit. The proposed Mission District Streetscape Plan is a community-based planning process to identify streetscape improvements to streets, sidewalks, and public spaces in the Mission District.

4. **Project Description.** The office allocation is for the St. Luke’s MOB, described below. For context, the overall Near-Term Projects under the LRDP, of which the St. Luke’s MOB is a part, are also described here. The Near-Term Projects outlined in CPMC’s LRDP will result in a five campus system with three acute care hospitals – Davies, St. Luke’s, and Cathedral Hill – providing approximately 903 licensed beds and three full-service emergency departments (one at each of the acute care hospitals). The Davies Hospital North Tower was retrofitted in 2008 to remain operational to 2030. The St. Luke’s Hospital will be replaced by a new hospital built on campus, adjacent to the existing hospital, followed by construction of the St. Luke’s MOB after the demolition of the existing Hospital Tower. The California and Pacific Campuses will remain operational as acute care hospitals until the proposed Cathedral Hill Hospital is constructed and operational. Once the proposed Cathedral Hill Hospital is built, as part of the Near-Term Project implementation activities, the acute care services at California and Pacific Campuses will be transferred to the Cathedral Hill Hospital, and the Pacific Campus’s existing 2333 Buchanan Street Hospital would undergo renovation and reuse as an ambulatory care center.² In the long-

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² 2333 Buchanan Street is an Existing Use under the proposed Development Agreement and is distinguished from the new construction proposed for the Long-Term Project at the Pacific Campus. The renovation and reuse may include, but is not limited to,
term, the Pacific Campus will become an outpatient center, and CPMC proposes an additional medical office building on the Davies Campus.³

This St. Luke’s Replacement Hospital and MOB Project is part of CPMC’s LRDP to improve its delivery of citywide health care, and comply with seismic requirements of California law.

The new St. Luke’s Replacement Hospital and MOB are major components of CPMC’s plans to continue to provide health care services in San Francisco. The new St. Luke’s Replacement Hospital is being sited so that it can be built without disrupting services at the existing Hospital Tower. It is being designed, in compliance with SB 1953, to remain operational after a strong earthquake. The Replacement Hospital will be an 80-bed⁴ acute care hospital, and the St. Luke’s MOB will provide space for physicians who will be affiliated with the CPMC and the campus, as well as diagnostic and treatment space and space for other outpatient care. The St. Luke’s Replacement Hospital and MOB Project will preserve and enhance San Francisco’s health care infrastructure, particularly in the South of Market area.

Specifically, the proposal for the St. Luke’s Replacement Hospital includes the construction of a new 146,410 gsf, five-story and approximately 99'-0" tall, 80-bed full-service, acute care hospital, sited on the Campus’ existing surface parking lot and over a portion of the to-be-vacated San Jose Avenue that has been closed for use as a street since 1968 (and is currently used for parking for the St. Luke’s Campus under an encroachment permit). Based on the recommendations of the Blue Ribbon Panel, the new Replacement Hospital will be sited such that the existing hospital can remain in continuous operation during the new hospital’s construction. The Replacement Hospital will include Centers of Excellence in Senior and Community Health and an expanded Emergency Department, and will include, but is not limited to, inpatient medical care, diagnostic and treatment space, surgical care, critical care, labor and delivery, and post-partum care. It will also include a cafeteria and an enclosed loading area.

The Emergency Department at the Replacement Hospital will be approximately 11,500 gsf, which is an increase of approximately 4,440 gsf over the existing Emergency Department in the 1957 Building. The new Emergency Department will be a significant improvement over the existing facility, and waiting times for patients should be reduced through the provision of all private treatment spaces. The new Emergency Department will be in the Replacement Hospital, adjacent

the following uses: outpatient care, diagnostic and treatment services, Alzheimer’s residential care, medical support services such as pre- and post-ambulatory surgery, outpatient laboratory services, physical and occupational therapy, hospital administration, and cafeteria uses.

³ Long-Term Projects at the Davies and Pacific Campuses are being evaluated at a program-level as part of CPMC’s LRDP EIR. There are no pending Near-Term Projects under review for the Pacific Campus, and CPMC has not proposed any Near-Term or Long-Term Projects at the California Campus, which CPMC plans to sell after the majority of the services at that campus have been relocated to the Cathedral Hill and Pacific Campuses.

⁴ With the shift to single-patient rooms under modern hospital guidelines, newer facilities are projected to have a higher occupancy rate (about 80 percent, with variation by bed type) than with the multi-bed mode. The efficient use of beds in a multi-patient room environment is limited by a number of factors, such as the gender and diagnosis of the patients, as well as infection control and privacy concerns.
to Imaging Services; this adjacency will increase efficiency compared to the existing hospital where these functions exist on separate floors. There will be more support space and improved technology. Waiting time for patients should further be reduced by flexible triage space. Additionally, many of the non-emergency patient visits would be accommodated by expanding the hours and services of the existing Health Care Center in the Monteagle Office Building to create an urgent care center able to receive patients who do not need Emergency care. By creating additional capacity via an urgent care center on the St. Luke's Campus, the effective combined Emergency Department and urgent care capacity would increase from about 26,000 visits per year today to approximately 31,600 visits under the LRDP.

