Agenda

1. Welcome, Introductions and Agenda Overview
2. Public Comment (items not on the agenda)
3. CAG Questions and Concerns (items not on the agenda)
4. Annual Update on the Space Ceiling and Managing Transportation Impacts at the Parnassus Heights Campus
5. Update on Inpatient Beds at Langley Porter Psychiatric Institute
6. Planning for the New UCSF Helen Diller Medical Center at Parnassus Heights
7. Update on Dogpatch Cushioning Projects
8. Update on UCSF’s Community Construction Outreach Program
9. Public Comment (items on agenda – 3 minutes per speaker)
10. Next Steps and Adjourn
Public Comment

- Regarding items not on the agenda
- Three minutes per speaker
- If item runs over 15 minutes, to be continued at the end of the agenda
CAG Questions and Concerns

- Regarding items not on the agenda
- If item runs over 5 minutes, to be continued at the end of the agenda
Annual Update on the Space Ceiling and Managing Transportation Impacts at the Parnassus Heights Campus
UCSF’s LRDP Commitments

Measurement and Accountability at Parnassus Heights

- Ongoing allocation of financial resources (via UCSF’s ten-year Capital Financial Plan) *(Provided at Sept. CAG Meeting)*
- Progress towards space ceiling goals
- 2018 Campus Gateway Counts
- Mode split of UCSF employees (2018 Commute Survey)
- Efforts to manage transportation impacts
## Progress Towards Space Ceiling (Dec. 2018)

<table>
<thead>
<tr>
<th>Completion Date</th>
<th>Project Description</th>
<th>GSF</th>
<th>Overage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nov. 2014</td>
<td>2014 LRDP Approved</td>
<td>3,844,800</td>
<td>8.3%</td>
</tr>
<tr>
<td>Nov. 2014</td>
<td>Removal of Housing from Space Ceiling</td>
<td>(132,400)</td>
<td>4.6%</td>
</tr>
<tr>
<td>Aug. 2015</td>
<td>Demolish Laboratory of Radiobiology</td>
<td>(18,730)</td>
<td>4.0%</td>
</tr>
<tr>
<td>May 2016</td>
<td>Demolish MR4</td>
<td>(12,100)</td>
<td>3.7%</td>
</tr>
<tr>
<td><strong>In Progress</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2018-19</td>
<td>Construct Emergency Pump House</td>
<td>150</td>
<td>3.7%</td>
</tr>
<tr>
<td>2018-19</td>
<td>Enlarge Emergency Department Entrance</td>
<td>530</td>
<td>3.7%</td>
</tr>
<tr>
<td><strong>Future Actions Per 2014 LRDP</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Demolish Woods, Surge, EHS, LPPI, Proctor and Koret (182,700 gsf)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Convert UC Hall (148,200 gsf) and Millberry Union Towers (47,100 gsf) to Housing</td>
<td>(70,000)</td>
<td>1.7%</td>
</tr>
<tr>
<td></td>
<td>• Construct 308,000 gsf New Hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Projected GSF Applicable to Space Ceiling in 2035, per LRDP</strong></td>
<td></td>
<td>3,612,250</td>
<td>1.7%</td>
</tr>
</tbody>
</table>
Transportation Improvements

GOAL: Reduce Congestion on Parnassus Avenue

(2014 LRDP Section 4.4.3: Reduce congestion through parking and loading improvements)

- Improvements to and restriping of Central Receiving and IRM Area (completed May 2018)
  - Restriping of the (2) receiving areas created more vehicle spaces for smaller vehicle deliveries as well as added more parking for construction vehicles

- Ongoing consolidation of campus deliveries by expanding “Package Delivery Program”
  - Approximately 800 parcels/day are routed through UCSF’s Oyster Point facility, with plans to expand the program in 2019

- Ongoing effort to route non-essential Medical Center deliveries through Oyster Point
Transportation Improvements

GOAL: Facilitate traffic-calming measures at the intersection of Kirkham Street and Fifth Avenue

- Installation of new median and bulb outs at the intersection (completed November 2018)

- Project was a result of a community process in which neighbors near the Parnassus Heights campus expressed concerns about pedestrian safety near the campus.

- UCSF fully funded the project (cost estimated at nearly $500,000) and worked with SF Public Works, which implemented the improvements.
Gateway Counts in October 2018

- The 2014 LRDP included a commitment to conduct gateway counts to monitor loading and delivery improvements every 2 years, starting in 2016 (counts were also conducted in 2013 as part of the LRDP.)

