

## CHINESE HOSPITAL

845 JACKSON STREET SAN FRANCISCO, CALIFORNIA 94133 TEL (415) 982-2400 FAX (415) 217-4188

To: Scott Sanchez

**Zoning Administrator** 

City and County of San Francisco

From: Linda Schumacher

**Chief Operating Officer** 

Chinese Hospital

Date: June 19, 2014

Re: Institutional Master Plan Update

Dear Mr. Sanchez,

Please find attached an update to the Chinese Hospital Institutional Master Plan for your review. As indicated in the Planning Code for the City and County of San Francisco Section 304.5 (b) requires that an Institutional Master Plan (IMP) be filed with the Planning Department and thereafter be updated or modified at least every two years and a full IMP be filed every ten years. Additionally, the Zoning Administrator shall be notified whenever the following occur to determine whether a new Institutional Master Plan or an update shall be required: there are significant revisions to the information contained in the Institutional Master Plan; or 10 years have passed since the last Institutional Master Plan. Significant revisions may include plans to construct new facilities that were not previously discussed in the IMP, plans to demolish existing facilities that were not discussed in the IMP, closure of an existing unit, opening a new unit, change in use of an existing unit or inpatient facility, an increase in the institutions size by 10,000 square feet or 25% of total square footage (whichever is less), or significant changes in use of existing facilities that were not discussed in the IMP. A full IMP for Chinese Hospital was submitted to the Planning Department in September 2010 and accepted by the Planning Commission in May 2011. An update to the full IMP was submitted in September 2012.

In Section 304.5 (f), the Planning Code defines the frequency and the components of the updated IMP. The Update shall include a description of all projects that: (1) have been completed since the most recent submission; (2) are ongoing, including a description of the status and estimated timetables for completion of such projects; (3) are scheduled to begin in the upcoming 24 months, including estimated timetables for the

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CITY & COUNTY OF S.F. PLANNING DEPARTMENT

commencement, progress, and completion of such projects, and, (4) are no longer being considered by the institution. The Update will not require a public hearing, although the document will be made publically accessible. The updates contained in this memo do not require submission to the Department of Public Health, as none of the changes completed or contemplated involve "the addition or removal of any licensed or staffed hospital beds and emergency services, and transfer of services..." as described in Section 304.5 (g) of the Planning Code.

I have included 20 copies of the IMP update.

Thank you for your time and consideration.

Sincerely, Indu Schumachu

Linda Schumacher

**Chief Operating Officer** 

Chinese Hospital



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To: Scott Sanchez

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Chief Operating Officer

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Date: June 19, 2014

Re: Institutional Master Plan Update

#### Background:

In accordance with Section 304.5 (b) of the San Francisco Planning Code, health care organizations are required to file an Institutional Master Plan (IMP) with the Planning Department and update or modify it at least every two years and file a full IMP every ten years. Additionally, the Zoning Administrator shall be notified whenever the following occur to determine whether a new Institutional Master Plan or an update shall be required: there are significant revisions to the information contained in the Institutional Master Plan; or 10 years have passed since the last Institutional Master Plan. Significant revisions may include plans to construct new facilities that were not previously discussed in the IMP, plans to demolish existing facilities that were not discussed in the IMP, closure of an existing unit, opening a new unit, change in use of an existing unit or inpatient facility, an increase in the institutions size by 10,000 square feet or 25% of total square footage (whichever is less), or significant changes in use of existing facilities that were not discussed in the IMP. A full IMP for Chinese Hospital was submitted to the Planning Department in September 2010 and accepted by the Planning Commission in May 2011.

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not require submission to the Department of Public Health, as none of the changes completed or contemplated involve "the addition or removal of any licensed or staffed hospital beds and emergency services, and transfer of services..." as described in Section 304.5 (g) of the Planning Code.

Additionally, an ordinance amending the San Francisco Planning Code (Ordinance No. 300-10) was passed by the Board of Supervisors in November 2010 which required the preparation of a Health Care Services Master Plan (HCSMP). The HCSMP was to identify the current and projected needs for, locations of, health care services within San Francisco and recommend a process to achieve and maintain appropriate distribution of and equitable access to services. In this ordinance, any change of use to a Medical Use, as defined, that will occupy a space exceeding 10,000 gross square feet of floor area, or an expansion of an existing Medical Use by at least 5,000 gross square feet of floor area must obtain a Consistency Determination from the Planning Commission or the Planning Department.

