



SAN FRANCISCO PLANNING DEPARTMENT

Executive Summary Adoption of Findings Under CEQA General Plan Amendment Planning Code and Zoning Map Amendments Conditional Use Authorization

HEARING DATE JULY 12, 2012

Date: July 5, 2012
Case No.: 2008.0762EMZC
Project Address: 835-845 JACKSON STREET
Zoning: Chinatown Residential Neighborhood Commercial District
65-N Height and Bulk District
Block/Lot: 0192/041
Project Sponsor: Linda Schumacher
Chinese Hospital Association
835-845 Jackson Street
San Francisco, CA 94133
Staff Contact: Rick Crawford – (415) 558-6358
rick.crawford@sfgov.org
Recommendation: **Approval with Conditions**

1650 Mission St.
Suite 400
San Francisco,
CA 94103-2479

Reception:
415.558.6378

Fax:
415.558.6409

Planning
Information:
415.558.6377

PROJECT DESCRIPTION

The Project Sponsor proposes to demolish the existing Medical Administration Building at 835 Jackson Street and the parking garage, construct a new hospital building in their place, and remodel and refurbish the existing hospital building. The proposed new hospital will be an acute care hospital with 54 acute care beds and a new skilled nursing facility with 22 beds. The new hospital building would be seven-stories over a basement and approximately 90.5 feet tall (excluding a approximately 30-foot tall mechanical penthouse) with a floor area of approximately 101,545 square feet. As part of the project, the Project Sponsor would create a landscaped usable openspace on Jackson Street that would wrap around the replacement hospital and include a portion of James Alley.

SITE DESCRIPTION AND PRESENT USE

The Chinese Hospital campus currently consists of the Chinese Hospital at 845 Jackson Street, built in 1979; the Medical Administration Building at 835 Jackson Street (the original Chinese Hospital, built in 1924); and the Chinese Hospital Parking Garage, located directly behind the 1924 Medical Administration Building. The project is located on the south side of Jackson Street between Stockton and Powell Streets and is occupied by the 43,368 square foot, five-story Chinese Hospital, the 29,793 square foot, five-story, Medical Administration Building and the 15,000 square foot, two-story, Chinese Hospital Parking Garage. The project site is approximately 22,516 square feet in area.

SURROUNDING PROPERTIES AND NEIGHBORHOOD

The project site is located in the Chinatown neighborhood. The area surrounding the project site features a mix of residential, retail, restaurant, educational, and institutional uses. The Ping Yuen Housing complex is located nearby, as are the Chinatown Public Library and the Gordon Lau Public Elementary School. The scale of development in the project vicinity varies widely, with building heights ranging from one to seven stories.

ENVIRONMENTAL REVIEW

The Project Sponsor applied for environmental review on June 24, 2008. The San Francisco Planning Department (the "Department") determined that an Environmental Impact Report was required and provided public notice of the preparation of such report on May 18, 2011. The Department published a Draft Environmental Impact Report (DEIR) on April 16, 2012. The San Francisco Planning Commission (the "Commission") held a public hearing to solicit testimony on the DEIR on May 17, 2012. The Department received written comments on the DEIR from April 17 to May 31, 2012. The Department published the Comments and Responses on June 28, 2012. The DEIR, together with the Comments and Responses constitute the Final Environmental Impact Report (FEIR).

HEARING NOTIFICATION

TYPE	REQUIRED PERIOD	REQUIRED NOTICE DATE	ACTUAL NOTICE DATE	ACTUAL PERIOD
Classified News Ad	20 days	June 22, 2012	June 20, 2012	22 days
Posted Notice	20 days	June 22, 2012	June 19, 2012	23 days
Mailed Notice	10 days	July 2, 2012	June 19, 2012	23 days

PUBLIC COMMENT

In addition to the comments regarding the Environmental Impact Report, the Department has received 43 letters from residents and businesses of the area, government agencies and non-profit service providers in favor of the project and no communications in opposition.

ISSUES AND OTHER CONSIDERATIONS

- **Demolition.** The project would demolish the Medical Administrative Building, constructed circa 1924, that served as the original hospital. While the demolition of the building represents the loss of a historical resource, the demolition is driven by two overarching factors: California's strict seismic standards for hospitals and the Project Sponsor's desire to respond to the anticipated healthcare needs of the community.
 - a. **Seismic Safety Requirements:** The first purpose of the project is to fulfill the Chinese Hospital's role as an essential healthcare facility in the event of a major disaster in the City by building a replacement hospital that meets the seismic safety requirements for acute-care facilities as defined in Senate Bill 1953 and as regulated by the Office of Statewide Hospital Planning and Development (OSHDP). The existing 1979 Chinese Hospital building is rated under OSHDP standards as a Structural Performance Category-3 (SPC-3) structure. A SPC-3 rating under Senate Bill 1953 (the State law requiring the evaluation of the seismic

performance of hospitals) indicates that the structure could experience irreparable structural damage and cease being able to function following strong ground motion. The proposed replacement hospital is designed to meet OSHPD requirements under the California Building Code and to meet hospital industry standards for patient safety, patient privacy, and infection control. The replacement hospital will be designed to be a SPC-5 structure, the highest category, and will provide greater assurance that the Chinatown community, and the City at large, will be effectively served by a functional hospital after a major earthquake.

