PLANNING CONTEXT
2.1 PURPOSE OF THE LRDP

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

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

Land use designations are described in the LRDP using functional zones, which provide guidance for where certain types of uses are best located based on desired land use adjacencies and other geographic considerations. The LRDP includes six categories of functional zones: research, clinical, support, housing, open space, and parking. Functional zone maps are provided for the three main campus sites (Parnassus Heights, Mission Bay, and Mount Zion) to guide the location of future capital construction and infrastructure development.

The 1996 LRDP focused on the acquisition of, and planning for, a major new site, which led to the development of the Mission Bay campus site, toward which UCSF has directed most of its capital resources in the intervening years. This LRDP contemplates investment in existing facilities and older sites, along with further development at Mission Bay.

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

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1 resources.ca.gov/ceqa/guidelines
2 www.ucsf.edu/content/lrdp-environmental-impact-report-downloads
3 www.ucsf.edu/sites/default/files/legacy_files/UCSF_LRDP_as%2520amended_web.pdf
2.2 UCSF OVERVIEW

UCSF is one of 10 campuses in the University of California system. It is the only UC campus devoted exclusively to health sciences, with professional degree programs in dentistry, medicine, nursing, and pharmacy, as well as interdisciplinary graduate programs and numerous postdoctoral programs. Unlike other UC campuses, UCSF has no undergraduate students, but instead has a small population of graduate and professional students, clinical residents, postdoctoral scholars, and clinical fellows (6,310 in 2013; 3,080 students enrolled in degree programs, 1,680 clinical residents, 1,100 postdoctoral scholars, and 450 clinical fellows). UCSF’s biomedical research enterprise is considered among the best in the world and performs well among its peers in highly competitive grant funding. UCSF’s contracts with and grants from the National Institutes of Health (NIH) more than doubled between 1997 and 2013, to $517 million. In 2013, UCSF ranked first among public recipients and second overall in funds from the NIH, while each of its four schools received the most NIH research funding in their fields. This was the 34th consecutive year in which the UCSF School of Pharmacy ranked first, and the 22nd year for the School of Dentistry.

In educational rankings, U.S. News and World Report ranked the UCSF School of Pharmacy as the premier PharmD education program in its field in 2012, which was the last time pharmacy schools were ranked. Over the years, the School of Pharmacy has consistently been ranked number one nationwide. The School of Medicine ranked fourth, for both research and primary care education, as did the School of Nursing per U.S. News and World Report’s most recent assessments. (Dental schools are not evaluated). UCSF’s graduate programs in the biological sciences ranked seventh overall, and eight of its specialty programs in biology and biochemistry ranked among the top 10 in the nation.

The UCSF clinical enterprise consists of the UCSF Health System – UCSF Medical Center (the hospitals plus all clinics and physician practices operated by the medical center and the School of Medicine) and UCSF Benioff Children's Hospital – and the UCSF Dental Center. UCSF Medical Center is recognized as a world leader in health care, and in 2013, was ranked the seventh-best hospital in the nation by U.S. News and World Report. The medical center consists of existing inpatient facilities at Parnassus Heights and Mount Zion, three new specialty hospitals under construction at Mission Bay (the new UCSF Benioff Children's Hospital facility at Mission Bay, plus the UCSF Betty Irene Moore Women's Hospital and the UCSF Bakar Cancer Hospital), and outpatient clinics at those and numerous other locations throughout the city. UCSF Benioff Children’s Hospital also entered into an affiliation agreement in January 2014 with Children’s Hospital and Research Center Oakland (CHRCO), expanding UCSF’s pediatric network in the Greater Bay Area. UCSF has long-standing affiliations with San Francisco General Hospital and Trauma Center (SFGH), operated by the City; San Francisco Veterans Affairs Medical Center (SFVAMC), operated by the U.S. Department of Veteran Affairs, where UCSF faculty provide patient care and conduct professional teaching and research programs; and with research entities such as the J. David Gladstone Institutes. UCSF also operates the UCSF Fresno Center for Medical Education and Research in the Central San Joaquin Valley, which provides training for doctors and other health professionals.

UCSF’s internationally recognized research enterprise conducts basic research in biology, biochemistry, and other disciplines related to health and disease; carries out translational medicine studies in epidemiology, behavioral, and social sciences; studies health care policies; and provides training in each of these fields. Faculty members are acclaimed for their excellence, achievements, and leadership in health sciences, with honors that include five Nobel Prizes, five MacArthur Fellowships, and numerous National Academy of Sciences and Institute of Medicine memberships.

