

**APPENDIX J: LRDP AMENDMENT COMMITTEE
RECOMMENDATIONS**

**CHANCELLOR'S ADVISORY COMMITTEE ON THE LRDP AMENDMENT
RECOMMENDATIONS TO THE CHANCELLOR
AUGUST 25, 2004**

I. VISION

UCSF's vision for the future is to create and sustain vibrant, integrated clinical, research and educational programs building upon UCSF's unique strengths and ability to impact healthcare regionally, nationally and internationally.

- A. UCSF will invest in clinical facilities with forward-thinking translational research capabilities to speed the transfer of new medical knowledge to clinical practice.
- B. State-of-the-art, technologically advanced inpatient facilities will be developed at both Parnassus Heights and Mission Bay.
- C. All inpatient and outpatient facilities will be patient-centered and support the provision of accessible, effective, safe, affordable and equitable care.
- D. New and remodeled facilities will be flexible in their design to accommodate changes in technology, medical practice, patient demand and education into the future.
- E. Facilities will accommodate the evolving and growing regional need for specialty care services that are linked with UCSF's research and clinical strengths.
- F. UCSF will invest in and develop a new clinical and translational research outpatient center that builds on the research strengths of UCSF.
- G. Clinical research and educational needs will be fully integrated into building designs.
- H. UCSF will invest in tools and technology to optimize communication within and among our multi-sited programs.

II. PROGRAMMATIC CONCEPT

A. Parnassus Heights

- 1. Moffitt/Long Hospital will continue as a large inpatient facility for UCSF, at least until Moffitt Hospital is replaced as an inpatient facility no later than 2030.

2. Adult medicine and surgery specialty programs (*e.g.*, cardiovascular, neurosciences and transplant) will be primarily located at Parnassus Heights and supported by the comprehensive adult emergency department there.
 3. Moffitt/Long Hospital will receive continuous major investment to modernize facilities to support the care provided as planning proceeds to meet the 2030 need to replace Moffitt as an inpatient facility.
 4. A new inpatient pavilion will be built at Parnassus Heights as soon as a plan describing how it will be accommodated within the Parnassus Heights space ceiling is developed, and when financially feasible. This facility will replace core functions in Moffitt including operating theaters, intensive care units and radiology services.
 5. Research and educational facilities will be built and/or upgraded as part of a comprehensive plan for Parnassus Heights.
 6. Schools of Dentistry, Medicine, Nursing, Pharmacy and the Graduate Division will remain at Parnassus Heights.
- B. Mount Zion
1. A Master Planning Study describing alternative physical Master Plan options for the Mount Zion site has been completed. When specific projects at Mount Zion are proposed, the appropriate Master Plan option will be adopted as part of the LRDP.
 2. Mount Zion Hospital will continue as an inpatient facility until new facilities are available at Mission Bay, no later than December 2012.
 3. Mount Zion campus will continue beyond 2012 as a hub of ambulatory care services, (*e.g.*, Women's Health Center, Osher Center for Integrative Medicine, primary care, dermatology, dialysis, diagnostic services, ambulatory surgery and select cancer services) and related clinical and translational research in these areas.
 4. New parking and additional outpatient facilities will be developed.
- C. Mission Bay
1. Mission Bay will become an integral part of UCSF's clinical enterprise with both inpatient and outpatient facilities.

2. The inpatient facilities will be designed to house multiple, integrated specialty hospitals with additional growth potential.
3. Integrated specialty hospitals, including UCSF Children's Hospital (with a pediatric emergency department), a UCSF Women's Hospital and a UCSF Cancer Hospital, will be built in the first phase.
4. A new, innovative outpatient clinical and translational research center will be built and integrated with the specialty hospitals and UCSF's research programs at Mission Bay.
5. The acquisition of additional land beyond that which the University owns will be required.
6. Discussions will continue with the City regarding potential collaborations with SFGH. As part of the planning process to address options for UCSF's research programs in the seismically compromised brick buildings at SFGH, the need for a critical mass of 100,000 asf of replacement research space has been identified by UCSF faculty at SFGH. The appropriate location for such research space will be determined when the Department of Public Health identifies its preferred location for replacing SFGH's inpatient facilities, and funding for the preferred replacement plan is secured.

III. RATIONALE

- A. Three major facilities challenges identified by the UCSF Medical Center must be addressed by the hospital replacement planning process.
 1. Seismic problems. Mount Zion inpatient facilities need to be decommissioned by 2013; Moffitt by 2030.
 2. Functional obsolescence. None of UCSF's current hospital facilities were designed to accommodate today's medical equipment, including imaging equipment and computers, nor to accommodate changing medical and social needs (*e.g.*, the need for private rooms for infection management, or the need to have space for family members to stay overnight with sick children).
 3. Capacity. UCSF lacks sufficient beds to meet current demand, and needs more outpatient care facilities.