- b. **Community Healthcare Needs:** The second purpose of the project is to respond to the anticipated healthcare needs of the community, the demands of physicians and patients for higher quality medical facilities and services, advancements in healthcare services, equipment, and technology, and the healthcare industry's adoption new "best" hospital practices for patient care and safety. In siting, sizing, and designing the replacement hospital, the Project Sponsor took into consideration the licensing requirements for acute-care hospitals under the California Code of Regulations. Currently, the existing hospital does not meet the state and federal requirements for new acute care hospitals. The project would bring the Chinese Hospital into compliance with these requirements.

The proposed design is intended to provide additional space for the new and evolving procedures and equipment that an acute care hospital is required to maintain. It will also provide a better working environment for physicians and staff members and enhance the efficiency of hospital operations. The replacement hospital will contain single patient rooms that will replace the existing two, three, and four-bed rooms and provide patients with a better healing environment. In order to promote the efficient functioning of the Chinese Hospital and assure that patients have a smooth transition from the inpatient setting back to their homes, the Project Sponsor designed the replacement hospital to include 22 skilled nursing beds. These beds will provide an opportunity for Chinatown residents to recuperate after inpatient procedures in a familiar, community setting. They will also allow the Chinese Hospital to care for the most critical patients by freeing up scarce inpatient beds.

- **Skilled Nursing Beds:** In order to promote the efficient functioning of the hospital, the project sponsor designed the Replacement Hospital to include skilled nursing facility beds. The average of age of inpatients at Chinese Hospital is 76 years of age. Many of these patients require a skilled level of care after discharge from the hospital and cannot be safely discharged to their homes. The number of skilled nursing beds is limited in San Francisco, so placing discharged patients is challenging for Chinese Hospital. These patients often stay longer than necessary in the higher cost, acute-care setting when they could be safely discharged to a skilled level of care, freeing up the acute-care bed for another patient who needs a higher level of care.
- **Replacement Hospital Design.** The project includes the construction of a new hospital building on the site of the existing Medical Administrative Building. The design of the building was driven by Chinese Hospital Association's needs to meet seismic safety requirements and community healthcare needs. The proposed building massing, height and bulk are dictated by those needs. A smaller building, or a building configured significantly different from the proposed, would not meet Chinese Hospital's program needs or would require considerably more staffing.

The Department has been working with the Project Sponsor to refine the design of the building façade. The design façade has been simplified with fewer colors and finish materials. The windows on the front façade have been recessed and grouped together. This arrangement gives them the look of larger punched windows found on neighboring buildings, and makes the window pattern more regular. The building now has a more strongly defined base, middle and top that is in keeping with the pattern of other buildings in the area. A solar collector on the roof replaces the traditional cornice element common on neighboring buildings.

The project would include an 890 square foot open space plaza in front of the new building. Landscaping and street furniture in the plaza area will be continued to the west on to James Alley. James Alley would be improved with decorative overhead lighting, decorative paving materials, landscaping, and seating. The seating would be clustered at the north end of the alley where it will get more sun exposure. Stone Street on the east side of the Project Site would be improved with a decorative pattern stamped into the paving and bollards along the sidewalk. The Project Sponsor is proposing to paint a mural reflecting the cultural heritage of the Chinatown neighborhood on the east side of the building along this alley. The Project Sponsor and the Department have been working closely with the Chinatown Community Development Center on streetscape, open space, and alleyway improvements. The proposed alley improvements are consistent with the Chinatown Alleyways Plan.

- **Height.** The new hospital building would be seven-stories over a basement and approximately 90.5 feet tall (excluding a approximately 30-foot tall mechanical penthouse). The height of the new building would be similar to that of the retained structure. The immediate neighborhood reflects a mix of older two to four story buildings and newer six to seven story apartment buildings. Due to the unique massing and volume requirements for medical facilities, almost all hospital buildings require special considerations for bulk, and the proposed height and bulk are consistent with precedent from other hospital approvals.
- **General Plan, Planning Code and Map Amendments.** The project requires amendments to the General Plan, Planning Code, and Zoning Maps to create the Chinese Hospital Special Use District and to reclassify the height and bulk limits on the property from 65-N to 110-G. The amendments are necessary to provide for the seismic safety requirements and to accommodate community healthcare needs as discussed above.
- **Off-Street Parking and Loading.** Off-street parking is not required for non-residential uses in the Chinatown Residential Neighborhood Commercial District. The project would demolish the existing 41-stall (78 spaces with valet parking) Chinese Hospital Parking Garage and will not provide any off-street parking as part of the project. Chinese Hospital physicians, staff, patients and visitors would park at existing public parking garages in Chinatown and North Beach, such as the Powell Street Parking Garage at 1140 Powell Street, Portsmouth Square Garage at 733 Kearny Street, the Chinatown Parking Garage at 728 Pacific Avenue, and the Royal Pacific Inn at 661 Broadway, all less than a 10-minute walk from Chinese Hospital.

The hospital would continue to use the one existing off-street freight loading space at the rear of the Project Site, off Stone Street behind the existing building. In addition to freight loading, the

project provides for ambulance access to the hospital's Emergency Department. The Emergency entrance to the hospital will remain on Jackson Street but will move from the current location in front of the existing hospital to the northeast corner of the new hospital at James Alley. The Hospital will request an extended white zone at the curb to provide for ambulances.