After the Replacement Hospital opens and once services are moved into it from the existing Hospital Tower and the 1957 Building, the existing Hospital Tower will be demolished as part of the Near-Term Project at St. Luke's. After demolition of the Hospital Tower, the new St. Luke's MOB would be constructed at that site, also as part of the Near-Term Project at St. Luke's. Construction of the St. Luke's MOB is expected to occur after 2015.

The existing uses in the St. Luke's 1957 Building, such as the Emergency Department, surgery, diagnostics and treatment, would be transferred to the Replacement Hospital, and the building would be converted from acute care to support use. The MRI Trailer, and the enclosed passageway connecting it to the 1912 Building, would be removed after construction of the St. Luke's MOB. The uses in the MRI Trailer would be transferred to the Replacement Hospital or St. Luke's MOB upon completion. Following demolition of the existing Tower, CPMC would then construct a new 104,008 gsf (the result of the office space plus retail and other non-office uses), five-story and approximately 100'-tall MOB approximately in the existing hospital's place. The St. Luke's MOB would include medical office space for doctors admitting patients to the hospital, and would include retail, educational, and conference space, along with a four level underground garage with approximately 219 parking spaces. Vehicular access to the underground parking garage will be from Cesar Chavez and Valencia Streets.

The exterior design of the Replacement Hospital and St. Luke's MOB was developed with input from the Planning Department staff and the community. The exterior of the bases of the Replacement Hospital and of the St. Luke's MOB will be durable (tile, stone, and brick matching the 1912 Building exterior) and will ground the buildings on the site, engaging users at the pedestrian level. The upper floors will be Glass Fiber Reinforced Concrete (GFRC), glass, and metal panel. Metal panels are used for the canopy which runs along the entire east side of the Replacement Hospital, unifying the upper and lower public plazas (described below) and creating a connection from the interior of the Replacement Hospital to the exterior terraced plazas. The soffit of the canopy is continuous between the interior and exterior, further connecting the Replacement Hospital to the organizing element of the Campus, the reestablished and pedestrian oriented San Jose Avenue.

The St. Luke's MOB will be entitled at the same time as the hospital, but the design will continue to be refined with planning staff while the Replacement Hospital is being built since the St. Luke's MOB cannot be built until the existing hospital is demolished. Once built, the new St. Luke's MOB will connect internally to the Replacement Hospital and 1957 Building.
The new Replacement Hospital and St. Luke’s MOB will be organized around landscaped open space that mimics the existing San Jose Avenue alignment between Cesar Chavez Street and 27th Street. This landscaped public plaza would span two levels and would be designed to unify the Campus, mediate the site’s significant grade change and provide a public pedestrian pathway along a similar path of travel as the vacated San Jose Avenue right-of-way between Cesar Chavez and 27th Streets. The lower (north) plaza at Cesar Chavez will front the Replacement Hospital’s cafeteria and primary entrance at the northeast corner of the building and the ground floor retail at the base of the St. Luke’s MOB. The upper (south) plaza, will provide access to the second level of the Replacement Hospital. Stairs against the east face of the Replacement Hospital connect the Campus’s south upper plaza at 27th Street and the north lower plaza at Cesar Chavez. A canopy will cover the drop-off area on Cesar Chavez Street and adjacent Replacement Hospital entrance, and continue along the east face of the Replacement Hospital along the public plaza, to provide protection in inclement weather, as is required by the California Building Code. The plazas and adjacent streetscape along Cesar Chavez are enlivened by activity at the Replacement Hospital’s lobby and café, a community room facing the lower plaza, and by retail space within the St. Luke’s MOB along most of the Cesar Chavez frontage. All landscaping and street improvements as part of the St. Luke’s Near-Term Project are consistent with and complement the Cesar Chavez Street Design Plan.

Although the proposed hospital is not subject to the San Francisco Building Code and the Green Building Ordinance, CPMC has committed to “building green”, and is seeking LEED Certified status for the St. Luke’s Replacement Hospital. The St. Luke’s MOB is subject to San Francisco’s Green Building Ordinance, and will achieve a minimum of LEED Silver certification.

5. **Public Comment.** The Department has received substantial comments expressing support for and opposition to CPMC’s LRDP, over the past 7 years since the initial EEA was submitted. Support for and opposition to CPMC’s LRDP can be found in the project files at the Planning Department.

6. **CEQA Findings.** On April 26, 2012, by Motion No. 18588, the Commission certified as adequate, accurate and complete the FEIR for the LRDP Project, which includes the St. Luke’s Replacement Hospital and MOB Project. A copy of Commission Motion No. 18588 is in the file for Case No. 2005.0555E. Also on April 26, 2012, by Motion No. 18589, the Commission adopted findings, including a statement of overriding considerations and an MMRP, pursuant to CEQA. In accordance with the actions contemplated herein, the Commission has reviewed the FEIR and adopts and incorporates by reference as though fully set forth herein the findings, including the statement of overriding considerations, pursuant to CEQA, adopted by the Commission on April 26, 2012, in Motion No. 18589.

7. **Office Allocation.** Section 321 establishes standards for San Francisco’s Office Development Annual Limit. In determining if the proposed Project would promote the public welfare, convenience and necessity, the Commission considered the seven criteria established by Code Section 321(b)(3), and finds as follows:
a. APPORTIONMENT OF OFFICE SPACE OVER THE COURSE OF THE APPROVAL PERIOD IN ORDER TO MAINTAIN A BALANCE BETWEEN ECONOMIC GROWTH ON THE ONE HAND, AND HOUSING, TRANSPORTATION AND PUBLIC SERVICES, ON THE OTHER.