- Similar to prior counts, counts were conducted at the three gateways to the campus:
  - Fifth/Parnassus, Medical Center Way/Parnassus, & Fifth/Kirkham
  - On two weekdays from 7 AM to 7 PM
  - Classify the types of vehicles entering and exiting the campus

Source: Fehr & Peers
Average Vehicle Counts at Key Gateways

Daily Average Parnassus Campus Gateway Vehicle Counts 2018 vs. 2016 vs. 2013

- **5th/Kirkham**: 2013: 1,690, 2016: 1,530, 2018: 1,750
- **5th/Parnassus**: 2013: 8,480, 2016: 8,220, 2018: 8,640
- **Medical Center/Parnassus**: 2013: 7,920, 2016: 7,720, 2018: 8,390

Source: Fehr & Peers
Average Percentage of Passenger Vehicles

Source: Fehr & Peers
Percentage of Non-Passenger Vehicles at 5th/Kirkham

Note: An average of 22 contractor vehicles were counted at 5th and Kirkham in 2018, which compared to 54 contractor vehicles counted per day in 2016, and 30 contractor vehicles per day in 2013.

Source: Fehr & Peers
Percentage of Non-Passenger Vehicles at 5th/Parnassus

Source: Fehr & Peers

CAG Meeting December 5, 2018
Percentage of Non-Passenger Vehicles at Parnassus and Medical Center Way

Source: Fehr & Peers
Annual Report on Modes of Transportation and Impacts
UCSF Overall Mode Split

From 2017-2018, UCSF ‘s drive-alone rate remained essentially unchanged and continues to be down from 2016’s rate: 30.1% to 26.2%.
UCSF Parnassus Heights Mode Split 2018

- Drive Alone: 21.62%
- Walk/Run: 15.57%
- UCSF Shuttle: 9.67%
- Public Transit: 31.12%
- Bike: 6.10%
- Vanpool/Carpool/Drop-off: 6.00%
- Multi-Occupant Vehicles (Taxi, Lyft, Uber): 4.26%
- Telecommute: 1.65%
- Motorcycle/Scooter: 1.17%
- Other: 0.56%
UCSF Mission Bay Mode Split 2018

- Drive Alone: 25.74%
- UCSF Shuttle: 15.46%
- Bike: 7.87%
- Walk/Run: 6.35%
- Multi-Occupant Vehicles (Taxi, Lyft, Uber): 4.00%
- Telecommute: 2.93%
- Did not work (No commute): 2.07%
- Telecommute: 2.93%
- Motorcycle/Scooter: 1.31%
- Vanpool: 1.46%
- Drop-off: 1.01%
- Other: 0.74%
- Public Transit: 27.16%
## Parnassus Heights vs Mission Bay 2018 Mode Split

<table>
<thead>
<tr>
<th>Mode</th>
<th>Parnassus Heights</th>
<th>Mission Bay Campus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td>0.56%</td>
<td>0.74%</td>
</tr>
<tr>
<td>Vanpool</td>
<td>1.16%</td>
<td>1.01%</td>
</tr>
<tr>
<td>Motorcycle / Scooter</td>
<td>1.17%</td>
<td>1.31%</td>
</tr>
<tr>
<td>Telecommute</td>
<td>1.65%</td>
<td>1.46%</td>
</tr>
<tr>
<td>Dropped-off</td>
<td>1.70%</td>
<td>2.07%</td>
</tr>
<tr>
<td>Did not work (No commute)</td>
<td>2.29%</td>
<td>2.93%</td>
</tr>
<tr>
<td>Carpool</td>
<td>3.14%</td>
<td>3.94%</td>
</tr>
<tr>
<td>Multi-Occupant Vehicles (Taxi, Lyft, Uber)</td>
<td>4.26%</td>
<td>4.00%</td>
</tr>
<tr>
<td>Bike</td>
<td>6.10%</td>
<td>6.35%</td>
</tr>
<tr>
<td>UCSF Shuttle</td>
<td>9.67%</td>
<td>7.87%</td>
</tr>
<tr>
<td>Walk/Run</td>
<td>15.57%</td>
<td>15.46%</td>
</tr>
<tr>
<td>Drive Alone</td>
<td>21.62%</td>
<td>25.74%</td>
</tr>
<tr>
<td>Public Transit</td>
<td>31.12%</td>
<td>27.16%</td>
</tr>
</tbody>
</table>
Managing Transportation Impacts