REQUIRED COMMISSION ACTION

In order for the project to proceed, the Commission must take the following actions:

- Adopt CEQA findings, pursuant to the California Environmental Quality Act (Cal. Pub. Res. Code Section 21000 *et seq.*, "CEQA"), and the Mitigation Monitoring and Reporting Program.
- Recommend approval to the Board of Supervisors, the following amendments to the General Plan: (1) amend "Policy 1.2 Promote a building form that harmonizes with the scale of existing buildings and width of Chinatown's streets" within the Chinatown Area Plan to add the language, "other than construction within the Chinese Hospital Special Use District" to the second paragraph of the Policy and (2) amend "Map 1 - Generalized Height Plan" of the Chinatown Area Plan to reference a height limit of 110 feet for the Project Site.
- Recommend approval to the Board of Supervisors of the following amendments to the Planning Code (1) add Section 249.69 to the Planning Code to create the Chinese Hospital Special Use District and (2) amend the San Francisco Zoning Map Sectional Maps ZN01, HT01, and SU01 to show the Chinese Hospital Special Use District and to reflect a change in height and bulk classification from 65-N to 110-G, which will be presented to the Board of Supervisors for adoption.
- Approve the Conditional Use Authorization to allow, upon adoption of the General Plan Amendments and SUD Legislation: (1) a hospital and medical center use on all floors of the building; (2) a use in excess of 2,500 square feet in floor area; and (3) a building height in excess of 35 feet in a CRNC District.

BASIS FOR RECOMMENDATION

- The Project Sponsor proposes to replace the building at 835 Jackson Street and the related parking structure with a new seven-story hospital and convert the existing hospital at 845 Jackson Street to a medical administrative office building with outpatient clinic services to provide for the future healthcare needs of Chinatown and the local community, and to comply with the seismic retrofit requirements for all acute care hospitals imposed by OSHPD.
- The project would create a new hospital building suited for modern healthcare practices and procedures that require more spacious facilities for new medical equipment, and would lead to improved healthcare quality and safety for patients, and a safe and accessible work environment for hospital staff.
- The project would create a new 22-bed skilled nursing facility that would improve the transition of patients from the acute care setting and allow Chinatown residents to remain close to their homes and loved ones while they recover from inpatient procedures.

- The project would promote the preservation of the Chinatown community, and conserve and protect the existing cultural and economic diversity of the Chinatown neighborhood by providing essential healthcare services to the Chinatown area and community residents.
- The project would promote the objectives and policies of the General Plan by providing important community safety features in a design that is aesthetically consistent with the character of Chinatown.
- The project would allow the Chinese Hospital to provide state of the art healthcare services in a modern facility, which would be a major improvement over the building in which the hospital currently operates.
- The project would provide increased employment opportunities for Chinatown residents and business both during and after construction.
- The project would allow the Chinese Hospital to replace its two, three, and four-bed patient rooms with single patient rooms that utilize modern medical equipment.
- The project would provide 890 square feet of landscaped open space on Jackson Street that would wrap around the side of the building along James Street and serve as an exterior community-gathering place for respite and relaxation along the uphill walk on Jackson Street.

RECOMMENDATION:	Approval with Conditions
------------------------	---------------------------------

Attachments:

Parcel Map
Sanborn Map
Zoning District Map
Height and Bulk District Map
Aerial Photograph
Site Photograph
Context Photograph
Existing and Proposed Chinatown Area Plan Map 1 "Generalized Height Plan"
Existing and Proposed Zoning Map HT01 (detail)
Proposed Zoning Map SU01 (detail)
Draft CEQA Findings Motion
Draft General Plan Amendment Resolution
Draft General Plan Amendment Ordinance
Board of Supervisors, Resolution Urging Initiation, and Consideration of Amendments to the General Plan
Draft Planning Code and Zoning Map Motion
Draft Planning Code and Zoning Map Ordinance
Draft Conditional Use Authorization Motion
Project Plans and Graphics Package from Project Sponsor