# **Completed Projects:**

- Additional administrative and general construction office space has been leased at 835 Pacific Avenue. The owner of 835 Pacific Avenue has completed some tenant improvements so that building can be used for these purposes. The work included the removal of non-structural walls, addition of two ADA compliant bathrooms, construction of new non-structural partitions, new fixtures and cosmetic finishes. A Temporary Use Determination was provided by the Planning Department regarding this work because of existing building conditions of floor area, a history of uninterrupted single tenant occupancy and administrative use of the building. The anticipated leasing of administrative space was noted in the IMP but not the exact location. This space has been occupied since the end of September 2012. (See Institutional Master Plan Section 2, Item F, Page 21)
- As noted in the IMP update filed in 2012, Chinese Hospital has opened an East West Medicine Center (a community acupuncture clinic) at 632 Commercial Street, San Francisco. This use is a permitted use under the Planning code as the building was previously occupied by a physical therapy service. The current owner has completed the tenant improvements such as painting, new fixtures and other cosmetic finishes. The space entails a total of 1,600 square feet including storage space and has been occupied since mid-2013. (See Institutional Master Plan Section 2, Item C, Pages 11 and 12).
- There are a number of modifications to the 1979 building that are required to facilitate the construction of the new hospital. These projects were approved by the Office of Statewide Health Planning and Development (OSHPD) and have been completed. They include the relocation of the mammography suite and physicians' lounge and library, the East wall window infill, and upgrades to the

loading dock. The renovations to the hospital kitchen will not start until after the new hospital is completed as the work would be too disruptive to current operations. The completed projects were finished and approved for occupancy by OSHPD and CDPH by mid-2013.

# **Projects Currently Underway:**

The following projects were referenced in the 2011 IMP or in the 2012 IMP update and are currently underway.

- Additional modifications to the 1979 building have been identified and are in various stages of design, waiting for OSHPD approval or are under construction. These include the portal connections between the two buildings, creation of the IT server rooms and a low voltage implementation plan, kitchen storage, and additional modifications to the loading dock area. These modifications will be completed by early 2016.
- The construction of the new hospital tower is proceeding on schedule and substantial completion of construction is expected in Q1 2016. The structural steel was installed and the topping out ceremony for the placement of the last beam was held on February 25, 2014. The concrete decks are being poured, the pre-cast exterior panels will be installed in October 2014 and the entire building will be dried in by Thanksgiving 2014. Interior construction will commence with the completion of the exterior.

#### Additional Projects (continuation of current services)

- Chinese Hospital has submitted plans to the San Mateo Building Department for an Out Patient Diagnostic Center that will be located at 386 Gellert Blvd, Daly City, CA 94015. This Center will include the following services: family practice primary care clinic, Radiology services including mammography and ultrasound, an out patient pharmacy and optical services. Construction is expected to start in June 2014 and will be completed in 2015. While this location is outside of the City and County of San Francisco, it is an important addition to the network of clinics operated by Chinese Hospital to further demonstrate Chinese Hospital's efforts to meet the health care needs of the community in general.
- Chinese Hospital currently operates two (2) family practice/internal medicine primary care clinics in San Francisco. These clinics are located in the Sunset District and the Excelsior District. The Patient Protection and Affordable Care Act and the subsequent creation of Covered California have had a significant impact on Chinese Hospital and Chinese Community Health Plan (CCHP). Chinese Community Health Plan is owned by Chinese Hospital and was one of the insurance carriers who qualified to provide insurance products through Covered California. Over 15,400 new patients have chosen CCHP as their insurance

carrier and as a result, our current primary care offices and the private primary care physicians in our community are experiencing a significant increase in demand for services. When the property at 933 Clement St. went on the market, CCHP made the decision to purchase the building with a plan to build a primary care clinic to meet the need for additional primary care providers in the Richmond District since many CCHP members reside in this District. The full extent of the services that will be offered in this location are still under discussion but will consist of related medical services such as mammography, general x-ray, ultrasound, phlebotomy, etc.

Since the building is less than 10,000 square feet and is not an expansion of an existing medical service of at least 5,000 feet, this project does not require a Consistency Determination under the HCSMP. The zoning requirements for the Inner Richmond District indicate that a Medical Use is principally permitted on the first floor of the building and a conditional use will be required to develop and use the second floor for medical services. The full extent of the services that will be provided at this location will be presented as part of the conditional use application process. The existing floor plans and plot plan for 933 Clement is attached for your information.

The estimated completion of construction at this site is mid-2016.

# Project no longer considered

There are no projects that were identified in the full IMP accepted by the Board of Supervisors in 2011 or in the update filed in 2012 that have been removed from our plans.

# REFURBISH EXISTING RESTAURANT FOR 933 CLEMENT STREET SAN FRANCISCO, CA

WED BY FIRE DEPY. 5/2/2001 INSPECTIONS

**PEGUEROS** 

# DRAWING INDEX

- 1. LEGEND, GENERAL NOTES, DRAWING INDEX
- 2. PLOT PLAN
- 3. HC. RULE AND CHECK LIST FORMS 1
- 4. HC. RULE AND CHECK LIST FORMS 2
- 5. EXISTING GROUND FLOOR PLAN
- 6. EXISTING UPPER FLOOR PLAN
- 7. ALTERED GROUND FLOOR PLAN & REFURBISH EXISTING RESTAURANT
- 8. ALTERED UPPER FLOOR PLAN
- 9. ALTERED GROUND FLOOR TABLE LAYOUT PLAN
- 10. ALTERED UPPER FLOOR TABLE LAYOUT PLAN
- 11. EXISTING STORE FRONT ELEVATION
- 12. ALTERED STORE FRONT ELEVATION
- 13. ENTRANCE DOOR AND WALL DETAILS
- 14. HANDICAPPED RESTROOM DETAILS