- B. Integrating multiple specialty hospitals at Mission Bay provides benefits for translational research.
1. "Bench to bedside" and "bedside to bench" collaboration among basic scientists, clinical researchers and physicians (the translational care spectrum) and the collaboration of multidisciplinary medical specialists (*e.g.*, perinatologists, fetal surgeons, cardiologists, cancer specialists and neurologists) will create a rich environment for new discoveries in the care of fetal, pediatric, maternal, women and cancer patients.
- C. In evaluating the options, several facts were considered relevant to our planning.
1. No one site – Parnassus Heights, Mount Zion or Mission Bay – is large enough to accommodate UCSF's total clinical inpatient program needs plus associated educational and research programs.
 2. Parnassus Heights has a limitation on the total amount of space that can be developed negotiated by The Regents and the State Legislature in 1976, meaning that any new building erected at Parnassus Heights must be matched with another building of equal size being torn down.
 3. Full emergency room services are needed in western San Francisco, so emergency services will remain at Parnassus Heights.
 4. New research facilities in neurosciences, cardiovascular research and cancer are planned and will be built at Mission Bay by 2010.
 5. State financial support is uncertain, so new hospital construction must be able to be financed through Medical Center retained earnings, debt capacity and philanthropy.
- D. A Children's Hospital was selected as a specialty hospital to be built at Mission Bay for several compelling reasons.
1. Children's services are uniquely separable from other services at Parnassus Heights.
 2. Children's is the largest single program that can be relocated from Parnassus Heights, freeing two floors in Moffitt/Long Hospital for the expansion of high-end adult specialty services consistent with UCSF's strategic clinical and academic goals.
 3. UCSF Children's Hospital is ranked the 11th best in the nation, making it the highest-ranked pediatric center in California, but this is not well known locally. A separate children's facility would provide the visibility and identity

that is currently lacking as a "hospital within a hospital," thereby improving the competitive position of UCSF Children's Hospital.

4. Children's hospitals are one of the two best options, along with cancer hospitals, for fundraising.
 5. The majority of UCSF Children's Hospital patients currently come from outside of San Francisco, and those patients would benefit from convenient regional access to Mission Bay.
 6. A separate children's hospital provides the most affordable overall operational model for UCSF. The most efficient operational model enables the quickest recharge of debt capacity needed for further facilities development, such as the new pavilion at Parnassus Heights and other potential specialty hospitals at Mission Bay.
- E. A Women's Hospital was selected as a specialty hospital to be built at Mission Bay for several important reasons.:
1. UCSF's national reputation in maternal-fetal and neonatal medicine is founded upon the close collaborative care between obstetrics/gynecology, neonatology and pediatric surgery. The co-location of UCSF Children's Hospital and a Women's Hospital will ensure continued excellence in the clinical care of complex maternal conditions, the diagnosis and treatment of birth defects, and our clinical investigation in maternal-fetal surgery.
 2. Relocating the Birth Center and Ob-Gyn department offices from Parnassus Heights will free an additional floor in Moffitt/Long Hospital for the expansion of high-end adult specialty services, consistent with UCSF's strategic clinical and academic goals.
 3. Women with high-risk pregnancies - as well as those with apparently normal pregnancies - can require emergent, highly specialized care from adult services. Integrated Women's and Cancer specialty hospitals will create the critical mass of adult patients to ensure comprehensive medical and surgical consultations for high risk pregnant women.
 4. Co-location of a Women's Hospital with a Cancer Hospital and UCSF Children's Hospital represents further opportunity for UCSF to develop innovative and comprehensive inpatient and outpatient women's health care thus enhancing its leading position as a designated National Center of Excellence in Women's Health.
 5. The co-location of a Women's Hospital with pediatric and cancer services affords a unique opportunity to develop new models of women-centered

inpatient and outpatient care for a range of conditions including infertility, pregnancy, non-cancerous conditions like fibroids and pelvic pain, incontinence and pelvic organ prolapse, breast cancer and gynecologic cancer.

6. Expanding multidisciplinary women's health practices to Mission Bay enhances UCSF's ability to develop translational research programs to advance women's health, *e.g.*, cancer, cardiovascular, dementia, PCOD, incontinence, hormone therapies for disease and symptom relief, prenatal genetic diagnosis and fetal treatment.
 7. As a National Center of Excellence in Women's Health and with a successful, growing ambulatory Women's Health Center at Mount Zion, UCSF is uniquely positioned to attract women's health donors, a currently under-developed resource.
- F. A Cancer Hospital was selected as a specialty hospital to be built at Mission Bay for several important reasons.
1. A Cancer Hospital will replace the current cancer beds at Mount Zion which must be decommissioned by the December 2012 seismic deadline.
 2. Patients receiving care at a Children's Hospital would greatly benefit from the presence of cancer specialists. A large portion of all children's hospitalizations at UCSF Children's Hospital are attributable to cancer and cancer-related issues. Much of UCSF's leading research seeks to understand the cancer mechanism - beginning at birth - so that cancer can be detected and treated early in life.
 3. Breast and cervical cancer are an important part of women's comprehensive health services, which will benefit from the co-location of a Cancer Hospital with a Women's Hospital.
 4. The location of a Cancer Hospital adjacent to new cancer research laboratories at Mission Bay will provide a synergistic opportunity for the discovery and development of new treatments. UCSF ranks fourth amongst National Cancer Institute (NCI) funded Cancer Centers, and is the only Comprehensive Cancer Center in Northern California.
 5. The strategic growth of inpatient cancer services at UCSF will depend on ease of access from outside the immediate metropolitan area, and a Cancer Hospital at Mission Bay will benefit from convenient access to San Francisco International Airport and to other regional transportation routes. Mission Bay is the logical place to locate the Cancer Center to allow for continued growth in volume of patient care.