Attachment Checklist

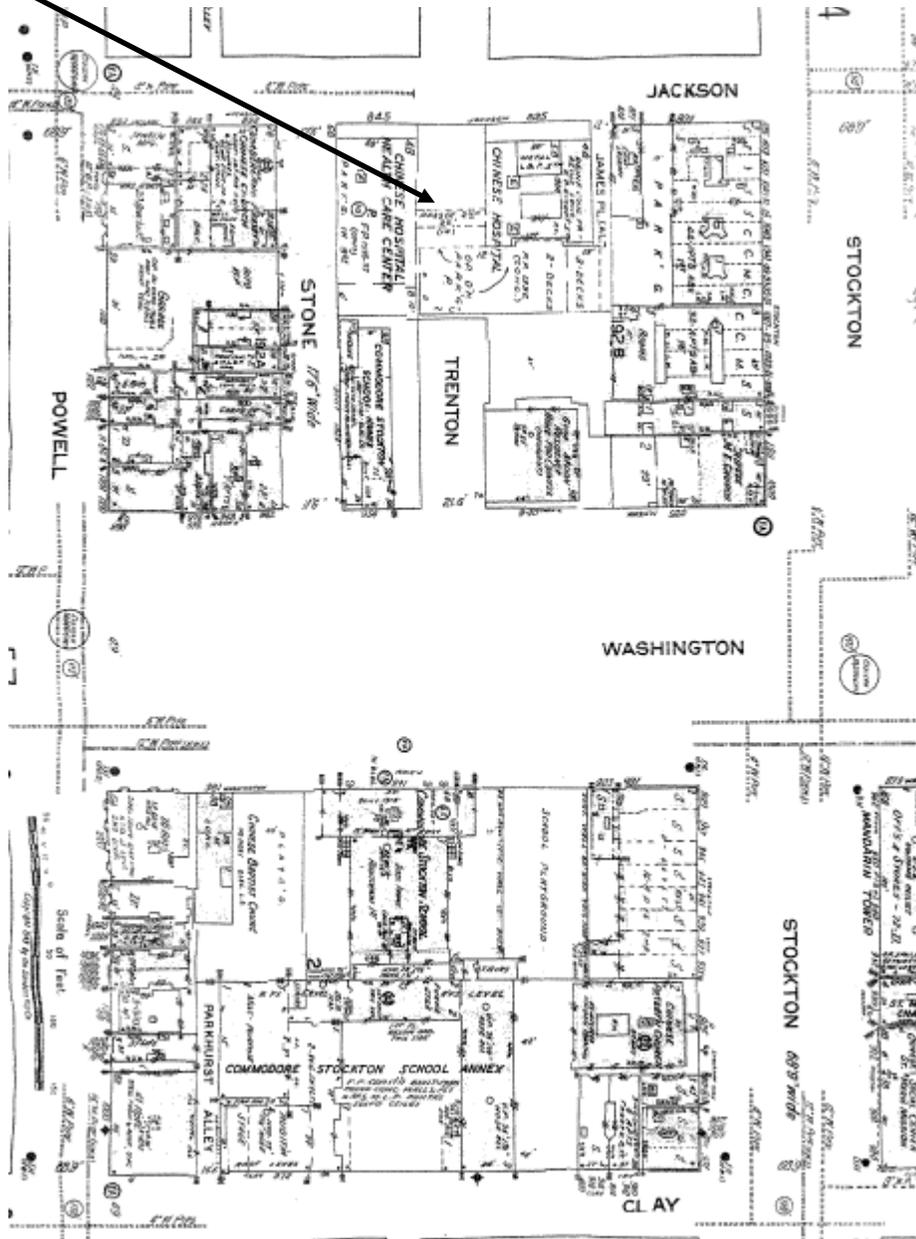
- | | |
|---|---|
| <input checked="" type="checkbox"/> Executive Summary | <input checked="" type="checkbox"/> Project sponsor submittal |
| <input checked="" type="checkbox"/> Draft Motions | Drawings: <u>Existing Conditions</u> |
| <input type="checkbox"/> Environmental Determination | <input checked="" type="checkbox"/> Check for legibility |
| <input checked="" type="checkbox"/> Zoning District Map | Drawings: <u>Proposed Project</u> |
| <input checked="" type="checkbox"/> Height & Bulk Map | <input checked="" type="checkbox"/> Check for legibility |
| <input checked="" type="checkbox"/> Parcel Map | <input type="checkbox"/> Health Dept. review of RF levels |
| <input checked="" type="checkbox"/> Sanborn Map | <input type="checkbox"/> RF Report |
| <input checked="" type="checkbox"/> Aerial Photo | <input type="checkbox"/> Community Meeting Notice |
| <input checked="" type="checkbox"/> Context Photos | <input type="checkbox"/> Inclusionary Affordable Housing Program:
Affidavit for Compliance |
| <input checked="" type="checkbox"/> Site Photos | |