# LEGEND

EXISTING WALL TO BE REMIAN

EXISTING WALL TO BE REMOVED

NEW STUD WALL (2" X 6" OR 2" X 4")

**EXISTING** (E)

APPROVED

FRANK Y. CHIU, DIRECTOR

SINGLE POLE SWITCH

(E) FLOOR SINK

(E) FLOOR DRAIN

ILLUMINATED EXIT SIGN W/ EMERGENCY LIGHTING

14. HANDICAPPED RESTROOM DETAILS

TRAVEL OF PATH TO H.C. REST ROOM

ARE TO COMPT WITH HEARTH TENTHEMENT

CLASSIFICATION

APPROVED

212.3844 PLANNING DEPARTMENT

5/2/0

0

# GENERAL NOTES:

- ALL WORKS AND MATERIALS TO BE IN ACCORDANCE WITH REGULATIONS AND BUILDING CODES OF THE CITY AND COUNTY OF SAN FRANCISCO.
- ALL DIMENTIONS AND EXISTING CONDITIONS TO BE VERIFIED IN THE FIELD PRIOR TO COMMENCING WORK, AND SHALL BE THE RESPONSIBILTY OF THE CONTRACTOR. TO NOTIFY THE OWNER OR DESIGNER IF ANY DISCRIPANCE

FAN UNIT CONNECT TO LIGHTEPARTMENT OF BUILDING INSPECTIONUSE DF #2 FOR STUDS AND BLOCKINGS, AND SEE S.F. BUILDING CODES FOR SCHEDULE OF MINIMUN PERMISSIBLE CONNECTIONS AND REQUIREMENT IF NOT SPECIFIED HEREIN.

PROVIDE QUARRY TILE FLOORING FOR:

- WORKING AREA KITCHEN AREA.
- H.C. ACCESSIBLE REST ROOM.
- SWITCHING FOR LIGHT FIXTURES SHALL MEET TITLE 24 ENERGY REQUIREMENT.
- PROVIDE ONE ACCESSIBLE RESTROOM FOR EACH SEX SERVING TO MEET TITLE 24 REQUIREMANT.
- PROVIDE H.C. SEAT PER 25 SEATS REQUIREMENT TOTAL 10 SEATS TO COMPLY WITH TITLE 24.
- ALL INTERIOR MATERIALS AND EQUIPMENTS E CETT
- SHOULD AND ERROR OR INCONSISTENCY APPEARS OR OCCURS IN THE WORK, THE CONTRACTORS SHALL NOTIFY THE OWNER FOR PROPER ADJUSTMENT, AND-NO CASE SHALL PROCEED WITH THE WORK IN UNCERTAINLY.

AND GENERAL

1442

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- APRIL 200





# 20% HC RULE

COST OF CONSTRUCTION:

:75,000

20% COST OF CONSTRUCTION: 20% UPGRADE EXPENDITURES: 115,000

ITEMS:

1. FRONT ENTRANCE ACCES.

1. 1- HANDICAPPED RESTROOM:

: 3,500 \$13,000

TOTAL EXPENDITURE:

\$ 16,500 > 20% REGIRED

### PROFESSIONAL AFFIDAVIT (Continued)

This item must be checked by the Design Professional. The design professional must also be aware

Two federal laws, the Americans with Disabilities Act (ADA) and the Federal Fair Housing Act are now in effect. They impose new federal disability access requirements on construction projects. DBI does not enforce Federal Law and will not be checking plans for compliance with these requirements. It is your responsibility to make sure that your plans are in conformance with federal law.

For information concerning the ADA contact: the Architectural Transportation Barrier Compliance Board at 1-800-872-2253 or the Department of Justice at (202) 514-0301. For information concerning the Fair Housing Act contact: HUD at (415) 556-0800.

# APPROVED

DEPARTMENT OF BUILDING INSPECTION

MAY 2 2001

FRANK Y. CHIU, DIRECTOR

# DISABLED ACCESS COMPLIANCE CHECKLIST PROFESSIONAL AFFIDAVIT

Design professional: Incorporate this affidavit and the appropriate schedule from the checklist onto the cover sheet of the plan set when submitting a permit application to remodel or alter an existing building.

### PROJECT PROFILE:

Property Address: 933 CLEMENT ST.; Floor: GRD; Room/Suite #: Existing Occupancy: B2; Proposed Occupancy: B2
Existing Use: RESTAURANT; Proposed Use: RESTAURANT

#### CONSTRUCTION COST

- 1 Construction cost shall be based on the Marshall & Swift Construction Cost Index. DBI may accept bona-fide contract prices upon review and approval.

  Construction cost will be verified during plan check and inspection stages by DBI. In
- the event the cost has to be adjusted above the valuation threshold (based on the ENR US20 Cities average construction cost index. The cost index is updated annually, and the 1996 value is \$81,896.00. ), then your design may be required to provide full disabled access compliance.
- 3. When the project is valued under the threshold, then the construction cost will be used to evaluate the level of disabled access triggered by this project but it shall not exceed 20%.
- 4. The design professional shall verify all existing field conditions and certify that all information provided is accurate. A Stop Work Order or Correction Notice will be issued by DBI Inspector if the plans do not reflect the true field condition.