6. Recent fundraising success with the cancer research building planned for Mission Bay demonstrates that support for cancer programs resonates with UCSF's donor base. Cancer hospitals are one of the two best options, along with children's hospitals, for fundraising and philanthropy will be a critical component, along with Medical Center retained earnings and debt capacity, in achieving UCSF's hospital-replacement plans.

IV. PHASING

The complexity and cost of these plans requires that projects be phased in as resources enable new construction.

A. Phase 1 (2004 - 2012)

1. Overall
 - a. Conduct appropriate environmental review and other planning analyses.
 - b. Review and secure approval from the Office of the President and the Regents for the plan.
 - c. Further discuss the plan with elected officials, faculty, staff and community.
 - d. Prepare a detailed financial plan, including debt capacity, and begin major fundraising efforts.
 - e. Refine and evolve a comprehensive outpatient clinical care strategy.
2. Parnassus Heights
 - a. Develop a plan for the expansion of targeted clinical services (per the Medical Center Strategic Plan) and translational research programs into vacated hospital and ambulatory space.
 - b. Develop a campus plan to relocate academic programs and clinical services from Parnassus Heights in order to achieve the space ceiling goal identified in the current LRDP, and to enable the subsequent construction of a new inpatient pavilion.
 - c. Begin the relocation process to Mount Zion, Mission Bay or elsewhere.
 - d. Continue major modernization efforts including increased bed capacity, investment in information technology and infrastructure, new equipment,

improved emergency services, expanded operating rooms and imaging facilities, etc.

- e. Develop priorities with faculty leadership for the most important near-term investments to improve the Moffitt/Long Hospital environment for patients.
- f. Expand and modernize research and educational facilities.

3. Mount Zion

- a. Develop a plan for short and long-term clinical program development and for the strategic use of vacated inpatient, outpatient and research space.
- b. Evaluate opportunities to build or acquire additional outpatient space.
- c. Develop long-range plan for modernization and reuse of facilities.
- d. Develop and implement a site parking plan.

4. Mission Bay

- a. Acquire land south of Sixteenth Street.
- b. Develop a master site plan to address initial program needs as well as to promote flexibility for future development.
- c. Design and build an outpatient clinical care and translational research center that is integrated with Mission Bay's specialty inpatient hospital services and research programs.
- d. Build approximately 200+ beds (total) for integrated specialty hospitals including UCSF Children's Hospital, a UCSF Women's Hospital, and the first increment of a UCSF Cancer Hospital containing adult cancer surgery beds. A helipad to serve the pediatric emergency department would be highly desirable.
- e. Develop central diagnostic and treatment core services to support translational research programs, outpatient clinical care and the specialty inpatient services.
- f. Build parking and an initial module of faculty offices to support first phase programs.

Phase 2 (2013 - 2020)

5. Overall
 - a. Seek state funding for Moffitt replacement to fund a new pavilion at Parnassus Heights.
6. Parnassus Heights
 - a. Build new replacement pavilion, addressing the Moffitt 2030 seismic deadline.
 - b. Continue investment in Parnassus Heights clinical, educational and research facilities.
7. Mount Zion
 - a. Implement master planning initiatives.
 - b. Evaluate need for clinical and academic program growth, more parking facilities and outpatient space.
8. Mission Bay
 - a. Augment the adult cancer surgery beds developed in Phase 1 with additional cancer services for a full UCSF Cancer Hospital, and consider additional inpatient specialty hospitals.
 - b. Increase translational research and outpatient capabilities.

V. OTHER

- A. San Francisco General Hospital: UCSF will continue its activities as an affiliated institution at San Francisco General Hospital.
- B. Veterans Affairs Medical Center: UCSF will continue its activities as an affiliated institution at the Veterans Affairs Medical Center.
- C. Laurel Heights: UCSF will continue use of the Laurel Heights facility for office-based instruction and research programs and campus administrative uses.
- D. Fresno Medical Education Program: UCSF will continue its academic and clinical care programs in Fresno. The Fresno Medical Education and Research

Center has recently been completed to allow for the consolidation and co-location of education and research space in one new building.