Exhibits above marked with an "X" are included in this packet

_____ RC _____
Planner's Initials

Sanborn Map*

SUBJECT PROPERTY

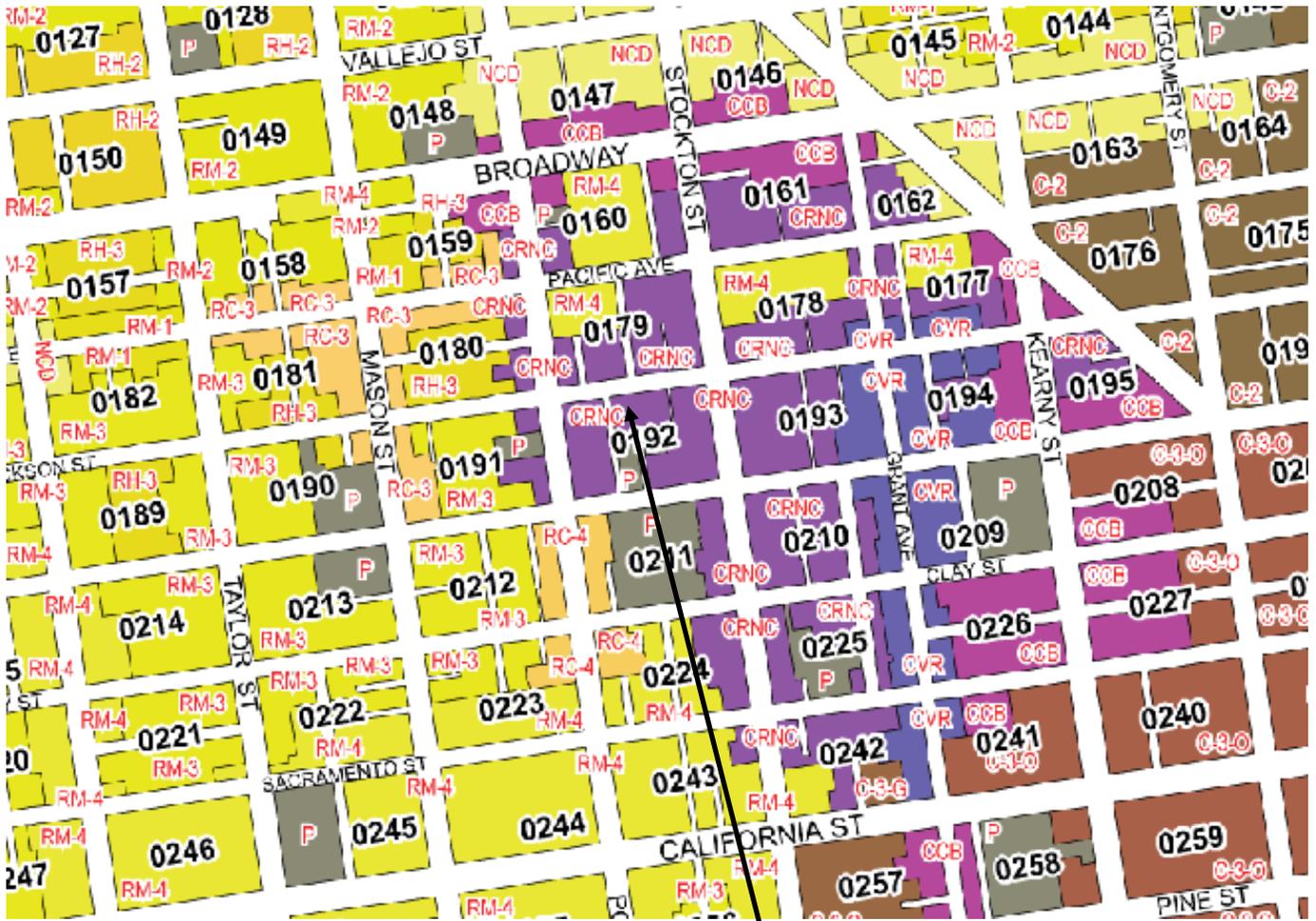


*The Sanborn Maps in San Francisco have not been updated since 1998, and this map may not accurately reflect existing conditions.



Case Number 2008.0762EZMC
Chinese Hospital Replacement Project
835-845 Jackson Street

Zoning Map

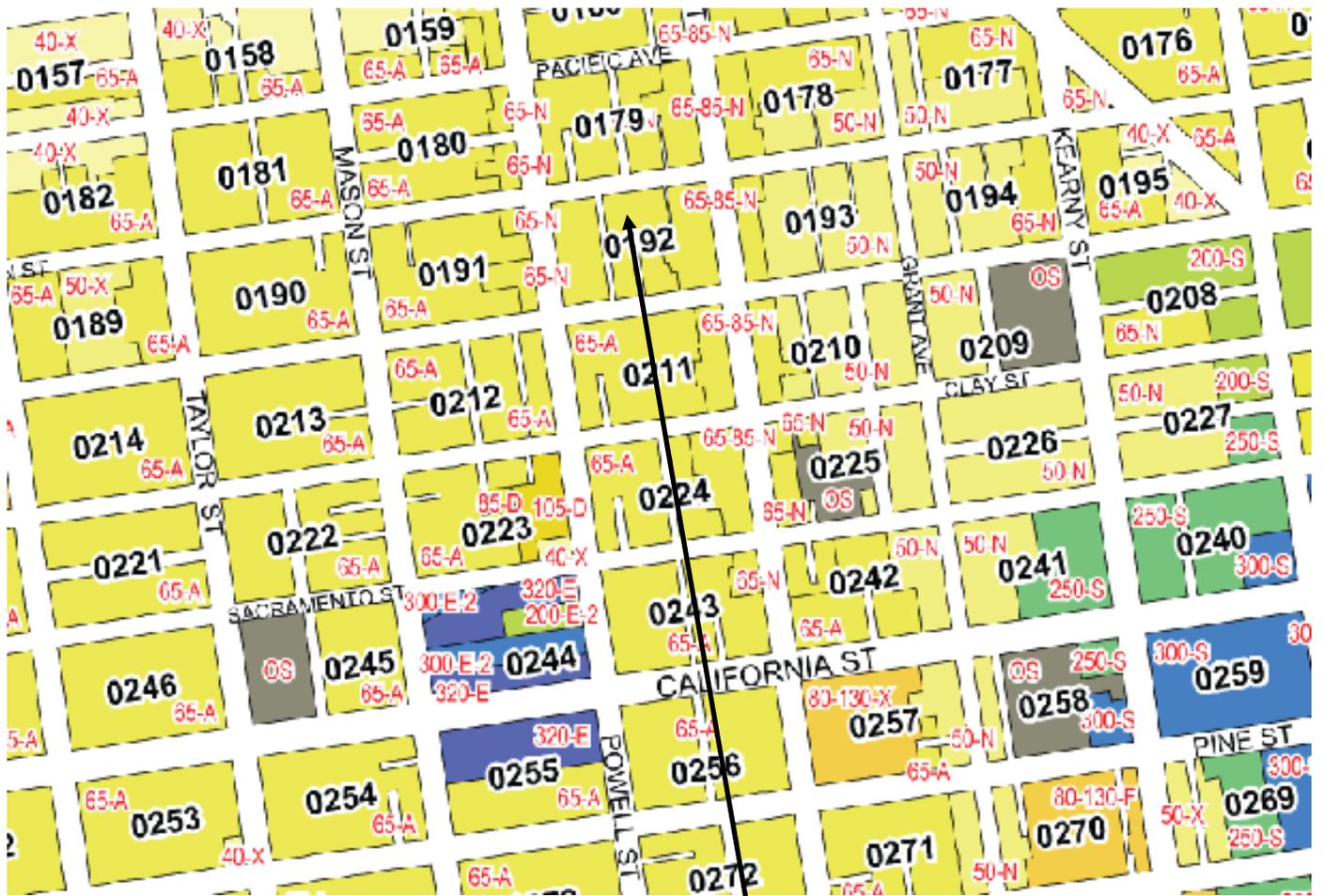


SUBJECT PROPERTY



Case Number 2008.0762EZMC
Chinese Hospital Replacement Project
835-845 Jackson Street