# PROFESSIONAL AFFIDAVIT (Please read and sign)

I have verified the existing site and building conditions for disabled access at the above proposed project and certify that all information shown on the attached checklist and referenced drawings is correct with regards to compliance with the disabled access provisions of the California Code of Regulations (CCR) Title-24.

Signature: (Design Professional/Responsible Person) CARSON YU Print Name: Address: 383-29 TH AVE

Phone No. (415) 681-8278

Date: 4-18-01

Check One:

DESIGNERS ☐ Architect

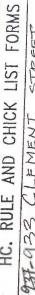
☐ Engineer

Other Design Professional

☐ License No. (If applicable)

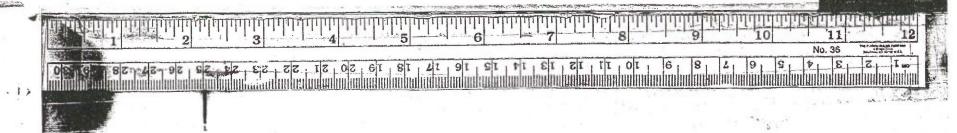
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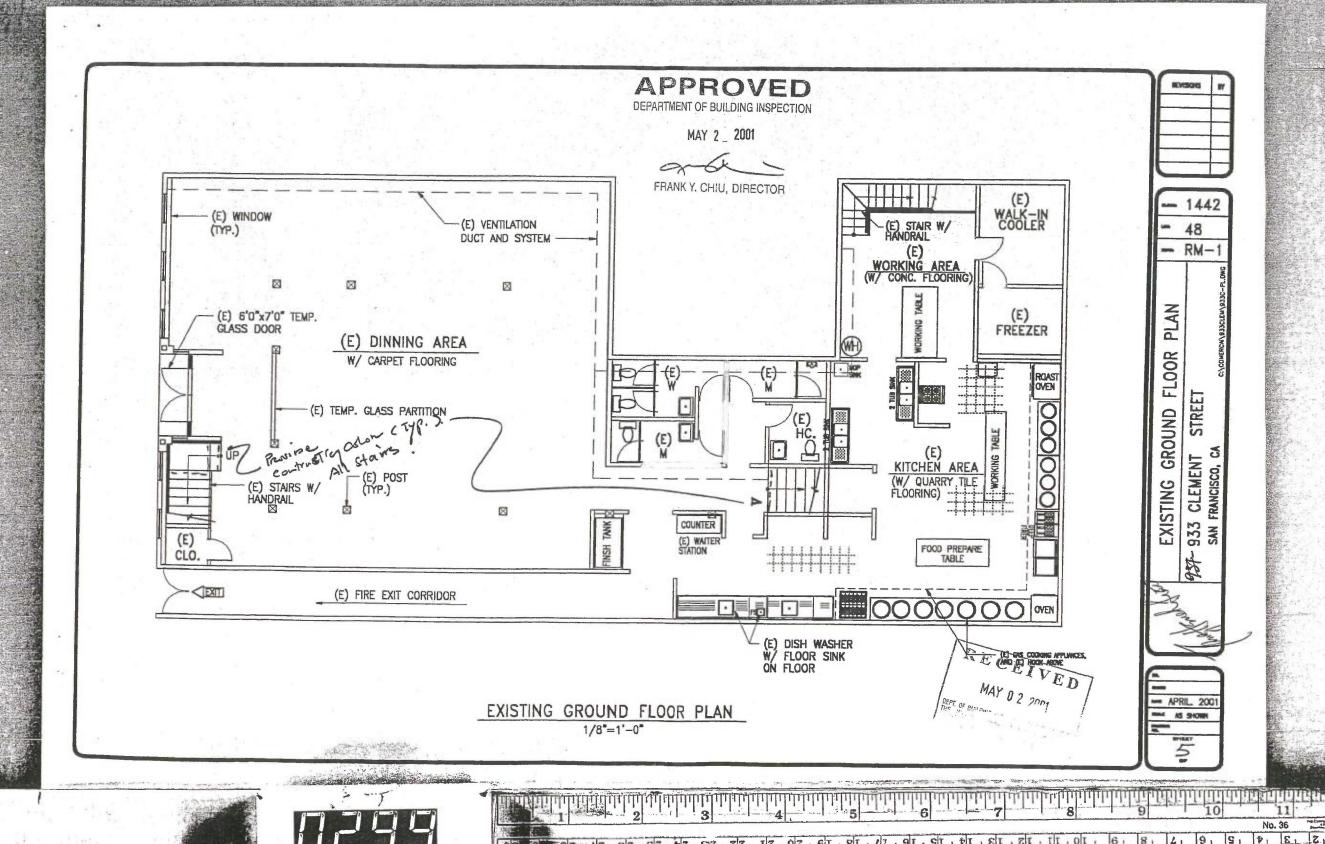