The administrative units of UCSF are: the Chancellor’s office and associated operations units; the Schools of Dentistry, Medicine, Nursing, and Pharmacy; the Graduate Division; UCSF Medical Center; UCSF Benioff Children’s Hospital; UCSF Global Health Sciences; the UCSF faculty; and the headquarters of the California Institute for Quantitative Biosciences. UCSF’s education, research, and patient care activities are supported or occur across these units.

As the second-largest employer in San Francisco (after the City itself), UCSF employs about 22,500 faculty and staff, approximately half of whom live in the city, and contributes an estimated $6.2 billion annually directly and indirectly to the Bay Area economy. More than half of UCSF’s 2014 total revenue of $4.91 billion was generated by UCSF Medical Center and CHRCO ($2.75 billion); grants and contracts – the majority from the NIH – account for another $1.2 billion. These funds would not have come to the Bay Area were it not for

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4 Professional students are those attending the four schools (UCSF Schools of Dentistry, Medicine, Nursing, and Pharmacy) in pursuit of state licenses to practice dentistry, medicine, etc.; they earn professional degrees (DDS, MD, etc.). Graduate students are those students seeking Certificate, Master, or PhD degrees, or conducting postdoctoral scholarship, who are pursuing a research track in basic, translational, clinical, social, and population sciences, either at the schools or in other UCSF programs.

the presence of UCSF and its affiliates. UCSF was integral to launching the biotechnology industry through the co-discovery (with a Stanford University researcher) of recombinant DNA; the launch of the world’s first biotech company based on that discovery, Genentech Inc.; and fundamental research that led to the first biotech drug, recombinant insulin. UCSF’s Mission Bay campus site has become a regional hub to the biotech field, a central element of the City’s economy and employment base, and a key generator of life-science start-up companies.

UCSF is a distinctly urban institution with campus sites throughout the city and some locations beyond the city limits (Figure 1). These sites comprise a total of 202.2 acres, 61 of which are the Mount Sutro Open Space Reserve. UCSF occupies nearly 8.04 million square feet of building space (excluding structured parking) in both owned and leased buildings. In addition to the three primary campus sites of Parnassus Heights, Mission Bay, and Mount Zion, UCSF owns buildings at Mission Center (1855 Folsom Street), Laurel Heights (3333 California Street), and 654 Minnesota Street, which are predominantly offices; animal care and research facilities at Hunters Point (830 and 831 Palou Street); a material management facility at Oyster Point (612 Forbes Boulevard in South San Francisco); and the Buchanan Dental Center (100 Buchanan Street). UCSF also leases more than a million square feet of space for a variety of purposes at numerous locations in San Francisco. UCSF is actively engaged in an effort to reduce the number of leased locations by consolidating operations into fewer locations and relocating programs into UCSF-owned facilities, to improve operational efficiencies and achieve programmatic adjacencies. Approximately 350,000 gsf of the existing lease portfolio represents community-based leased facilities, where programs must remain to provide neighborhood-focused clinical services or community-based research serving local populations.

Over the next five years, UCSF anticipates a reduction in San Francisco leases from about a million gsf to about 550,000 gsf due to lease consolidation and moves into UCSF-owned space. However, over the LRDP horizon, leased space is projected to be about 750,000 gsf, an increase from the near-term reduction but an overall decrease from the current million gsf. This projection is not intended to represent the maximum amount of leased square footage at any particular point in time within the LRDP horizon, since UCSF’s leased space inventory is expected to fluctuate above and below this amount at various points in time as determined by the University’s programmatic needs. UCSF leases facilities to accommodate for fluctuations in its space requirements associated with short-term changes in community clinical service needs, growth in community-based clinical and research programs, and other unforeseen needs, which could include new affiliations with other health providers.

In the fall of 2013, UCSF launched an initiative called UCSF 2.0,7 to form the basis of a strategic plan for continued leadership in each of its fields and continued innovation across its mission areas of patient care, research, and education over the upcoming decades. The initiative began with UCSF2025,8 an interactive online exercise that leveraged the power of social media to generate more than 25,000 suggestions from more than 2,500 participants both inside and outside the University.

Five key themes emerged from UCSF2025:

- **Negotiate new partnerships**: Collaborate within UCSF and other institutions on health data, leverage resources within and across the UC system, contribute to the creation of the "bio-Silicon Valley” and partner with K-12 institutions to bring science education to the classroom.
- **Pioneer new funding models**: Leverage/build upon expertise in health care for seniors, master ‘crowdfunding’9 for innovative initiatives, and explore other potential revenue streams.
- **Rethink research and publication**: Advance simulation models in research, revamp the publishing process to create greater access to discoveries, create shared platforms for protocols, and further develop strength in translating basic research into practical applications (and often start-ups) to enhance human health and well-being.
- **Re-envision health sciences education**: Create open learning systems, strategically leverage massively open online courses (MOOCs) and creatively utilize UCSF’s available physical space.
- **Transform patient care**: Advance precision medicine, harnessing the wealth of information from the human genome, environmental data, and medical records to make patient care more predictive and precise worldwide; create more opportunities to contribute to and connect with the community; and innovate technology infrastructure for learning and patient-centered care.