October 2017 to December 2018

GOAL: Reduce Congestion on Parnassus Avenue (2014 LRDP Section 4.4.3: Reduce congestion through parking and loading improvements)

- In October 2017, UCSF launched mycommute.ucsf.edu, a commuter portal to connect personnel with shuttles, vanpools, carpools and public transit.
  - Program provides a platform to make informed choices to use alternative transportation and maintain or reduce single occupant vehicle trips—open to all
  - Digital signage in buildings provides real-time transit arrivals

- All-electric transit buses started operating October 2018: zero emission, quiet, higher capacity, with the goal to reduce shuttle trips over time.

- Additional Gold, Blue and Grey shuttles during peak periods to alleviate congestion and increase shuttle ridership
  - Parnassus shuttle ridership decreased by .30% (10.19% in 2018 vs 9.89% in 2017)

- Encouraged monthly parking permit holders to convert to public transit by promoting the “D” parking permit, which allows employees who only drive occasionally to access parking one day per week (120 permits issued and growing!)

- Loading improvements to Central Receiving and IRM areas completed
When commuting to Parnassus via Taxi/Uber/Lyft, what percentage of rides were Single vs Shared?

- Single TNC Rides: 45%
- Shared TNC Rides: 55%
When Traveling to Parnassus During the Day (intercampus travel) via Taxi/Uber/Lyft, What Percentage of Rides were Single vs Shared?

TNC: Intercampus (day) Rides to Parnassus Heights

- Shared TNC Rides: 52%
- Single TNC Rides: 48%
When traveling to Parnassus during the day (intercampus travel) via Taxi/Uber/Lyft, what percentage of rides were Single vs Shared?

<table>
<thead>
<tr>
<th></th>
<th>0%</th>
<th>20%</th>
<th>40%</th>
<th>60%</th>
<th>80%</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>10.99%</td>
<td>21.43%</td>
<td>9.34%</td>
<td>14.29%</td>
<td>11.54%</td>
<td>32.42%</td>
</tr>
<tr>
<td>Shared</td>
<td>2.51%</td>
<td>14.07%</td>
<td>8.04%</td>
<td>11.56%</td>
<td>12.06%</td>
<td>51.76%</td>
</tr>
</tbody>
</table>
Summary of Progress Towards Managing Transportation Impacts

- **Gateway counts** remained relatively constant over the past two years
- **Traffic calming** at Fifth and Kirkham completed
- UCSF continues to have one of the **lowest drive-alone rate** of any campus in the UC system
- **Electric buses** began operation in the fall
- **Improvements continue at the Central Receiving Area** to allow for more efficient deliveries
- **Package Delivery Program** continues to reduce the number of package deliveries to campus
- UCSF continues to **innovate and promote TDM programs** to reduce the number of vehicle trips
Update on Inpatient Beds at Langley Porter Psychiatric Institute and Planning for the New UCSF Helen Diller Medical Center at Parnassus Heights
In-Patient Psychiatric Care
Closures of Many California Inpatient Psychiatric Beds Has Led to a Severe Shortage of Appropriate Treatment Options

California Population 1995 - 2016

Total Psych Beds 1995 - 2016

Current State of Inpatient Psychiatric Care

- OSHPD data reports that San Francisco has 319 acute care inpatient psychiatric beds, however there are only 138 adult operational inpatient acute beds

<table>
<thead>
<tr>
<th>Total</th>
<th>153 (Adult 138)</th>
</tr>
</thead>
<tbody>
<tr>
<td>LPPI</td>
<td>22</td>
</tr>
<tr>
<td>ZSFGH</td>
<td>44</td>
</tr>
<tr>
<td>St. Francis</td>
<td>24</td>
</tr>
<tr>
<td>CPMC</td>
<td>16</td>
</tr>
<tr>
<td>SF VA (veterans only)</td>
<td>20</td>
</tr>
<tr>
<td>Jewish Home (Gero-psych)</td>
<td>12</td>
</tr>
<tr>
<td>St. Mary’s (pediatric)</td>
<td>15</td>
</tr>
</tbody>
</table>

- A report by the California Hospital Association* estimates that San Francisco needs a total of 435 beds – or an additional 282 beds -- to meet the minimum recommended ratio of one public psychiatric bed for every 2,000 people.