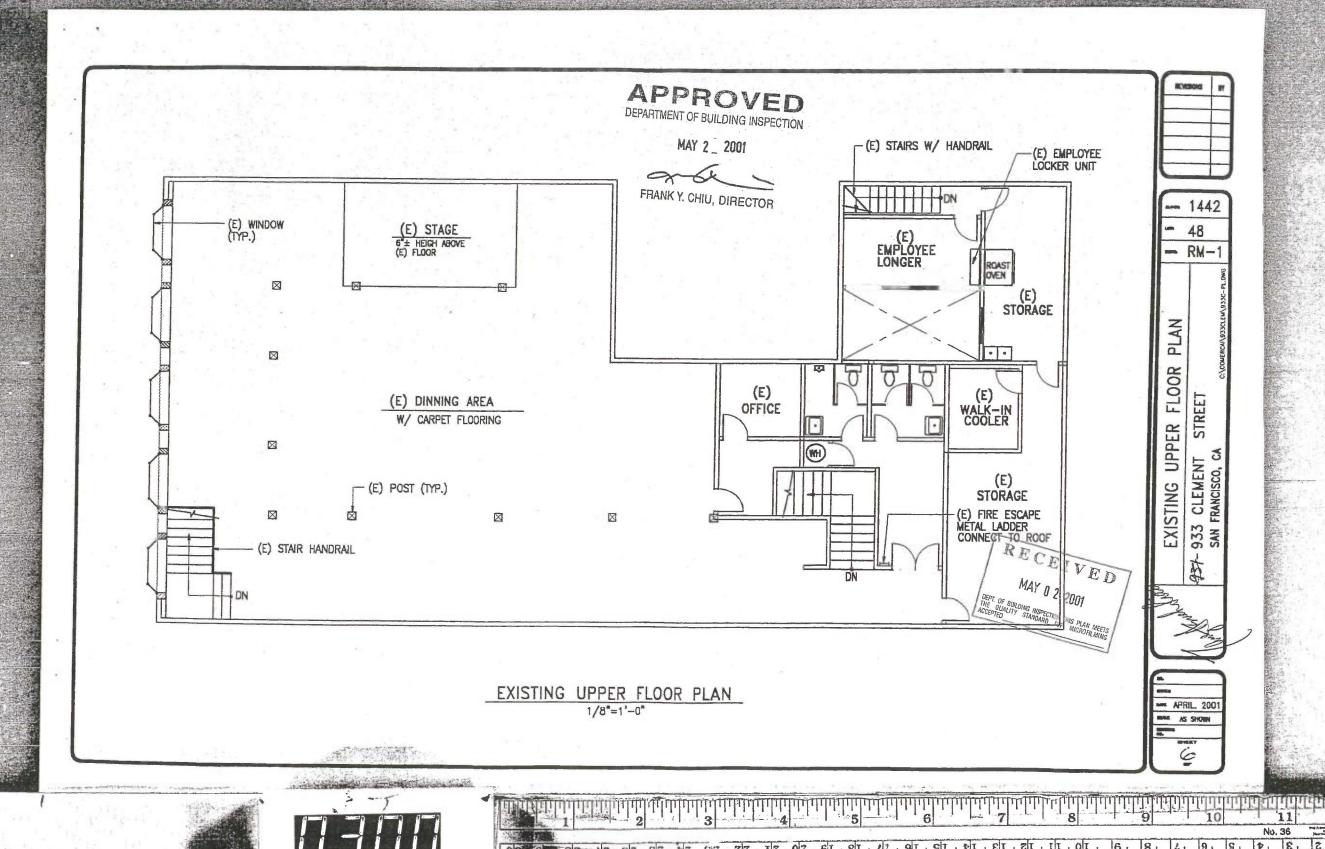
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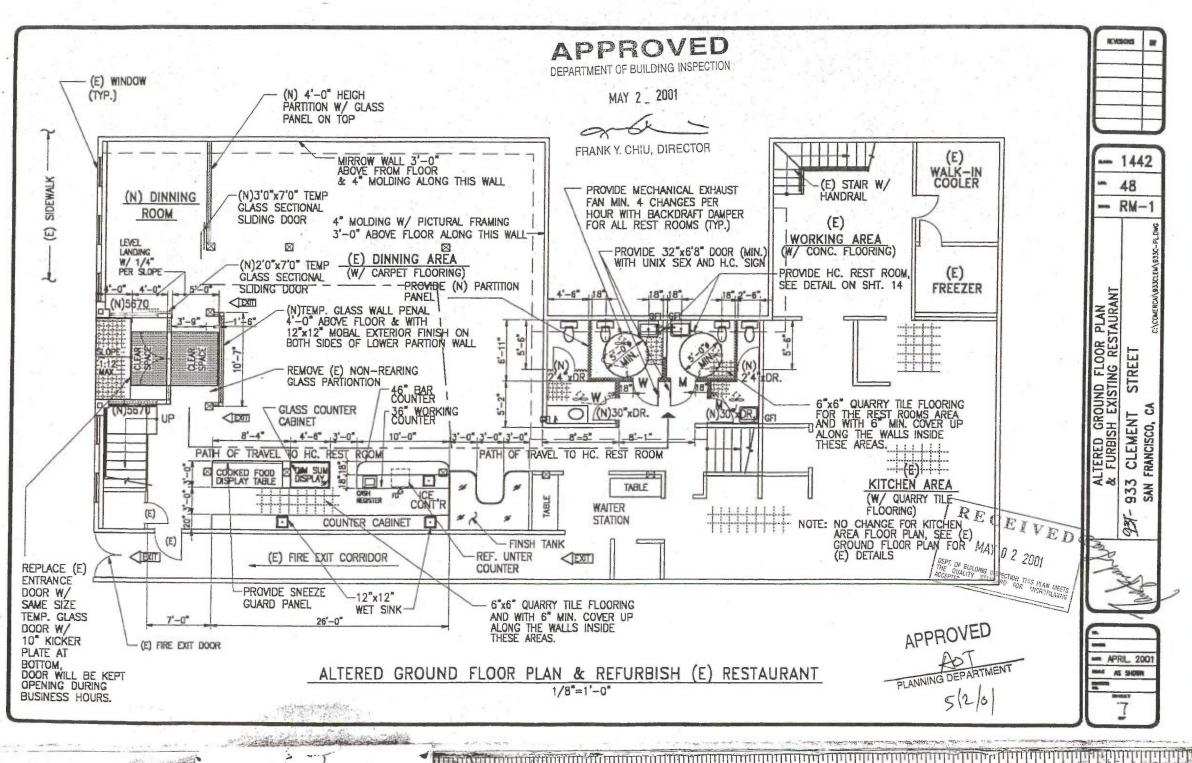