There currently exists 3,381,349 square feet of office space available for allocation to office buildings of more than 49,999 square feet of office space ("Large Buildings") during this Approval Period, which ends October 16, 2012. If the Planning Commission approves the Project with up to 99,848 square feet of office space, there would be 3,331,350 square feet of office space available for allocation (or 3,088,363 sf should the Commission first approve the office allocation for Cathedral Hill MOB, Case No. 2009.0885B). Although the Zoning Administrator has long determined that examination rooms should be exempt from this calculation since they are part of outpatient clinic space, this calculation does not exclude the exam rooms, since the exact layout of spaces has not yet been defined. This total is therefore greater than what will be the actual quantity of medical office space, less the exam rooms. On October 17, 2012, and October 17 of each succeeding year, an additional 875,000 square feet of office space will become available for allocation to buildings of greater than 49,999 square feet of office space.

The new St. Luke’s MOB is part of the overall St. Luke’s Replacement Hospital and MOB Project, and would support the proposed Replacement Hospital by providing important services such as clinical and physician office space. The site of the proposed St. Luke’s MOB is an ideal location because of its proximity to the Replacement Hospital, and the location in the southern part of the City where few outpatient facilities exist that are conveniently connected to the range of medical services that can be provided at the St. Luke’s Campus. Additionally, existing transit routes and major vehicular thoroughfare allow convenient access to the site with travel modes appropriate for the needs of those occupying and visiting the St. Luke’s MOB.

The St. Luke’s MOB would maintain the balance between San Francisco’s economic growth, on one hand, and housing supply, transportation and public services as follows:

With respect to economic growth, the St. Luke’s MOB is a central component of CPMC’s Near-Term Projects, which will provide substantial benefits to the City, including expanded employment opportunities for City residents at all employment levels. CPMC and the rest of the health services sector are critically important to the economic health of San Francisco. CPMC is the second largest employer in San Francisco. CPMC is estimated to employ over 6,200 people, of which about half are San Francisco residents. The St. Luke’s MOB is an important element of the overall project, which is necessary to maintain and expand employment in these long-term health services and support jobs. The Near-Term Projects will also provide up to approximately 400 to 500 construction jobs per year, with a maximum of up to 1,500 jobs at the peak construction period. The construction and operation of the Near-Term Projects, including the St. Luke’s MOB, is expected to inject about $2.5 billion into the local economy. Additional economic development benefits of the Near-Term Projects, including the St. Luke’s MOB, are described in the General Plan and Planning Code Section 101.1 findings.

With respect to housing supply, the FEIR concludes that on the basis of the 2009 Housing
Element Update's analysis, any additional demand for affordable housing generated by the proposed CPMC LRDP can be accommodated by existing and planned residential growth. (C&R 3.3-11). The Near-Term Projects, including the St. Luke's MOB, are institutional uses and as such are not subject to the City's Jobs-Housing Linkage Fee. Nonetheless, CPMC has committed in the Development Agreement to contributions totaling $62 million toward affordable housing replacement, funding the production of new affordable units, and creating a downpayment assistance program for low and moderate income CPMC employees seeking to purchase a home in San Francisco (DALP). The City would also receive an estimated $35 million in repayments from the DALP program (through repayment of DALP loans and the City's estimated $6 million share of property appreciation) to use for affordable housing projects.

Regarding transportation, the St. Luke's MOB is proximate to many transit lines, and the locations of the St. Luke's MOB entrance was planned taking into consideration access from existing and planned transit stops. The St. Luke's Campus design includes features intended to accommodate transit usage, such as the CPMC shuttle stop proposed on San Jose Avenue. CPMC will provide bicycle racks, bicycle parking and shower facilities for employees and staff at the St. Luke's MOB. CPMC will provide parking at the St. Luke's MOB, but the amount will be consistent with City policy and assumes implementation of a robust TDM Program, with appropriate parking pricing and time limitations. Parking for carpools, vanpools, and car-share vehicles will continue to provide incentives for shared vehicle trips.

CPMC's current TDM program at its existing campuses has been shown to be effective in promoting the use of public transit by its employees. Key components of the TDM program include CPMC shuttle service, rideshare promotions, pre-tax transit program, transit subsidy, flexible work schedules, car sharing, emergency ride home program, guaranteed ride home program, education and promotion, dedicated TDM coordinator, and parking fees.

In addition to the TDM, CPMC would make commitments through the proposed Development Agreement to provide funding for improvements to MTA transit facilities and services. These mostly include commitments related to the Cathedral Hill site, but also include $400,000 in funding to MTA for studies regarding improvements to bicycle facilities around and between all CPMC campuses.

The FEIR concluded that the St. Luke's MOB would not have any significant, unavoidable impacts on public services. (See DEIR at pp. 4.11-17 to 4.11-21, 4.11-26 to 4.11-28, 4.11-31 to 4.11-32, 4.11-34 to 4.11-35, and 4.11-36).

Therefore, the St. Luke's MOB and the allocation of square footage would provide additional resources and help maintain the balance between economic growth, housing, transportation and public services.

b. THE CONTRIBUTION OF THE OFFICE DEVELOPMENT TO, AND ITS EFFECTS ON, THE OBJECTIVES AND POLICIES OF THE GENERAL PLAN.