Height and Bulk Map



SUBJECT PROPERTY



Case Number 2008.0762EZMC
Chinese Hospital Replacement Project
835-845 Jackson Street

Aerial Photo



SUBJECT PROPERTY



Case Number 2008.0762EZMC
Chinese Hospital Replacement Project
835-845 Jackson Street

Site Photo



MAB—835 Jackson



Hospital—845 Jackson Street

Case Number 2008.0762EZMC
Chinese Hospital Replacement Project
835-845 Jackson Street

Context Photo

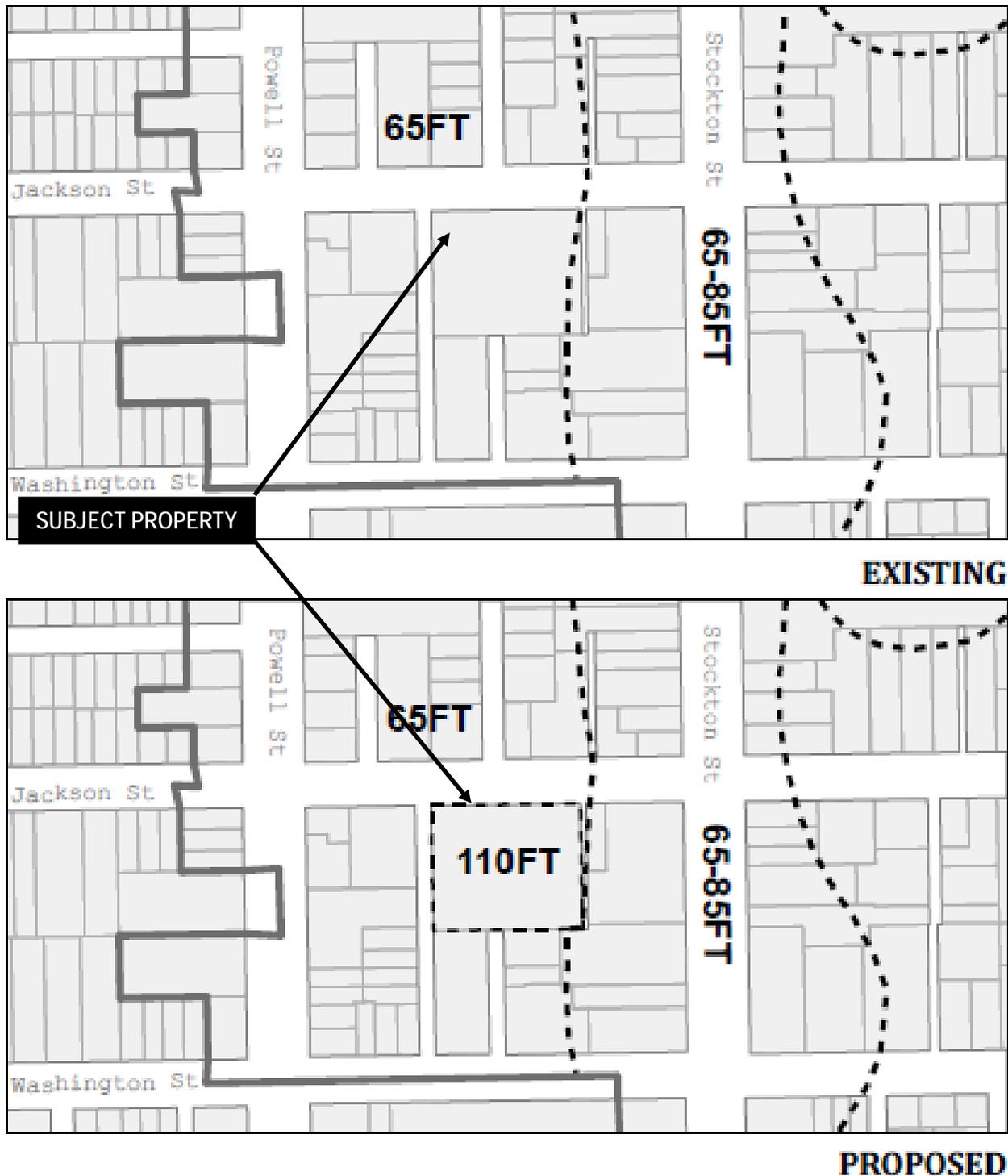
SW View of Jackson Street From Stockton Street



Case Number 2008.0762EZMC
Chinese Hospital Replacement Project
835-845 Jackson Street

General Plan Chinatown Area Plan Map 1

Generalized Height Map



Case Number 2008.0762EZMC
Chinese Hospital Replacement Project
835-845 Jackson Street

Zoning Map HT01 (Detail)



SUBJECT PROPERTY

EXISTING



PROPOSED

Case Number 2008.0762EZMC
Chinese Hospital Replacement Project
835-845 Jackson Street



SAN FRANCISCO PLANNING DEPARTMENT

Planning Commission Draft Motion CEQA FINDINGS

HEARING DATE: JULY 12, 2012

Date: July 5, 2012
Case No.: 2008.0762EMZC
Project Address: 835-845 JACKSON STREET
Zoning: Chinatown Residential Neighborhood Commercial District
65-N Height and Bulk District
Block/Lot: 0192/041
Project Sponsor: Linda Schumacher
Chinese Hospital Association
835-845 Jackson Street
San Francisco, CA 94133
Staff Contact: Rick Crawford – (415) 558-6358
rick.crawford@sfgov.org