Providing evidence-based psychiatric services and leading-edge research in the field of mental health is critical to UCSF’s mission and to the needs of San Francisco.
UCSF Langley Porter Psychiatric Hospital and Clinics

- Langley Porter Psychiatric Hospital and Clinics (LPPHC) is a four-story building that houses adult and pediatric outpatient clinics, a 22-bed inpatient unit, the partial hospitalization program (PHP) and intensive outpatient program (IOP).

- To connect the new Parnassus hospital with the existing Long hospital building, the new hospital is best situated on the current site of the LPPHC.

- LPPHC outpatient clinics will move to new facilities at 2130 3rd Street.

- LPPHC’s inpatient unit and PHP/IOP will move to another SF site under discussion.

- The new unit can accommodate 30 beds.
Langley Porter Relocation and New Hospital Timeline

2018-2019: Visioning, Programming, Master Planning
2019-2021: Design
2022-2023: LPPI Demolition
2023-2028: Construction
2028-2029: Testing, Pre-occupancy, Planning, Fit-up

Grand Opening 2029

LPPI Transition Timeline

- Programming 2018
- Design 2019-20
- Demo and Construction 2020-21
- OSHD
- Patients move January 2022

Relocation of Langley Porter patients is critical to the mission of UCSF and the seismic imperative to build a new hospital on the Parnassus Heights site.
New Hospital High-level Timeline

Visioning, Programming, Master Planning

Design

LPPI Demolition

Construction

Testing, Pre-occupancy, Planning, Fit-up

2018–2019

2019–2021

2021–2022

2023–2028

2028–2029

2029

Community & User Group Input

User Group Input

Grand Opening
Why Build a New Hospital at Parnassus?

- Investing in UCSF Health’s future is critical to sustaining our public mission of providing top-quality care to all patients and supporting research and education.

- Our patient census is at record highs. It is essential that we expand access to accommodate projections for increasing patient demand.

- Providing quality facilities is critical to retaining, as well as recruiting top-tier clinicians, staff, researchers and students.

- Moffitt Hospital was built in 1955. Our physicians and staff are currently working in facilities that are outdated, inflexible, undersized and clinically obsolete.

- State seismic laws (SB 1953) require Moffitt Hospital to be structurally retrofitted or decommissioned as an inpatient facility by 2030.
Why Build a New Hospital at Parnassus?

- We have an opportunity to reimagine patient care by creating an optimal healing environment that addresses social, psychological, spiritual, and behavioral components of health in one place.

- Designing a building based on “whole-patient” needs – from leading-edge diagnostic tests and therapies to the privacy, natural spaces, clean air, and human connection essential to physical and emotional healing.

- Creating a new hospital on par with the excellence and preeminence of UCSF’s clinicians, scientists and mission.
Why a Larger Hospital at Parnassus?

- Patient census is at record highs. It is essential that we expand access to meet projections for increasing patient demand.
  - On average, more than five patients per night overnight in the ED while waiting for an inpatient bed - contributing to ED overcrowding and wait-times.
  - Due to capacity constraints and lack of beds, more than two patients per weekday must overnight in the PACU (post anesthesia recovery unit) following surgery - creating back-ups, delays, and cancellations for other scheduled surgeries.
  - On average, four times each week the hospital is on “high capacity alert” as a result of too many patients in the ED, not enough critical care beds, and/or not enough acute care beds. This delays all clinically appropriate patient movement.

All of the above scenarios can lead to safety, staffing, quality, and patient satisfaction issues.
An Evolving Market: Bay Area Population Trends

Substantial population growth is projected in the Bay Area over the next five years

- Bay Area population has grown steadily over the last 10 years (1% per year); growth is expected to continue at a similar pace.
- According to Nielsen, the Bay Area population is expected to grow from an estimated 7.8M in 2017 to 8.2M (nearly 6%) by 2022.
- Growth is expected across all 9 Bay Area counties.

9-County Bay Area Population Growth
Historical and Forecasted

- Thousands

CAG Meeting December 5, 2018
High Acuity/Complex Case Growth

• Bay Area hospital discharges for complex tertiary and quaternary cases – the cases treated at UCSF – are forecast to increase.

• Bay Area hospital discharges for many services like Neurosurgery and Vascular Surgery are expected to see significant increases as the population grows and the percentage of residents of Medicare age increases.

• A larger population will increase the total number of beds needed at UCSF to accommodate demand.