The overall project, including the St. Luke's MOB, is consistent with the General Plan, as
discussed in Motion No. 18592. Overall, as described in more detail in Motion No. 18592, it would advance the Objectives and Policies of the Housing, Commerce and Industry, Transportation, Urban Design, and Community Safety Elements of the General Plan, and presents no significant conflicts with other elements.

c. THE QUALITY OF THE DESIGN OF THE PROPOSED OFFICE DEVELOPMENT.

The St. Luke’s MOB will replace an architecturally undistinguished 1970 hospital structure that is separated from Cesar Chavez by an open parking lot that precluded interaction of the Campus with the public realm on Cesar Chavez Street. The St. Luke’s MOB and the Replacement Hospital are approximately 58 feet lower in height than the existing Hospital Tower that will be razed upon completion of the Replacement Hospital. The resulting overall height of the Campus buildings will be much closer to the lower scale residential and commercial development surrounding the Campus and will extend less above the prevailing skyline.

The St. Luke’s MOB has been designed to complement the proposed Replacement Hospital with a unified design that is compatible with the scale and materials of older buildings that constitute the remainder of the St. Luke’s Campus. The design also complements both the older and newer buildings in the immediate vicinity and will blend with the boulevard treatment of Cesar Chavez currently planned by the City.

The exterior of the St. Luke’s MOB will use finishes that exist in the neighborhood. The base material will be durable (tile, stone or brick) and will ground the St. Luke’s MOB on the site. The upper floors, glass fiber reinforced concrete (GFRC) will be the primary material.

Medical office buildings typically have higher floor-to-floor heights than regular office buildings due to the space required to accommodate medical services. The higher floor-to-floor height at the St. Luke’s MOB is typical for medical office buildings. The high floor-to-floor heights are for the structural slab and beams, mechanical air distribution systems, plumbing systems, fire sprinkler systems, electrical, computer, telephone, and security systems specific to providing medical clinic services.

The St. Luke’s MOB has been design to target LEED Silver certification, incorporating numerous sustainable features to enhance efficiency and environmental performance. It also includes numerous streetscape improvements designed to improve the pedestrian environment, as described in additional detail in the General Plan and Planning Code Section 101.1 and St. Luke’s CLI/PLD findings.

Overall, the Project Sponsor has worked closely with Department staff to achieve a quality design that is appropriate for the building’s immediate context and surrounding neighborhood.

d. THE SUITABILITY OF THE PROPOSED OFFICE DEVELOPMENT FOR ITS LOCATION, AND ANY EFFECTS OF THE PROPOSED OFFICE DEVELOPMENT SPECIFIC TO THAT LOCATION.
The proposed St. Luke's MOB is in an excellent location due to its proximity to the proposed Replacement Hospital. It is especially important for physicians to have offices in close proximity to a hospital in order facilitate admission of patients to the hospital and maximize physician availability. Patients also benefit from having a hospital and MOB at the same location, eliminating the need to travel to multiple locations within the City to visit a doctor or diagnostic facilities. Many hospital-based specialists and sub-specialists see patients in the outpatient setting and need offices as close to the inpatient facility as possible. Chronically, seriously ill patients, in particular, need to have proximity to multiple providers as well as both inpatient and outpatient diagnostic facilities. Additionally, it is important for OB/Gyn doctors to have offices close to the hospital in order to treat patients and deliver babies on short notice. Both for physicians and patients, proximity of physicians facilitates referrals and timely medical care.

The location of the proposed St. Luke's MOB near existing transit lines and major vehicle thoroughfares allows convenient access to the building needed by a range of transportation modes.

As the St. Luke’s MOB is proposed on an existing medical center campus, no residential or general commercial space will be lost. The conditions of approval, including the MMRP, include various measures that are further designed to ensure that effects on the surrounding neighborhood are minimized.

Accordingly, the St. Luke's MOB is appropriate at its proposed location and includes appropriate measures to address effects on the surrounding area.

e. THE ANTICIPATED USES OF THE PROPOSED OFFICE DEVELOPMENT IN LIGHT OF EMPLOYMENT OPPORTUNITIES TO BE PROVIDED, NEEDS OF EXISTING BUSINESSES, AND THE AVAILABLE SUPPLY OF SPACE SUITABLE FOR SUCH ANTICIPATED USES.

The St. Luke’s MOB will provide approximately 59,770 sq. ft. of medical offices, 8,680 sq. ft. of outpatient clinical care, and 111,000 sq. ft. of structured parking (approximately 220 parking spaces). The St. Luke’s MOB would also include approximately 2,600 sq. ft. of ground floor retail along Cesar Chavez and Valencia Streets, a 1,560 sq. ft. cafeteria and a community room on the ground floor that would be made available for public use.

Employment opportunities for private physicians and other associated staff would be available in the proposed St. Luke’s MOB. It would result in an increase of CPMC and non-CPMC employees at the site, and would provide a range of employment opportunities. These additional employees at the site would most likely benefit existing neighborhood serving businesses such as cafés/restaurants and other retail uses. Also, patients and visitors may patronize nearby businesses.

Similar to all other hospitals in the City, it is important to have an MOB in the immediate vicinity in order to minimize physician travel time between the inpatient and outpatient setting, as well as for the convenience of patients, especially seriously ill patients and those with limited mobility. In the vicinity of the proposed Replacement Hospital, there is currently a lack of
sufficient available medical office space suitable to meet the needs of new medical practices.