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6 For the sake of simplicity, the LRDP will refer to all space, owned and leased, in terms of gsf, even though leased space is sometimes measured in sf, depending on type of space and/or lease. Note: With the exception of Appendix B, which gives raw data, gsf numbers throughout the LRDP are rounded to the nearest 100 (with numbers greater than 1 million rounded to the nearest 2nd decimal place [e.g., 2.39 million]) unless otherwise noted.

7 [www.ucsf.edu/blog/2014/01/ucsf-20-pursues-big-ideas-chart-its-direction-2025](www.ucsf.edu/blog/2014/01/ucsf-20-pursues-big-ideas-chart-its-direction-2025)


9 Crowdfunding is the practice of funding a project or venture by raising many small amounts of money from a large number of people, typically done on via the web or online.
Figure 1: UCSF Locations
(updated to reflect LRDP Amendment #3 and LRDP Amendment #4)
These themes are being further developed through a series of workshops to help craft the vision for UCSF 2.0, which will be a multi-phased project to chart the future direction of UCSF.

The resulting themes will augment the LRDP objectives, elements, and proposals in providing guidance on the future priorities and space needs of UCSF through 2035.

2.3 UCSF HISTORIC DEVELOPMENT

In 1864, Dr. Hugh H. Toland opened a medical school at Stockton and Francisco streets in San Francisco, opposite the City and County Hospital. Toland Medical School became affiliated with the newly created University of California, in Berkeley, in 1873, along with the California College of Pharmacy. By 1895, the medical school had doubled in enrollment, but was unable to grow because of surrounding development. Mayor Adolph Sutro donated thirteen acres for a new facility at Parnassus Heights, where three new buildings housing Dentistry, Medicine, and Pharmacy were completed in 1897. After the 1906 earthquake, it became clear that UCSF needed both a patient care facility and the ability to train nurses, leading to its first medical center and the School of Nursing. As various hospitals were rebuilt after the 1906 earthquake – including SFGH at Potrero Hill, rebuilt in 1915, and the Veterans Administration Hospital at Fort Miley in 1934 – UCSF students and faculty began to staff those hospitals, beginning UCSF’s 100-year history of providing care at multiple sites throughout the City of San Francisco.

After the turn of the century, the area surrounding the Parnassus Heights campus site began rapidly developing into a dense, residential neighborhood. In 1914 UCSF purchased additional land, and in 1917 built a long, low-rise hospital (now referred to as UC Hall). A master plan was completed in 1921 that envisioned a street-wall of large buildings along both sides of Parnassus Avenue. Several such buildings were built in the 1930s and 1940s; UCSF did not diverge from this plan until the first modern high-rise on the campus, Moffitt Hospital, was finished in 1958. Long Hospital was constructed next-door in the early eighties. Moffitt and Long Hospitals are physically connected to each other, and together form what is essentially one hospital facility. In this document, “Moffitt Hospital” and “Long Hospital” will be used as necessary to refer specifically to each building.

UCSF’s expansion at Parnassus Heights continued at a rapid pace during the 1960s and early 1970s. In response to community concerns that the size of UCSF’s campus was beginning to overwhelm the area, the Regents adopted the 1976 Regents’ Resolution,10 which established permanent boundaries for the campus site, imposed a “space ceiling” on further growth within these boundaries, prohibited UCSF from acquiring additional property in the surrounding area, designated Mount Sutro as an Open Space Reserve, and required that other conditions be met, as described in more detail in Chapter 4. UCSF also agreed to design new buildings that would step up the slopes of the campus site, to help create a transition between the adjacent low-rise residential

10 The 2014 LRDP proposes to update the 1976 Regents’ Resolution as the Regents’ Resolution Regarding the Parnassus Heights Campus Site, as described in Section 4.5.
neighborhood west of the campus site and the taller institutional buildings to the east.

Subsequently, UCSF sought to decentralize the campus and release space for academic and clinical uses by moving administrative and support units off the Parnassus Heights campus site. During this period (1982-1996), UCSF acquired most of its owned sites, except for Mission Bay, and expanded its leaseholds throughout the city.