	Set #1: Projects Which Ar 1B: Required Accessibility	1.4									
	Project ete only one Schedule per project. Re									S.AMIR.	
less	construction cost of this protein \$86,770 "1998 ENR Coed annually.)	oject is onstructio	75,00 n Cost Ind	, which is ex". (The cost index is						-	
X Th	is project will provide upgraded di	sabled access	compliance.							FORMS	
	Ex	isting mplying	Upgrade to Complying	Details Shown on Sheet Number(s)						10/	
1.	At least one Accessible Entrance Serving the Area of Remodel Note: This should be a primary entrance. Additional upgrade may be required if it is not.		X	Diese Number(s)				APROVED  DEPARTMENT OF BUILDING INSPECTION		CHICK LIST	
2.	An Accessible Route to the Area of Remodel	×						MAY 2 _ 2001	V 198	AND CHI	
3.	At Least One Accessible Restroom for Each Sex Serving the Area of Remodel		×	7.0				FRANK Y. CHIU, DIRECTOR		RULE AN	
	Accessible Telephone	DNA		+ '				e *		. 100	Direction
5.	Accessible Drinking Fountain	DNA								五之	
	Signage	ON/A		•						13	
8.	Visual Alarm Others (Describe means of compliance such as parking spaces, elevator, etc.)	ПИ/A						REC	EIVED 0 2 2001	The state of the s	
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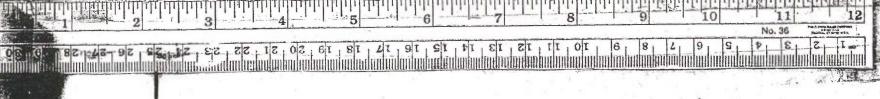