Accordingly, the St. Luke's MOB is an appropriate use in terms of employment opportunities, needs of existing businesses, and availability of medical office space in the area.

f. THE EXTENT TO WHICH THE PROPOSED DEVELOPMENT WILL BE OWNED OR OCCUPIED BY A SINGLE ENTITY.

The tenancy of the proposed St. Luke's MOB would be effectively controlled by CPMC, and CPMC-affiliated physicians are intended to be the principal occupants of the building. The St. Luke's MOB would be designed to accommodate a wide range of medical office uses to support the St. Luke's Replacement Hospital use.

g. THE USE, IF ANY, OF TRANSFERABLE DEVELOPMENT RIGHTS ("TDR's") BY THE PROJECT SPONSOR.

No TDR will be used for the proposed project, as it is located in the RH-2 District.

8. **General Plan Compliance.** The General Plan Consistency Findings set forth in Motion No. 18592 apply to this Motion, and are incorporated as though fully set forth herein.

9. **Planning Code Section 101.1(b).** The General Plan Priority Policy Findings of Planning Code Section 101.1 as set forth in Motion No. 18592 apply to this Motion, and are incorporated as though fully set forth herein.

10. The St. Luke's Replacement Hospital and MOB Project is consistent with and would promote the general and specific purposes of the Code provided under Section 101.1(b) as outlined in Motion No. 18592 and also in that, as designed, the St. Luke's MOB provides support to the Replacement Hospital, would contribute to the healthcare delivery and emergency services in San Francisco, include substantial economic benefits to the City during both the construction and operational phases, provide substantial other public benefits as outlined in the proposed Development Agreement, and be compatible with the character and stability of the neighborhood, thereby constituting a beneficial development.

11. The Commission hereby finds that, for the reasons described above, approval of the Office Allocation would promote the health, safety and welfare of the City.
DECISION

That based upon the Record, the submissions by the Applicant, the staff of the Department and other interested parties, the oral testimony presented to this Commission at the public hearings, and all other written materials submitted by all parties, the Commission hereby APPROVES Office Allocation Application No. 2009.0886MTZCBRSK subject to the following conditions attached hereto as "EXHIBIT A" in general conformance with plans on file, dated February 22, 2012, and stamped "EXHIBIT B", which is incorporated herein by reference as though fully set forth.

APPEAL AND EFFECTIVE DATE OF MOTION: Any aggrieved person may appeal this Conditional Use Authorization to the Board of Supervisors within thirty (30) days after the date of this Motion No. 18595. The effective date of this Motion shall be as described in Exhibit A hereto. For further information, please contact the Board of Supervisors at (415) 554-5184, City Hall, Room 244, 1 Dr. Carlton B. Goodlett Place, San Francisco, CA 94102.

I hereby certify that the Planning Commission ADOPTED the foregoing Motion on April 26, 2012.

Linda D. Avery
Commission Secretary

AYES: Fong, Antonini, Borden, Miguel, Moore, and Sugaya

NAYS:

ABSENT: Wu

ADOPTED: April 26, 2012
EXHIBIT A

AUTHORIZATION

This authorization is for an allocation of office square footage under the 2011-2012 Annual Office-Development Limitation Program for the addition of approximately 99,848 square feet of office space to the subject property, pursuant to Planning Code Sections 321 and 322, for the St. Luke’s MOB (for purposes of this Exhibit A only, referred to as the "Project") on Assessor’s Blocks/Lots: 6575/001, 002 within the RH-2 (Residential, House, Two-Family) Zoning District, and 105-E Height and Bulk District; in general conformance with plans, dated February 22, 2012, and stamped “EXHIBIT B” included in the docket for Case No. 2009.0886MTZCRSK and subject to conditions of approval reviewed and approved by the Commission on April 26, 2012 under Motion No. 18595. This authorization and the conditions contained herein run with the property and not with a particular Project Sponsor, business, or operator.

RECORDATION OF CONDITIONS OF APPROVAL

Prior to the issuance of the building permit or commencement of use for the Project, the Zoning Administrator shall approve and order the recordation of a Notice in the Official Records of the Recorder of the City and County of San Francisco for the subject property. This Notice shall state that the Project is subject to the conditions of approval contained herein and reviewed and approved by the Planning Commission on April 26, 2012, under Motion No. 18595.

PRINTING OF CONDITIONS OF APPROVAL ON PLANS

The conditions of approval under the “EXHIBIT A” of this Planning Commission Motion No. 18595 shall be reproduced on the Index Sheet of construction plans submitted with the site or building permit application for the Project. The Index Sheet of the construction plans shall refer to the Conditional Use authorization and any subsequent amendments or modifications.

SEVERABILITY

The Project shall comply with all City codes and requirements applicable to the Project. The term "applicable to the Project" refers to applicable laws in the Development Agreement. If any clause, sentence, section or any part of these conditions of approval is for any reason held to be invalid, such invalidity shall not affect or impair other remaining clauses, sentences, or sections of these conditions. This decision conveys no right to construct, or to receive a building permit. “Project Sponsor” shall include any subsequent responsible party.