<table>
<thead>
<tr>
<th>Service Line</th>
<th>First Year Discharges</th>
<th>10-Year Discharges</th>
<th>Actual Change (Discharges)</th>
<th>Percent Change (Discharges)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neurosurgery</td>
<td>4,729</td>
<td>6,162</td>
<td>1,433</td>
<td>30.30%</td>
</tr>
<tr>
<td>Cardiac Surgery</td>
<td>5,177</td>
<td>6,657</td>
<td>1,480</td>
<td>28.60%</td>
</tr>
<tr>
<td>Neurology</td>
<td>26,064</td>
<td>31,459</td>
<td>5,395</td>
<td>20.70%</td>
</tr>
<tr>
<td>Cardiology - Electrophysiology</td>
<td>3,325</td>
<td>3,970</td>
<td>645</td>
<td>19.40%</td>
</tr>
<tr>
<td>Vascular Services - Surgical</td>
<td>5,231</td>
<td>6,236</td>
<td>1,005</td>
<td>19.20%</td>
</tr>
<tr>
<td>Thoracic Surgery</td>
<td>2,756</td>
<td>3,161</td>
<td>405</td>
<td>14.70%</td>
</tr>
<tr>
<td>Orthopedics - Medical</td>
<td>6,162</td>
<td>6,937</td>
<td>775</td>
<td>12.60%</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>6,678</td>
<td>7,516</td>
<td>838</td>
<td>12.50%</td>
</tr>
<tr>
<td>Orthopedics - Surgical</td>
<td>37,718</td>
<td>42,396</td>
<td>4,678</td>
<td>12.40%</td>
</tr>
<tr>
<td>Trauma - Medical</td>
<td>1,682</td>
<td>1,838</td>
<td>156</td>
<td>9.30%</td>
</tr>
<tr>
<td>Vascular Services - Medical</td>
<td>1,987</td>
<td>2,171</td>
<td>184</td>
<td>9.30%</td>
</tr>
</tbody>
</table>

Source: SG2 Bay Area Forecast
Complex Case Length of Stay

Demographic changes over the next 10 years, including an increase in national Medicare enrollment, will increase the acuity and length of stay of our patients.

- 31% increase in the Medicare Population over the next 10 years
- Increase in medical complexity of hospital patients as less complex cases transition to outpatient treatment
- Higher complexity will mean longer length of stay for each admission and greater bed need

**Discharges, Total Days and ALOS Forecast 2018–2028**

- Days: +4%
- ALOS: +4%
- Discharges: +0%

*Note: Forecast excludes 0–17 age group. Sources: Impact of Change®, 2018; HCUP National Inpatient Sample (NIS), Healthcare Cost and Utilization Project (HCUP) 2015; Agency for Healthcare Research and Quality, Rockville, MD; Claritas Pop-Facts®, 2018; Sg2 Analysis, 2018.*
Diller Medical Center at Parnassus Heights – New Hospital

- Demand for Transfers to UCSF Continues to Grow

In FY17, only 59% of medically necessary cases requested for transfer to UCSF were transferred. A large portion of the requested transfers did not come to UCSF because of a lack of capacity. With additional beds, a higher percentage of cases could be accommodated.

FY 2017 Adult Transfer Requests, All Services

Total Requests: 7,187

- Transfers: 3,284
- Non-Transfers: 2,244

No Medical Necessity: 1,659

Transfer rate* = 59%

CAG Meeting December 5, 2018
Demand for Specialty Office Visits Will Drive Need for Additional Beds

Many community providers today refer the majority of their patients to providers other than UCSF because we lack capacity. Ambulatory planning is underway to increase visit capacity to accommodate more referral requests, which will result in an increase in inpatient cases.