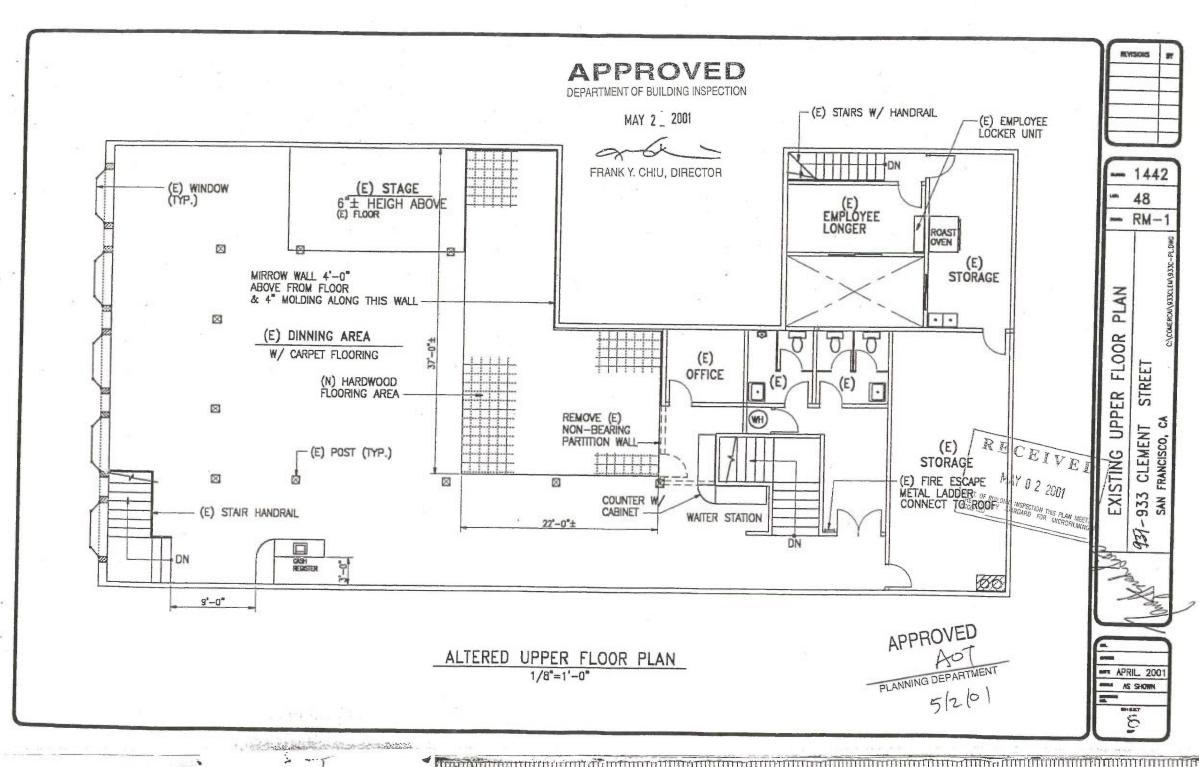






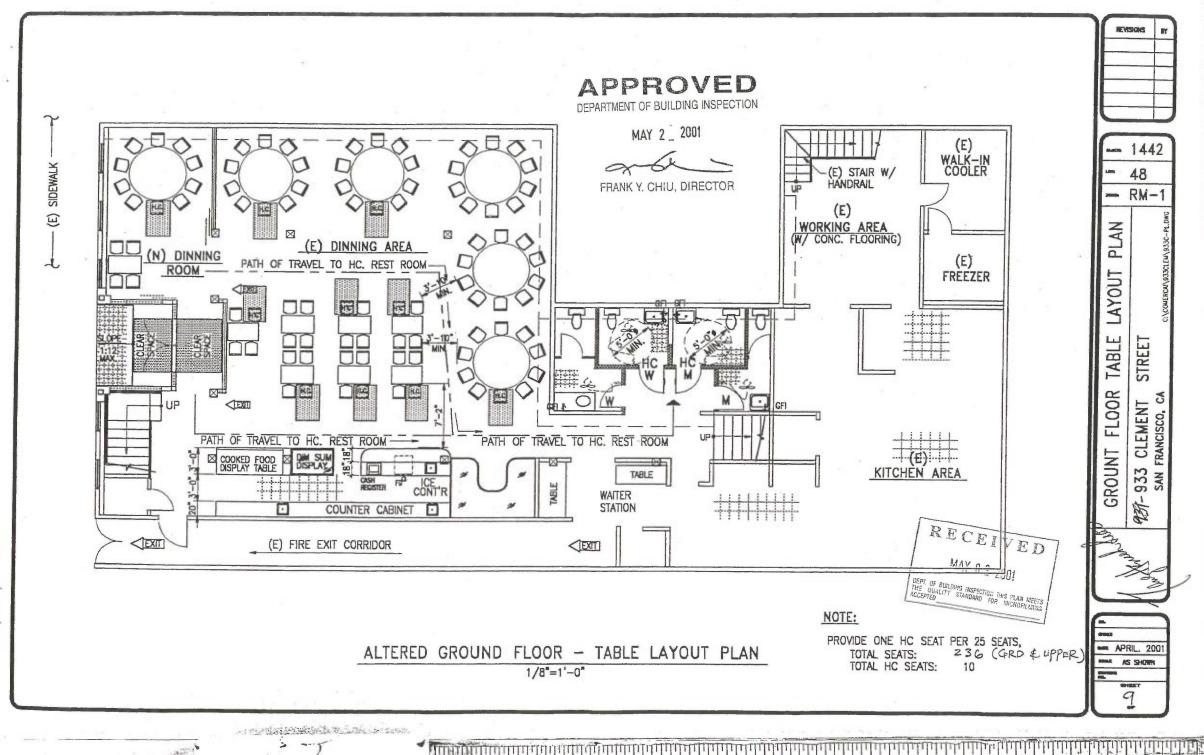
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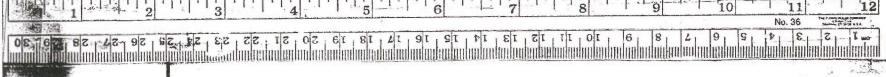