CHANGES AND MODIFICATIONS

Changes to the approved plans may be approved administratively by the Zoning Administrator. Significant changes and modifications of conditions shall require Planning Commission approval of a new Office Allocation authorization.
Conditions of approval, Compliance, Monitoring, and Reporting

PERFORMANCE

1. **Validity and Expiration.** The authorization and right vested by virtue of this action is valid for 18 months from the effective date, as defined in Condition of Approval No. 5, as it may be extended under Condition of Approval No. 2. A building permit from the Department of Building Inspection to construct the project and/or commence the approved use must be issued as this office allocation authorization is only an approval of the proposed project and conveys no independent right to construct the project or to commence the approved use. The Planning Commission may, in a public hearing, consider the revocation of the approvals granted if a site or building permit has not been obtained within 18 months of the effective date. Once a site or building permit has been issued, construction must commence within the timeframe required by the Department of Building Inspection and be continued diligently to completion. The Commission may also consider revoking the approvals if a permit for the Project has been issued but is allowed to expire and more than 18 months have passed since the effective date.

For information about compliance, contact Code Enforcement, Planning Department at 415-575-6863, www.sf-planning.org

2. **Extension.** This authorization may be extended at the discretion of the Zoning Administrator only where failure to issue a permit by the Department of Building Inspection is caused by a delay by a local, State or Federal agency or by any appeal of the issuance of such permit(s). This authorization shall also be extended for the number of days equal to the period of any litigation challenging its validity.

For information about compliance, contact Code Enforcement, Planning Department at 415-575-6863, www.sf-planning.org

3. **Mitigation Measures.** Mitigation measures described in the Mitigation, Monitoring and Reporting Program attached as Exhibit 1 to Attachment A of the CEQA Findings Motion No. 18589 (the “MMRP”) and designated as applicable to St. Luke’s Near Term Projects therein are necessary to avoid potential significant effects of the proposed Project and have been agreed to by the Project Sponsor. Their implementation is a condition of Project approval to the extent they are applicable to the St. Luke’s MOB.

For information about compliance, contact Code Enforcement, Planning Department at 415-575-6863, www.sf-planning.org

4. **Improvement Measures.** Improvement measures described in the IMMRP attached as Exhibit C to Motion No. 18594, and designated as applicable to St. Luke’s Near Term Projects therein are necessary to reduce the less than significant impacts of the proposed Project and have been agreed to by the Project Sponsor. Their implementation is a condition of Project approval to the extent they are applicable to the St. Luke’s MOB.

For information about compliance, contact Code Enforcement, Planning Department at 415-575-6863, www.sf-planning.org
PROVISIONS

5. Effective Date. This approval is contingent on and will be of no further force and effect until, the date that the ordinance approving a Development Agreement for the Project is effective and operative. References in this Exhibit A to Codes and requirements "applicable to the Project" shall refer to applicable laws in the Development Agreement.

For information about compliance, contact the Case Planner, Planning Department at 415-558-6378, www.sf-planning.org

MONITORING - AFTER ENTITLEMENT

6. Enforcement. Violation of any of the Department conditions of approval contained in this Motion or of any other provisions of Planning Code applicable to the Project shall be subject to the enforcement procedures and administrative penalties set forth under Planning Code Section 176 or Section 176.1. The Department may also refer the violation complaints to other city departments and agencies for appropriate enforcement action under their jurisdiction.

For information about compliance, contact Code Enforcement, Planning Department at 415-575-6863, www.sf-planning.org

7. Revocation due to Violation of Conditions. Should implementation of this Project result in complaints from interested property owners, residents, or commercial lessees which are not resolved by the Project Sponsor and found to be in violation of provisions of the Planning Code applicable to the Project and/or the specific conditions of approval for the Project as set forth in Exhibit A of this Motion, the Zoning Administrator shall refer such complaints to the Commission, after which it may hold a public hearing on the matter to consider revocation of this authorization.

For information about compliance, contact Code Enforcement, Planning Department at 415-575-6863, www.sf-planning.org

OPERATION

8. Community Liaison. Prior to issuance of a building permit to construct the Project and implement the approved use, the Project Sponsor shall appoint a community liaison officer to deal with the issues of concern to owners and occupants of nearby properties. The Project Sponsor shall provide the Zoning Administrator with written notice of the name, business address, and telephone number of the community liaison. Should the contact information change, the Zoning Administrator shall be made aware of such change. The community liaison shall report to the Zoning Administrator what issues, if any, are of concern to the community and what issues have not been resolved by the Project Sponsor.

The community liaison will convene a community advisory group (CAG) for the purpose of conveying input to the project sponsor on its operations and providing a forum for community comment and concern. The CAG shall consist of approximately ten (10) members representing diverse neighborhood interests such as health care providers, established neighborhood groups, resident homeowners and local merchants, and its membership is expected to change over time. Once the CAG is established, the community liaison and CAG members will agree to a regular
meeting schedule, with a frequency of not less than quarterly or more than monthly. The agenda for meetings will be set jointly by the community liaison and the CAG. The community liaison will facilitate and provide logistical support for all meetings, including scheduling and providing meeting space if needed.

For information about compliance, contact Code Enforcement, Planning Department at 415-575-6863, www.sf-planning.org

9. Construction Management Plan. Prior to issuance of a building permit to construct the Project and implement the approved use, the Project Sponsor shall produce a Construction Management Plan, which shall include general operating principals and commitments not otherwise included in these Conditions of Approval, along with operating principles during specific phases of work. This Plan shall be made available to the neighbors or interested parties, and a copy of said Plan shall be provided to the Department to include in the file for Case No. 2009.0886C. A draft of the Construction Management Plan shall be made available to any interested party at least 10 days before the final draft is submitted to the Planning Department.