Sample Group Specialty Referrals

*Top Referrals by Volume (SF Only) - 2017*

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Total Referrals</th>
<th>% to UCSF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Physical Therapy (PT)</td>
<td>6976</td>
<td>7%</td>
</tr>
<tr>
<td>2 Dermatology</td>
<td>6402</td>
<td>21%</td>
</tr>
<tr>
<td>3 Gastroenterology (GI)</td>
<td>4233</td>
<td>13%</td>
</tr>
<tr>
<td>4 Otolaryngology (ENT)</td>
<td>2469</td>
<td>12%</td>
</tr>
<tr>
<td>5 Neurology</td>
<td>1540</td>
<td>66%</td>
</tr>
<tr>
<td>6 Psychiatry</td>
<td>1445</td>
<td>35%</td>
</tr>
<tr>
<td>7 Podiatry</td>
<td>1442</td>
<td>7%</td>
</tr>
<tr>
<td>8 Ophthalmology</td>
<td>1328</td>
<td>22%</td>
</tr>
<tr>
<td>9 Urology</td>
<td>1323</td>
<td>38%</td>
</tr>
<tr>
<td>10 Allergy</td>
<td>1079</td>
<td>24%</td>
</tr>
</tbody>
</table>
The current rate of growth and capacity constraints, coupled with volume projections, shows that UCSF needs to plan for a new hospital at Parnassus that is larger than what was contemplated in the 2014 Long Range Development Plan.

However, even with a larger hospital, there will still be a need to work with partners and affiliates and/or maintain adult beds at Mission Bay to meet projected demand.
UCSF Partnered with Marketing and Brand Strategy Firm Brand Bureau to Begin the Visioning Process for the Hospital of the Future

**INTRODUCTION**

The Hospital of 2030 (and Beyond)

The Hospital of the Future will be the pinnacle of the UCSF Health ecosystem and experience. It will facilitate the best possible patient care, with the most advanced medical treatments and technologies available. It will challenge others to rethink the role of the hospital within their daily lives and community.

In order to bring this experience to life and maintain it moving forward, the Hospital of the Future must deliver on these five imperatives:

### 5 IMPERATIVES FOR THE HOSPITAL OF THE FUTURE AT UCSF PARNASSUS HEIGHTS

- Create spaces that heighten physical and emotional health for everyone.
- Be porous—an influential healing presence within its community.
- Be an industry thought-leader and platform for information sharing.
- Establish a human relationship between individuals and the institution.
- Offer an experience that seamlessly adaptsto users’ unique needs and lifestyles.
Poster boards highlight each of these pillars in further detail.

Concept Platform

A summary of The Healing Habitat’s founding principles.

**CORE IDEA**

**The Healing Habitat**

**EXPERIENCE PILLARS**

- Human Connection
- Active Healing
- Organic Design
- Responsive Systems
- Urban Culture

**POSITIONING STATEMENT**

The Hospital of the Future is The Healing Habitat, a holistic experience and environment that fosters wellness for all.

**MISSION**

To lead the most advanced, effective, and human healthcare delivery experience.

**VISION**

A place that fosters wellness for all—physically and emotionally—within and beyond our walls.

**VALUES**

Community • Compassion • Leadership
Poster boards highlight these experience milestones in further detail

Experience Milestones

Though each individual within the hospital may interact the space differently, every user passes through the same general Experience Milestones on their journey. All services, spaces, experiences, and activities fall into one (or multiple) of these eight milestones.

The Hospital of the Future will be one component of the larger Parnassus Heights campus and, ultimately, the pinnacle of the UCSF Health continuum — therefore, not all milestones must be hosted within the hospital itself. Instead, the eight Experience Milestones are either site-specific (located in a single, physical space within the hospital), decentralized (distributed throughout the hospital and campus at large) or off-campus entirely.
Design Must-Haves

Our Design Must-Haves provide clear principles and key tenets for aesthetics, atmosphere, and programming.

- **Omnipresent Nature**: Deep connection to the outside world
- **Decentralized Amenities**: Strategically distributed resources
- **Community Interaction**: Stronger relationships through space
- **Integrity of Material**: Reflect quality and hospitality
- **Residential Scale**: Warm, approachable design
- **Porous & Permeable**: Open, transparent, and connected
- **Intuitive Design**: Anticipating needs, prioritizing efficiency
- **Flexible Use**: Designed with adaptation in mind
Building Through Partnerships

Diverse internal and external stakeholders’ perspectives will be elicited and captured for the new hospital. With the intention of capturing the best of the best!

Campus
The new hospital is a component of UCSF’s overall Comprehensive Parnassus Heights Plan to revitalize the entire campus.

Staff & Clinicians

Community
Patients & Families
Neighbors
Healthcare Advisors/ Partners

Philanthropists
The Helen Diller family is actively engaged in design and planning.
Questions?
Update on Dogpatch Cushioning Projects
Dogpatch Cushioning Projects

UCSF committed an unprecedented $10.55 million to the Dogpatch community for neighborhood improvement projects to offset development.