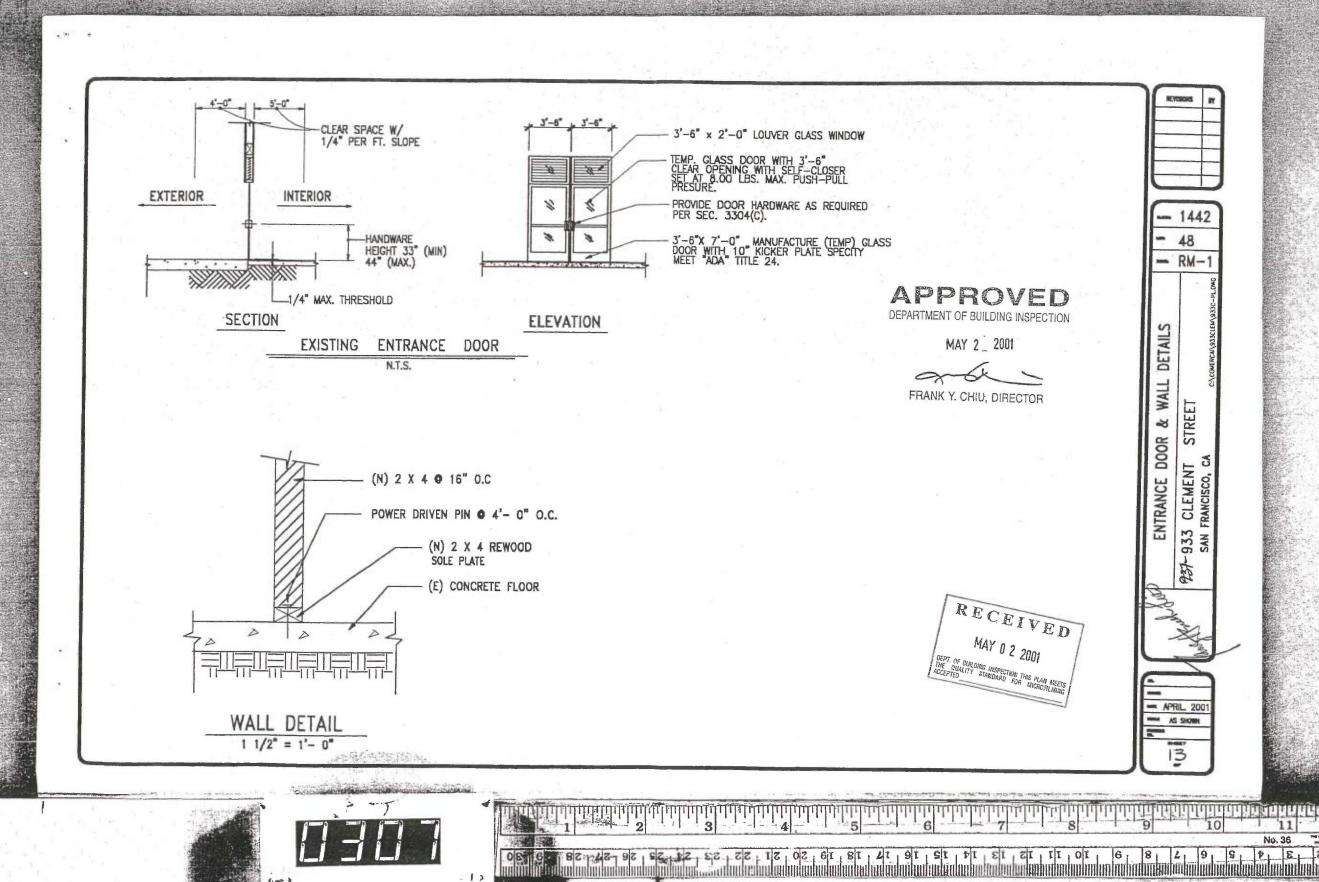


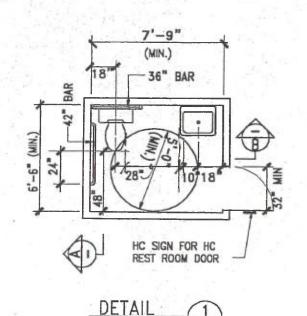
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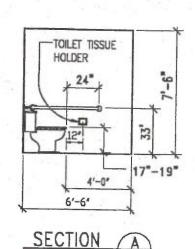


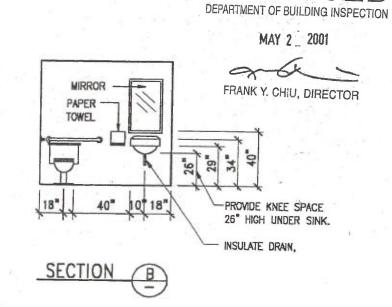












HANDICAPPED TOILET TITLE 24 REQ.

NOT TO SCALE

# NOTES:

- 1. PRIVACY LOCK ON DOOR WITH LEVER PYPE.
  2. UNISEX SYMBOL 1/4" THICK 60" A.F.F.
  IN CONTRACTING COLORS ON DOOR.
  3. GRAB BARS 1 1/2" DIA. X 36" FOR THE
  BACK SIDE AND 42" LONG FOR THE
- SIDE WALL. ALL SPACE 1 1/2" TO WALL.
  4. TOILET PAPER HOLDER WITHOUT STOPS.
  5. MIRROR 36"X 18"

- PATER TOWEL HOLDER MOUNTED AT 40" MAX.
   LAVATORY: WITH LEVER TYPE FAUCET, WRAP DRAW & HOT WATER PIPE WITH FOAM INSULATION.
   THRUSHOLD: MAX. HEIGHT 1/2" WITH 1/4" MAX. VERTICAL RISE BEVELLED AT 45'.
   DOOR: 32" CLEAR OPENING (MIN.) SELF-CLOSER SET AT 8.5 LBS MAX. PUSH PULL PRESSURE.



**APPROVED** 



- 1442

48

DETAILS

HANDICAPPED RESTROOM

STREET

CLEMENT FRANCISCO, CA

933 SAN F

RM-1