For information about compliance, contact the Case Planner, Planning Department at 415-558-6378, www.sf-planning.org

10. Hours of Operation. The St. Luke’s Replacement Hospital and MOB will be generally open to the public and for visitors during the following hours of operation: Hospital: 7 days a week, 7:00 a.m. to 7:00 p.m., MOB: Monday through Friday from 7:00a.m. to 7:00p.m. The Campus is open, as may be reasonably necessary, to accommodate visitors, staff, and employees of the hospital during hours outside of the standard hours of operation; the Emergency Department is open 24 hours/day, 7 days per week. The main ground floor entry to the Hospital and MOB shall remain open and accessible to the public during standard hours of operation (7:00a.m. to 7:00p.m., M-F, Hospital including Sat/Sun).

For information about compliance, contact Code Enforcement, Planning Department at 415-575-6863, www.sf-planning.org
## EXHIBIT 3: IMPROVEMENT MEASURES MONITORING AND REPORTING PROGRAM

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<tr>
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**IMPROVEMENT MEASURES AGREED TO BY PROJECT SPONSOR**

**TRANSPORTATION AND CIRCULATION**

**I-TR-5 (Cathedral Hill): Off-Street Parking Queue Abatement**

It shall be the responsibility of the owner/operator of any off-street parking facility primarily serving a non-residential use, as determined by the Planning Director, with more than 20 parking spaces (excluding loading and car-share spaces) to ensure that recurring vehicle queues do not occur on the public right-of-way. A vehicle queue is defined as one or more vehicles blocking any portion of any public street, alley or sidewalk for a consecutive period of three minutes or longer on a daily or weekly basis.

If a recurring queue occurs, the owner/operator of the parking facility shall employ abatement methods as needed to abate the queue. Suggested abatement methods include but are not limited to the following: redesign of facility layout to improve vehicle circulation and/or on-site queue capacity; employment of parking attendants; installation of LOT FULL signs with active management by parking attendants; use of valet parking or other space-efficient parking techniques; use of off-site parking facilities or shared parking with nearby uses; use of parking occupancy sensors and signage directing drivers to available spaces; travel demand management strategies such as additional bicycle parking, customer shuttles or delivery services; and/or parking demand management strategies such as parking time limits, paid parking or validated parking.

If the Planning Director, or his or her designee, suspects that a recurring queue is present, the Department shall notify the property owner in writing. Upon request, the owner/operator shall hire a qualified transportation consultant to evaluate the conditions at the site for no less than seven days. The consultant shall prepare a monitoring report to be submitted to the Department for review. If the Department determines that a recurring queue does exist, the facility owner/operator shall have 90 days from the date of the written determination to abate the queue.
### Improvement Measures

#### I-TR-40 (Cathedral Hill): Pedestrian Improvements

As an improvement measure to facilitate pedestrian movements, SFMTA should install pedestrian countdown signals for all directions at the signalized intersections of Franklin/Sutter, Franklin/Post, Franklin/Geary, Van Ness/Sutter, Van Ness/Post, and Polk/Post.

In addition to the above, although the project would have less than significant impacts on the pedestrian and bicycle environment, the project sponsor has agreed as part of the development agreement negotiations to provide certain funding for City agencies, including Planning, SFMTA and DPW, to study and possibly implement additional streetscape, pedestrian, and related improvements in the vicinity of the proposed Cathedral Hill Campus that would improve the less-than-significant impacts to the pedestrian and bicycle environment. Improvements under consideration by the City would be consistent with those identified in the Little Saigon Report as well as other potential sidewalk improvements such as bulb-outs, lighting and pedestrian signal modifications, advance stop bars, right turn vehicle turn restrictions and other safety facilities, at such intersections as Polk Street/Ellis Street, Larkin Street/Geary Street, Larkin Street/Grove Street, Larkin Street/9th Street, Hyde Street/O’Farrell Street, and Leavenworth Street/Geary Street. The City would have sole authority to determine whether to proceed with the Tenderloin and Little Saigon neighborhood area improvements and to issue required permits and authorizations. The City would also retain the discretion to modify or select feasible alternatives to the improvements to avoid any identified impacts or concerns that arise in connection with their further review, including any required environmental review under CEQA.

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<tr>
<td>I-TR-40 (Cathedral Hill): Pedestrian Improvements</td>
<td>Project Sponsor/Planning Department/SFMTA/DPW</td>
<td>Prior to operation</td>
<td>Installation of pedestrian countdown signals at the Franklin/Sutter, Franklin/Post, Franklin/Geary, Van Ness/Sutter, Van Ness/Post, and Polk/Post intersections. Funding to allow City agencies to studyand possibly implement additional streetscape, pedestrian, and related improvements such as lighting, pedestrian signal modifications, bulb-outs, advanced stop bars, and right turn vehicle restrictions, at such intersections as Polk/Ellis, Larkin/Geary, Larkin/Grove, Larkin/9th, Hyde/O’Farrell, and Leavenworth/Geary.</td>
<td>Project Sponsor/Planning Department/SFMTA/DPW</td>
<td>Considered complete upon installation and implementation of pedestrian improvements.</td>
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### I-TR-87 (St. Luke’s): Provide Pedestrian/Bicycle Improvements

CPMC should implement improvement measures to minimize conflicts between vehicles, bicyclists, and pedestrians at the Cesar Chavez Street passenger loading/unloading zone, including: warning signs and colored bicycle lane treatment to alert drivers to the presence of bicyclists and bicycle lanes, and management of the passenger loading/unloading zone during peak periods of activity (e.g., between 10 a.m. and 4 p.m.).