- **Esprit Park Renovation** ($5 million)
- **Development of Dogpatch Hub** ($4.2 million)
- **Development of 22nd Street Stair Connector** ($500,000)
- **Improvements to the Caltrain Gateway** ($250,000)
- **Traffic Signal at 18th & Minnesota Streets** ($600,000)
Update on UCSF’s Community Construction Outreach Program (CCOP)
# Status of Local Hire at UCSF Projects

<table>
<thead>
<tr>
<th>Current</th>
<th>General Contractor</th>
<th>Project Start</th>
<th>Est. Cost</th>
<th>Projected Completion</th>
<th>Local Hire % (10/31/18)</th>
<th>Number of Local Hires</th>
</tr>
</thead>
<tbody>
<tr>
<td>MN Street Housing</td>
<td>Skanska USA</td>
<td>June 2017</td>
<td>$227M</td>
<td>Fall 2019</td>
<td>12%</td>
<td>66</td>
</tr>
<tr>
<td>Block 33</td>
<td>Webcor Builders</td>
<td>July 2017</td>
<td>$237M</td>
<td>Late 2019</td>
<td>16%</td>
<td>50</td>
</tr>
<tr>
<td>Weill Neuro. Building</td>
<td>DPR Construction</td>
<td>March 2018</td>
<td>$358M</td>
<td>Spring 2020</td>
<td>5%</td>
<td>24</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Upcoming</th>
<th>General Contractor</th>
<th>Project Start</th>
<th>Est. Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSF @ ZSFG</td>
<td>Boldt Construction</td>
<td>Late 2019</td>
<td>$180M</td>
</tr>
</tbody>
</table>
Local Hiring in San Francisco

How does UCSF stack up against other projects in SF?

<table>
<thead>
<tr>
<th>Proj. / Dept. Name</th>
<th>General Contractor</th>
<th>Project Completion</th>
<th>Local Hire Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chase Arena</td>
<td>Clark</td>
<td>July 2019</td>
<td>15%</td>
</tr>
<tr>
<td>Chinese Hospital of SF</td>
<td>DPR</td>
<td>April 2016</td>
<td>29%</td>
</tr>
<tr>
<td>Sutter CPMC</td>
<td>Herrero-Boldt</td>
<td>Feb. 2019</td>
<td>36%</td>
</tr>
<tr>
<td>Port of SF</td>
<td>Multiple</td>
<td>2017 - 2018</td>
<td>26%</td>
</tr>
<tr>
<td>SFO</td>
<td>Multiple</td>
<td>2017 - 2018</td>
<td>35%</td>
</tr>
<tr>
<td>MTA</td>
<td>Multiple</td>
<td>2017 - 2018</td>
<td>38%</td>
</tr>
<tr>
<td>SF PUC</td>
<td>Multiple</td>
<td>2017 - 2018</td>
<td>43%</td>
</tr>
<tr>
<td>SF PW</td>
<td>Multiple</td>
<td>2017 - 2018</td>
<td>33%</td>
</tr>
<tr>
<td>Park and Rec.</td>
<td>Multiple</td>
<td>2017 - 2018</td>
<td>40%</td>
</tr>
</tbody>
</table>
Challenges

- Due to state law, UCSF’s local hire program must be voluntary
- Contractor engagement on local hire participation
- Labor market demand - Active construction environment leads to limited availability of local workers

Proposed Solutions

- Focus compliance on contractually required CCOP documents
- Conduct show cause meetings with non-compliant contractors
- Form a CCOP oversight committee
- Encourage building trades sponsorships of SF residents on UCSF projects.
Next Steps and Goals

Actions:
- Engage UCSF executives on challenges to local hire and discussed potential solutions
- Action plan with contractors to increase local hire participation

Goals:
- Increased local hire participation by Q1 of 2019
- Additional sponsorships of local residents
Construction Sector: CityBuild Program

- Assist in identifying career pathways and employment opportunities for San Francisco residents in the construction sector.

- Create training opportunities that assist with developing a qualified construction workforce.

- Assist contractors with meeting their labor needs and compliance with legislated construction workforce policies.
Stakeholder Partnerships

CityBuild
Training and Employment Services

- Community-Based Organizations
- Trade Unions and Apprenticeship Programs
- Construction Industry Employers
- Government Agencies
Questions?
Public Comment

Items on the agenda – 3 minutes per speaker
Next Steps

Photo: Stairway approaching Aldea Housing