As pressures mounted to further decentralize Parnassus Heights, and to allow for basic-research growth and expansion, UCSF began the search for one large site to develop as a major new campus site. Three potential locations for a major new campus site were identified in the 1996 LRDP and analyzed in the 1996 LRDP EIR. These three sites included Brisbane Baylands-Executive Park in the City of Brisbane, Harbor Bay Business Park in the City of Alameda, and the location in the then-largely-undeveloped Mission Bay neighborhood of San Francisco. In May 1997, the Regents approved the Mission Bay site as UCSF’s major new campus site, and in September of that year agreed to accept the donation of 30 acres from Catellus Development Corporation and 13 acres from the City to create a 42.3-acre biomedical research campus site. Since that time, 2.2 million gsf of the 2.65 million gsf that UCSF was entitled to develop on the 42.3-acre North Campus has been built (or is under construction), spurring extensive development of the surrounding area, as had been hoped. In 2007, UCSF acquired an additional 14 acres immediately south of the original campus site to build a new Medical Center at Mission Bay, the first phase of which will open in February 2015. In 2014, the 3.8 acres east of Third Street (East Campus) was acquired for further campus development.
2.4 UCSF LONG RANGE DEVELOPMENT PLANS

UCSF’s first LRDP was completed in 1964. It called for the expansion of the Parnassus Heights campus site, the only site owned by UCSF at the time, through the use of eminent domain. In response to neighborhood groups who opposed UCSF’s expansion and organized an effort to halt construction of the School of Dentistry and Long Hospital, the 1976 LRDP contained policies to limit campus growth at this site, but allowed those and several other buildings to be completed. The 1982 LRDP limited use of the Parnassus Heights campus site to primarily academic and clinical functions, and called for the relocation of most campus-wide administrative functions to other sites that had to be subsequently purchased or leased. It highlighted programmatic needs, such as a new campus library, at Parnassus Heights.

Decentralization resulted in higher operating costs and reduced staff morale. Consequently, the 1996 LRDP emphasized:

- The consolidation of the widely dispersed sites to fewer locations;
- The decompression of space at Parnassus Heights by demolishing buildings that were seismically vulnerable or obsolete, and by converting offices in ‘the Avenues’ back to residential use; and
- The expansion of space at existing sites for meritorious and new programs by renovating buildings or constructing new ones.

The principal proposal of the 1996 LRDP was to acquire land to develop a new major campus site to fulfill these objectives. The site had to be of sufficient size to accommodate the space program of 2.65 million gsf for research, instruction, and support activities.

The Regents subsequently approved three major amendments to the 1996 LRDP in order to:

1. Allow for the development of housing at the Mission Bay campus site, a use that was not included in the original space program (2002);
2. Articulate a new clinical configuration for UCSF, involving major inpatient services at Parnassus Heights and Mission Bay with a major outpatient hub at Mount Zion (2005); and

To a large degree, the 2014 LRDP is an extension of the principles in the 1996 LRDP, in that UCSF will continue to work towards compliance with the space ceiling at Parnassus Heights, expand at Mission Bay, and consolidate its facilities to fewer locations. The primary difference between the two LRDPs is that, whereas the 1996 LRDP focused on the acquisition of, and planning for, a major new site (to which UCSF has directed most of its capital resources in the intervening years), this LRDP contemplates investment in existing facilities and older sites, along with further development at Mission Bay.

The 2014 LRDP also is driven by the pursuit of compliance with the requirements of California’s Alfred E. Alquist Hospital Facilities Seismic Safety Act of 1983 (Alquist Seismic Safety Act) and subsequent amendments,\(^\text{12}\) the UC Seismic Safety Policy,\(^\text{13}\) the UC Sustainable Practices Policy,\(^\text{14}\) and the 1976 Regents’ Resolution regarding the Parnassus Heights space ceiling, as well as numerous other state and local policies, codes, and plans. Also, with increased constraints on operating budgets, this LRDP strives to address UCSF’s goal to improve operational efficiency through better utilization and consolidation of, and investment in, existing facilities. Further development at the Mission Bay campus site is secondary to these objectives, but serves as a mechanism to accomplish these goals while also providing opportunity for growth.