As an improvement measure to minimize conflicts between vehicles exiting the proposed garages and pedestrians and bicyclists on Valencia Street and Cesar Chavez Street, CPMC should install flashing lights and audible signals to provide indications when a vehicle is exiting the garage.

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<tr>
<td>Project Sponsor</td>
<td>Installation of warning signs, bicycle lane treatment, flashing lights, and audible signals prior to operation. Management of passenger loading/unloading zone ongoing during operations.</td>
<td>Project Sponsor to provide pedestrian/bicycle safety improvements and manage passenger loading/unloading zone during peak periods of activity.</td>
<td>Project Sponsor and SFMTA</td>
<td>Installation of improvements considered complete upon construction completion. Management of passenger loading/unloading zone ongoing during operations.</td>
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### I-TR-88 (St. Luke’s): Install Pedestrian Crosswalks

As an improvement measure to facilitate pedestrian movements, SFMTA shall install pedestrian crosswalks at the unsignalized intersection of San Jose/27th Street.

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<td>Project Sponsor and SFMTA</td>
<td>Prior to operation SFMTA to install pedestrian crosswalks</td>
<td>Project Sponsor and SFMTA</td>
<td>Considered complete upon installation of pedestrian crosswalks</td>
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### AIR QUALITY


This improvement measure is identical to Mitigation Measure M-AQ-N2 for the Cathedral Hill Campus, which provides:

To reduce risk associated with exhaust emissions of DPM by construction equipment during construction of the Cathedral Hill Campus and all other LRDP sites, CPMC and its construction contractor shall implement the following BAAQMD-recommended control measures during construction:

Where sufficient electricity is available from the PG&E power grid, electric power shall be supplied by a temporary power

Improvement Measures

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connection to the grid, provided by PG&E. Where sufficient electricity to meet short-term electrical power needs for specialized equipment is not available from the PG&E power grid, non-diesel or diesel generators with Tier 4 engines (or equivalent) shall be used.

During any construction phase for near-term projects, at least half of each of the following equipment types shall be equipped with Level 3-verified diesel emission controls (VDECs): backhoes, concrete boom pumps, concrete trailer pumps, concrete placing booms, dozers, excavators, shoring drill rigs, soil mix drill rigs, and soldier pile rigs. If only one unit of the above equipment types is required, that unit shall have Level 3 VDECs retrofits.

For long-term projects, which are presumed to being when Tier 4 equipment would be widely available, all diesel equipment of all types shall meet Tier 4 standards.

BIOLOGICAL RESOURCES

I-BI-N2 (St. Luke’s [with or without variants]):

As an improvement measure, CPMC would prepare a tree protection plan to be submitted to DPW as part of the construction plans for the St. Luke’s Campus. The landmark tree located directly east of the 1957 Building, fronting Valencia Street, is not proposed for removal; therefore, impacts on the landmark tree would be less than significant. However, a tree protection plan would be implemented to further protect the existing landmark tree from potential adverse construction impacts that could affect the health of the tree. Through consultation of a certified arborist, CPMC would implement a Tree Protection Zone (TPZ) around the landmark tree during demolition and construction activities. The TPZ would be determined by the certified arborist at the time the work is done. During the various construction phases, the TPZ should follow all of the measures outlined below:

- Install and maintain construction fencing to prevent entry to the TPZ.
- Install wood chip mulch over all exposed soil areas within the TPZ.

C P M C  L O N G  R A N G E  D E V E L O P M E N T  P L A N  P R O J E C T
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MONITORING AND REPORTING PROGRAM

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TPZ.

- Prohibit placement of any construction vehicle within the TPZ.
- Do not store materials, excavation tailing, or debris within the TPZ, unless placed on a thick plywood root buffer.
- If trenching or grading takes place within the TPZ, ensure that the project arborist will review the proposed work and retain the arborist on-site during that aspect of the work.

The arborist report and tree protection plan would be reviewed by DPW’s Bureau of Urban Forestry to verify that the specified protections would be adequate to protect the landmark tree. The Bureau of Urban Forestry would also monitor the project site during demolition and construction activities to ensure that the protection measures outlined in the tree protection plan are being implemented and are adequate, and that the landmark tree would not be damaged.

GEOLOGY AND SOILS

I-GE-N6 (Cathedral Hill):

An excavation monitoring program shall be developed for construction of the Cathedral Hill MOB. The program shall include requirements for the installation and regular monitoring of survey points and inclinometers should dewatering be required. Excavation and dewatering activities shall be shut down should unacceptable movement of overlying soil occur.

HAZARDS AND HAZARDOUS MATERIALS

I-HZ-N1// I-HZ-N3 (Cathedral Hill: Davies [near-term], St. Luke’s [with or without variants]):

CPMC shall ensure that the project contractors remove and properly dispose of PCB- and mercury-containing equipment prior to the start of project-related demolition or renovation.

Project Sponsor/Construction Contractor(s) to consider complete upon receipt of final report at completion of construction.
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<td>ensure that PCB- and mercury-containing equipment are removed and property disposed</td>
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<td>monitoring report at completion of construction.</td>
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