1650 Mission St.
Suite 400
San Francisco,
CA 94103-2479

Reception:
415.558.6378

Fax:
415.558.6409

Planning
Information:
415.558.6377

ADOPTING FINDINGS UNDER THE CALIFORNIA ENVIRONMENTAL QUALITY ACT INCLUDING FINDINGS REJECTING ALTERNATIVES AS INFEASIBLE, ADOPTING A STATEMENT OF OVERRIDING CONSIDERATIONS, AND ADOPTING A MITIGATION, MONITORING, AND REPORTING PROGRAM, RELATING TO THE CHINESE HOSPITAL REPLACEMENT PROJECT LOCATED AT 835-845 JACKSON STREET ON ASSESSOR'S BLOCK 0192, LOT 041 AND INCLUDING THE DEMOLITION OF AN EXISTING MEDICAL ADMINISTRATION BUILDING AND CONSTRUCTION OF A NEW 101,545 SQUARE FOOT, 110-FOOT HOSPITAL BUILDING WITH 54 ACUTE CARE BEDS AND A SKILLED NURSING FACILITY WITH 22 BEDS IN THE CRNC (CHINATOWN RESIDENTIAL NEIGHBORHOOD COMMERCIAL) ZONING DISTRICT AND WITHIN A 65-N HEIGHT AND BULK DISTRICT.

In determining to approve the Chinese Hospital Replacement Project located at 835-845 Jackson Street (Assessor's Block 0912, Lot 041), described in Section I, Project Description below, ("Project"), the San Francisco Planning Commission ("Commission") makes and adopts the following findings of fact regarding the Project and mitigation measures and alternatives, and adopts the statement of overriding considerations, based on substantial evidence in the whole record of this proceeding and pursuant to the California Environmental Quality Act, California Public Resources Code Section 21000 et seq. ("CEQA"), particularly Section 21081 and 21081.5, the Guidelines for Implementation of CEQA, 14 California Code of Regulations Section 15000 et seq. ("Guidelines"), particularly Section 15091 through 15093 and Chapter 31 of the San Francisco Administrative Code.

This document is organized as follows:

Section I provides a description of the Project, the Project Objectives, the environmental review process for the Project, the approval actions to be taken, and the location of records;

Section II identifies potentially significant impacts that are avoided or reduced to less-than-significant levels and makes findings regarding Mitigation Measures;

Section III identifies significant, unavoidable historic resources and air quality impacts of the Project that cannot be avoided or reduced to less-than-significant levels through Mitigation Measures;

Section IV evaluates the different project alternatives and the economic, legal, social, technological, and other considerations that support approval of the Project as proposed and the rejection of these alternatives; and

Section V makes a Statement of Overriding Considerations setting forth the specific economic, legal, social, technological, or other benefits of the Project that outweigh the significant and unavoidable adverse environmental effects and support the rejection of the project alternatives.

The **Mitigation Monitoring and Reporting Program (“MMRP”)** for the mitigation measures that have been proposed for adoption is attached with these findings as Exhibit A. The MMRP is required by CEQA Section 21081.6 and CEQA Guidelines Section 15091. The MMRP provides a table setting forth each mitigation measure listed in the Final Environmental Impact Report for the Project (“Final EIR”) that is required to reduce or avoid a significant adverse impact. The MMRP also specifies the agency responsible for implementation of each measure and establishes monitoring actions and a monitoring schedule. The full text of the mitigation measures is set forth in the MMRP.

These findings are based upon substantial evidence in the entire record before the Commission. The references set forth in these findings to certain pages or sections of the Draft Environmental Impact Report (“Draft EIR” or “DEIR”) or the Comments and Responses document (“C&R”), which together comprise the Final EIR, are for ease of reference and are not intended to provide an exhaustive list of the evidence relied upon for these findings.

MOVED, that the Commission hereby adopts findings under the California Environmental Quality Act, including rejecting alternatives as infeasible and adopting a Statement of Overriding Considerations, and adopts the MMRP attached as Exhibit A based on the following findings:

I. Project Description

A. Chinese Hospital Replacement Project

Chinese Hospital campus (835-845 Jackson Street) currently consists of the Chinese Hospital at 845 Jackson Street, built in 1979; the Medical Administration Building at 835 Jackson Street (the original Chinese Hospital, built in 1924); and the Chinese Hospital Parking Garage, located directly behind the 1924 Medical Administration Building. The Chinese Hospital Association, (“Project Sponsor”), proposes to demolish the Medical Administration Building and the parking garage, construct a new, hospital building in their place, and remodel and refurbish the existing hospital building. The proposed new hospital would be an acute care hospital with 54 acute care beds (the same number of licensed acute-care

beds as in the existing Chinese Hospital) and a new skilled nursing facility with 22 beds. The Project includes approval of a special use district and zoning map amendment to facilitate this development.

B. Project Sponsor Objectives

The Project Sponsor's objectives are to design and build a hospital that:

- Honors the history and continuum of healthcare provided by Chinese Hospital in Chinatown;
- Respects the architectural context of the surrounding buildings while meeting the hospital's mission to provide modern healthcare facilities for its community;
- Can physically satisfy the current and future requirements for the delivery of quality healthcare to patients;
- Provides a seismically safe environment for its patients, visitors, physicians, and employees;
- Is economically cost efficient and improves the operation of the hospital;
- Furthers Chinese Hospital's mission to serve the healthcare needs of its community through the use of advanced medical practices, technology, and equipment;
- Minimally disrupts the current hospital's acute-care services and outpatient operations, to ensure that the healthcare services for the community continue to be provided during project implementation;
- Provides space for existing hospital functions in a new hospital that meets the requirements of SB 1953, other state agencies, and hospital industry associations;
- Provides sufficient space to replace the existing 54 acute-care hospital beds and upgrade and modernize them; and
- Provides a 22-bed skilled nursing facility to improve the transition of patients from the acute-care setting to home.