\(^{11}\) www.ucsf.edu/sites/default/files/legacy_files/documents/mbreport.pdf

\(^{12}\) codes.lp.findlaw.com/cacode/HSC/1/d1077/1#sthash.ID9GWk0.dpuf

\(^{13}\) policy.ucop.edu/doc/3100156/SeismicSafety

\(^{14}\) policy.ucop.edu/doc/3100155/Sustainable%20Practices
2.5 UCSF PHYSICAL DESIGN FRAMEWORK

The 2010 UCSF Physical Design Framework\textsuperscript{15} supplements the LRDP in that it articulates more specific design guidance for the physical development of UCSF’s sites and facilities. It guides UCSF in planning and designing future development projects, providing detailed principles and guidelines that are universally applicable to all owned campus sites. It also includes strategies for implementing the universal principles, along with campus site-specific design guidelines, for two of UCSF’s main campus sites, Parnassus Heights and Mission Bay. (The Physical Design Framework will be updated to include design guidance for Mount Zion prior to any proposed development at that site.)

Despite considerable diversity in the character and context of UCSF’s campus sites, they are all urban campuses ‘in and of the city,’ with common planning and design objectives. These UCSF-wide planning and design principles are as follows:

- Respond to CONTEXT while reinforcing identity.
- Welcome the COMMUNITY.
- Ensure CONNECTIVITY to and within the campus.
- Improve campus COHESIVENESS.
- Create spaces to promote COLLEGIALITY.
- Lead through CONSERVATION and sustainability.

Chapter 5 of the Physical Design Framework, “Physical Planning and Design Process,” contains a detailed description of the process used by the campus to develop and review capital projects.

\textsuperscript{15} campusplanning.ucsf.edu/pdf/UCSF_Physical_Design_Framework.pdf

Kalmanovitz Library, Parnassus Heights campus site.
2.6 UCSF ACADEMIC AND CLINICAL PROGRAMS

The four schools and the Graduate Division of UCSF offer clinical, professional, and research-based graduate education programs; they sponsor advanced academic programs in biomedical research; and they are also involved in clinical care. UCSF Medical Center trains physicians and other clinical staff in support of UCSF’s missions of public service and patient care. Figure 2 illustrates the general configuration of programs, services, and facilities at UCSF’s three primary sites. The original campus site, Parnassus Heights, is home to Moffitt and Long Hospitals, outpatient clinics, research facilities, graduate and professional programs, and support. Mount Zion has inpatient, outpatient, and research facilities, although the inpatient functions will move to Mission Bay when the new hospital there is operational (2015). Mission Bay was initially intended to be a basic science research campus, but since the new hospital was proposed to help meet state seismic mandates, UCSF began to develop space for outpatient clinics, translational research, and related graduate programs. Clinical and research programs are also located throughout the city in numerous individual buildings owned or leased by UCSF, as well as at the San Francisco General Hospital and Trauma Center and San Francisco Veterans Affairs Medical Center sites.

As an academic medical center and graduate health sciences campus, UCSF has a broad and special set of responsibilities that differ from community hospitals whose primary missions are patient care. UCSF is committed to educating and training the next generation of health care professionals and health scientists; conducting research and advancing biomedical science and technology; translating those advancements into improved patient care; and providing the highest quality evidence-based, competitively priced patient care. Ensuring that the ideas under consideration in UCSF 2.0 are also being considered in the LRDP and that the needs of the schools and Medical Center are met are basic concerns of the LRDP.

2.6.1 SCHOOLS

Each of the four schools and the Graduate Division offers professional training for health care practitioners and graduate students in basic, translational, clinical, social, and population sciences. Each operates extensive research programs in fundamental and applied research, and contributes to patient care and community service. School departments and organized research units are listed in Table 2.

DENTISTRY

The School of Dentistry consists of four academic departments in the basic and clinical sciences. It offers professional education through its four-year Doctor of Dental Surgery (DDS) program, a two-year international dentist program leading to the DDS, a Master’s degree program in dental hygiene, and Master’s and PhD programs in Oral and Craniofacial Sciences (in coordination with the Graduate Division), as well as postgraduate and residency/fellowship programs. To achieve its mission to advance oral, craniofacial, and public health excellence in dental education, discovery, and patient-centered care, the School of Dentistry’s strategic objectives are to:

1. Provide professional, comprehensive, high-quality, patient-centered oral health care, and collaborate with local, regional, and global community partners to promote oral health worldwide.
2. Be a world leader in scientific discovery and its translation into health benefits for patients and society.
3. Provide an excellent education that equips students, residents, and postgraduates to be future leaders in health care delivery, research, and education.
4. Provide a supportive learning and work environment that attracts the best students, faculty, and staff who can meet the changing needs of the School of Dentistry and the profession.
5. Enhance resource management and business practices.

MEDICINE

The School of Medicine is the largest of UCSF’s schools, with departments and programs in three main categories: basic biomedical science, clinical science, and social and population science. The School of Medicine offers the Doctor of Medicine (MD) professional degree, the Doctor of Physical Therapy (DPT) professional degree, graduate academic degrees (MS and PhD) in coordination with the Graduate Division, and residency programs in medical specialties. The four-year MD curriculum consists of two phases: two years of integrated coursework organized around organ systems and clinical themes, and two years of clerkships offered in ambulatory and hospital settings in San Francisco and other locations. The School of Medicine trains clinical residents and fellows in graduate medical education programs, and oversees the work of postdoctoral scholars.

The School of Medicine strives to advance human health through a fourfold mission of education, research, patient care, and public service.
Figure 2: UCSF Existing Academic & Clinical Configurations

- **PARNASSUS HEIGHTS**
  - Basic Sciences
  - Clinical & Translational Research
  - Professional Programs
  - Graduate Academic Programs
  - Adult Hospital
  - Children’s Hospital (through February 2015)
  - Outpatient Clinics

- **MISSION BAY**
  - Basic Sciences
  - Clinical & Translational Research
  - Graduate Academic Programs
  - Outpatient Clinics
  - 2015: New Children’s, Women’s & Cancer Hospital

- **SAN FRANCISCO GENERAL HOSPITAL**
  - Clinical & Translational Research
  - Professional Programs

- **MOUNT ZION**
  - Clinical & Translational Research
  - Comprehensive Cancer Center
  - Outpatient Clinics
  - Adult Hospital (Inpatient services through 2015)

- **LAUREL HEIGHTS**
  - Social, Behavioral & Policy Sciences
  - Clinical Pharmacy

Legend:
- Total Gross Square Feet Excluding Parking
- Instruction Space
- Research Space
- Clinical Space

Note: Size of circles proportional to amount of space
Table 2: Departments & Organized Research Units by School

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<th>DEPARTMENTS</th>
<th>ORGANIZED RESEARCH UNITS</th>
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<tr>
<td></td>
<td>Cell &amp; Tissue Biology</td>
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<td>Preventive &amp; Restorative Dental Sciences</td>
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<td></td>
<td>Anatomy</td>
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<td>Anesthesia &amp; Perioperative Care</td>
<td>Cardiovascular Research Institute</td>
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<td>Proctor Foundation</td>
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* An Organized Research Unit (ORU) is a formal academic agency with a separate budget and administration, officially established by the Regents, consisting of an interdepartmental group of faculty, students, and staff engaged in research.
2.6.2 GRADUATE DIVISION

The Graduate Division supports and oversees students in 26 graduate academic degree programs (as of 2014), and offers Certificates, Master’s (MS, MA, MAS, MTM), and Doctoral (PhD and DPT) degrees. Nearly all graduate programs are interdisciplinary, with many faculty members having appointments across departments and schools. The Graduate Division functions as the institutional home for graduate education and postdoctoral scholarship at UCSF. It serves as the primary advocate for graduate students and postdoctoral scholars, and promotes excellence in all graduate and postdoctoral scholar training programs.

2.6.3 RESEARCH

UCSF has created powerful, globally recognized research programs in biological, clinical, social and behavioral, and population sciences. Its researchers, who hold faculty appointments in the schools, are internationally acclaimed for their excellence, achievements, and leadership in health sciences.

Increasingly, UCSF research endeavors are multidisciplinary and aimed at translating basic discoveries into innovations that improve human health. For example, the Clinical and Translational Science Institute (CTSI) and the California Institute for Quantitative Biosciences (QB3) were created to bring together large teams of experts from a variety of disciplines to tackle major scientific and health issues. CTSI is a cross-campus institute established to facilitate translational clinical research and bring better health to more people more quickly; QB3 is a state institute headquartered on the UCSF Mission Bay campus site that includes faculty from UCSF, UC Berkeley, and UC Santa Cruz, and links the quantitative sciences – mathematics, physics, chemistry, and engineering – with the biosciences to address complex scientific problems and spawn potent new technologies.

UCSF’s leadership in biomedical research is evidenced by its success in achieving research support and recognition in relation to peer institutions. Contracts and grants from the NIH and other funds enable UCSF scientists to continue their pioneering efforts to understand the underlying causes of diseases such as cancer, cardiovascular disease, diabetes, HIV, Parkinson’s, and Alzheimer’s disease, and to work to develop improved therapies for patients.

2.6.4 PATIENT CARE

The UCSF clinical enterprise consists of the UCSF Health System – UCSF Medical Center (the hospitals plus all clinics
and physician practices operated by the Medical Center and the School of Medicine) and UCSF Benioff Children’s Hospital – and the UCSF Dental Center. UCSF Medical Center is the leading hospital in San Francisco and Northern California, and provides excellent primary care, in addition to being a destination for patients with complex health conditions from around the world.

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

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

UCSF entered into an affiliation agreement with CHRCO in January 2014. Under the affiliation agreement, the University is responsible for CHRCO’s Board appointments and financial obligations. CHRCO, located at 747 52nd Street at Martin Luther King Jr. Way in Oakland, operates the main Children’s Hospital, an outpatient center, and adjacent clinics, as well as five satellite locations around the Bay Area. UCSF does not directly own or control the CHRCO facilities and site. The facilities are entirely staffed by CHRCO employees, and will remain a separate 501(c)3 not-for-profit corporation that is separately licensed. Upon the opening of the Mission Bay Medical Center in 2015, the San Francisco hospital will be called UCSF Benioff Children’s Hospital San Francisco, and CHRCO will be named UCSF Benioff Children’s Hospital Oakland. Together, it will be known as UCSF Benioff Children’s Hospitals. The CHRCO site is subject to the jurisdiction of the City of Oakland; any future projects at the site would require review and entitlement under the City of Oakland’s land-use regulations. For these reasons, CHRCO is not included in the LRDP.

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17 This refers to specialized consultative care, usually on referral from primary or secondary medical care personnel. Specialist cancer care and neurosurgery are examples of tertiary care services.
CHAPTER 2

PLANNING CONTEXT

2.7 LRDP PLANNING PROCESS

2.7.1 SUMMARY OF PLANNING PROCESS

Preparation of the LRDP involves four phases of work. The first phase – collecting and reviewing background data with a campus LRDP Oversight Committee and subcommittees focusing on instruction, research, and clinical needs – was initiated in the fall of 2010 and continued into the winter of 2012. Phase 2, in which UCSF’s long-term space needs and academic site theme recommendations for UCSF’s major locations were identified, began in the spring of 2012. In the third phase, which began in the summer of 2012, physical options capable of accommodating the space needs were developed, with the preferred plan for each site identified by spring 2013. Near the end of this phase, UCSF made presentations to the San Francisco Planning Commission and San Francisco Commission of Community Investment and Infrastructure to apprise them of the LRDP. Preparation of the LRDP and EIR, the last phase, began in the summer of 2013 and is expected to be complete by fall 2014.

2.7.2 CAMPUS PARTICIPATION

In addition to the guidance of the LRDP Oversight Committee and its subcommittees, the 2014 LRDP was prepared with input from the UCSF Academic Senate, senior leadership, Faculty Councils of the Schools, the Graduate Division, a work group focusing on administrative space, and many other groups and individuals. The UCSF Foundation Real Estate Committee and UC Office of the President also advised on the LRDP. Reaching beyond the campus, community feedback was provided by UCSF’s Community Advisory Group (CAG), and from the public at large throughout the planning process, in numerous meetings and workshops held at UCSF’s main campus sites.

LRDP OVERSIGHT COMMITTEE

The charge of the LRDP Oversight Committee was fourfold:

1. Prepare recommendations for ultimate consideration by the Regents regarding UCSF’s physical development through the year 2035.
2. Oversee the preparation of the LRDP and the EIR.
3. Work closely with the CAG to achieve a consensus on proposals for physical development.
4. Appoint subcommittees as appropriate.

The LRDP Oversight Committee was directed to take into consideration the optimal configuration of academic programs across UCSF sites, as well as the need to replace Moffitt Hospital by 2030 in light of the Alquist Seismic Safety Act; to address other seismically deficient buildings at Parnassus Heights, Mount Zion, and SFGH; and to respond to UCSF Climate Action Plan goals and the UC Sustainable Practices Policy.

The LRDP Oversight Committee consisted of 44 Campus and Medical Center administrators, faculty, and staff. In the first phase of planning, they reviewed and discussed UCSF’s existing sites and facilities; the Campus and Medical Center financial outlooks; the anticipated educational, research, and clinical space program needs; trends in health care, NIH funding, and philanthropy; Deans’ reports on major plans and initiatives; community considerations; and environmental sustainability. In the second phase, they reviewed three subcommittees’ projected needs for instruction, research, and clinical space, and then recommended themes for each campus site.

It was the responsibility of the LRDP Oversight Committee to ensure that space needs would be distributed appropriately across all sites. When the physical options were developed in the third phase, the committee provided their feedback, which helped inform the preferred proposals.

INSTRUCTION, RESEARCH, AND CLINICAL SUBCOMMITTEES

The LRDP Oversight Committee formed three subcommittees to discuss, respectively, instruction, research, and clinical needs across UCSF’s sites. The subcommittees were tasked with determining the optimal quantities of their respective types of use, and preferred configurations of academic or inpatient and outpatient programs at each site. The clinical subcommittee also had to consider the next phase of the clinical strategy, following the proposed discontinued use of Moffitt Hospital as an inpatient facility. In developing the major site theme recommendations, the subcommittees considered programs that need to remain at their current locations; the buildings and facilities needed to support them, including space for campus life, administrative, and other support functions; required program adjacencies and affiliations; and the desired relocation of programs from other sites to strengthen programmatic relationships.

The subcommittees generated guiding principles that served as the foundation of their program recommendations, which also addressed quality-of-life issues, including meeting space;
support services such as child care, recreation, and fitness facilities; and open space. The outcomes of these sessions and subsequent LRDP Oversight Committee discussions were recommendations for program space and facilities at key campus sites, based on the anticipated role of the sites in the overall mission of UCSF through the life of the LRDP.

**ADMINISTRATIVE WORK GROUP**

A work group of high-level administrators was convened to develop assumptions for future academic and campus administrative space needs, to determine the optimal amount of such space needed through 2035 based on those assumptions, and to identify the optimal configuration across UCSF’s sites. Much of the discussion focused on the requirement to improve operational efficiency and potential changes in the administrative delivery model, particularly in regard to the “activity based workplace” model being applied to the new academic building at Mission Bay, which is designed with open work stations and private activity rooms, instead of private offices. The work group recommended the relocation and consolidation of administrative space proximate to the programs they serve, in consideration of costs to renovate existing space and build new space.

**OTHER UNIVERSITY CONSULTATION**

Additional meetings were held throughout the planning process to inform leadership of the LRDP deliberations and conclusions, and to obtain further input. These leadership groups included the Chancellor’s Executive Cabinet (CEC), the Budget and Investment Committee of the CEC, the Academic Senate Committee on Academic Planning and Budget, Faculty Councils, the UCSF Foundation Real Estate Committee, and the UC Office of the President.

**2.7.3 COMMUNITY PARTICIPATION**

UCSF developed physical site plan options for the Parnassus Heights, Mission Bay, Mount Zion, and Mission Center campus sites based on the amount and types of space needed at each within the time-span of the LRDP. Seven LRDP community workshops were held at four campus sites beginning in the fall of 2012: three at Parnassus Heights, two at Mission Bay, and one each at Mount Zion and Mission Center. At the workshops, these options were presented to the public, who reviewed them and provided feedback that helped shape the LRDP proposals. This community input is valued by UCSF and is reflected throughout this LRDP.

In separate ongoing planning efforts, UCSF is seeking community input on proposals for a new research facility.
under consideration on the San Francisco General Hospital campus and for conveyance of the Laurel Heights campus site to a developer for non-UCSF uses. UCSF has also solicited community feedback on management and hazard reduction plans for the Mount Sutro Open Space Reserve.

**UCSF COMMUNITY ADVISORY GROUP**

Since 1992, UCSF has benefitted from the advice of its Community Advisory Group (CAG), described in Chapter 3. LRDP physical options were shared with the CAG prior to the community workshops so they could express their concerns, give feedback on the options, and identify preferred proposals. The CAG’s input was exceptionally valuable in helping UCSF anticipate and resolve various issues, including the need for more information in preparation for the community workshops. The CAG also reviewed the LRDP Community Planning Principles prepared by the Joint Delegation, described below.

**LRDP JOINT DELEGATION**

Eleven members each of the CAG and the LRDP Oversight Committee drafted a set of LRDP Community Planning Principles, provided in Appendix D. Over the course of nearly a year, the Joint Delegation worked together to craft guiding principles designed to alleviate concerns expressed by neighbors about UCSF’s future growth and development. The LRDP Community Planning Principles balance community concerns with UCSF’s physical development goals and desire for flexibility to respond to and accommodate unforeseen conditions and needs. The resulting set of LRDP Community Planning Principles will be used to aid future planning as a framework for addressing neighborhood concerns that may arise as a result of UCSF’s development under the LRDP.

**MISSION BAY CITIZENS ADVISORY COMMITTEE**

The Mission Bay Citizens Advisory Committee was originally convened by the San Francisco Redevelopment Agency (no longer in existence) to provide advice to the City on planning for the Mission Bay Redevelopment Area. It continues to meet monthly under the auspices of the Office of Community Investment and Infrastructure, which serves as Successor Agency to the San Francisco Redevelopment Agency.

Throughout the LRDP planning process, UCSF has periodically updated the Mission Bay Citizens Advisory Committee on UCSF’s planning for the Mission Bay campus site, and encouraged interested individuals and organizations to attend UCSF’s community meetings for additional detail.