C. Planning and Environmental Review Process

The Project Sponsor applied for environmental review on June 24, 2008. The San Francisco Planning Department (the "Department") determined that an Environmental Impact Report was required and published and distributed a Notice of Preparation of an EIR/Initial Study ("NOP/IS") on May 18, 2011. The NOP/IS is Appendix A to the Draft EIR.

The Department published a Draft Environmental Impact Report (DEIR) on April 16, 2012. The Commission held a public hearing to solicit testimony on the DEIR on May 17, 2012. The Department

received written comments on the DEIR from April 17 to May 31, 2012. The Department published the Comments and Responses on June 28, 2012. The DEIR, together with the Comments and Responses constitute the Final EIR. The Commission certified the FEIR on July 12, 2012 by Motion No. _____.

D. Approval Actions

1. Planning Commission Actions

The Planning Commission is taking the following actions and approvals to implement the Project:

- Certification of the Final EIR;
- General Plan consistency determination for the proposed Project;
- Recommend approval to the Board of Supervisors of a Zoning Map amendment to reclassify the height and bulk limits on the main project site (Sheet HT01) and to establish the boundaries of the Chinese Hospital SUD (Sheet SU01);
- Recommend approval to the Board of Supervisors of a Planning Code text amendment to establish the Chinese Hospital SUD;
- Recommend approval to the Board of Supervisors of an amendment to the San Francisco General Plan to the Chinatown Area Plan; and
- Approval of any conditional use authorization that may continue to apply after full implementation of the proposed legislative land use amendments.

2. Board of Supervisors Actions

The Board of Supervisors is taking the following actions and approvals to implement the Project:

- The Planning Commission's certification of the Final EIR may be appealed to the Board of Supervisors. If appealed, the Board of Supervisors will determine whether to uphold the certification or to remand the Final EIR to the Planning Department for further review;
- The Planning Commission's approval of any conditional use authorization may be appealed to the Board of Supervisors. If appealed, the Board of Supervisors will determine whether to uphold, uphold and modify, or reject the conditional use authorization.
- Approval of a Zoning Map amendment to rezone the height and bulk limits on the main project site (Sheet HT01) and to establish the boundaries of the Chinese Hospital SUD (Sheet SU01);
- Approval of a Planning Code text amendment to establish the Chinese Hospital SUD;
- Approval of an amendment to the San Francisco General Plan to the Chinatown Area Plan; and

3. Actions by Other City Departments

- Approval of demolition, grading, and site permits (Department of Building Inspection);
- Approval of encroachment permits for work to be done in public rights-of-way (alleys, streets, and sidewalks) (Bureau of Street Use and Mapping of the Department of Public Works);
- Approval of curb or road modifications (Department of Parking and Traffic);

- Approval of compliance with requirements of the Stormwater Management Ordinance for projects with over 5,000 sq. ft. of disturbed ground area (the San Francisco Public Utilities Commission Wastewater Enterprise, Urban Watershed Management Program); and

D. Location and Custodian of Records

The public hearing transcript, a copy of the letters regarding the FEIR received during the public review period, the administrative record, and background documentation for the FEIR are located at the Planning Department, 1650 Mission Street, San Francisco. The Planning Commission Secretary is the custodian of records for the Planning Department and the Planning Commission.

These findings are based upon substantial evidence in the entire record before the Commission.

II. Potentially Significant Impacts That Are Avoided Or Reduced To A Less-Than-Significant Level And Findings Regarding Mitigation Measures

The following Sections II and III set forth the Commission's findings about the Final EIR's determinations regarding significant environmental impacts and the mitigation measures proposed to address them. These findings provide the written analysis and conclusions of the Commission regarding the environmental impacts of the Project and the mitigation measures included as part of the Final EIR and adopted by the Commission and other City decisionmakers as part of the Project. To avoid duplication and redundancy, and because the Commission agrees with, and hereby adopts, the conclusions in the Final EIR, these findings will not repeat the analysis and conclusions in the Final EIR, but instead incorporates them by reference herein and relies upon them as substantial evidence supporting these findings.

In making these findings, the Commission has considered the opinions of City staff and experts, other agencies and members of the public. The Commission finds that the determination of significance thresholds is a judgment decision within the discretion of the City and County of San Francisco; the significance thresholds used in the EIR are supported by substantial evidence in the record, including the expert opinion of the EIR preparers and City staff; and the significance thresholds used in the EIR provide reasonable and appropriate means of assessing the significance of the adverse environmental effects of the Project.

As set forth below, the Commission adopts and incorporates all of the mitigation measures set forth in the Final EIR and the attached MMRP to substantially lessen or avoid the potentially significant and significant impacts of the Project. The Commission and other City decision makers intend to adopt each of the mitigation measures proposed in the Final EIR. Accordingly, in the event a mitigation measure recommended in the Final EIR has inadvertently been omitted in these findings or the MMRP, such mitigation measure is hereby adopted and incorporated in the findings below by reference. In addition, in the event the language describing a mitigation measure set forth in these findings or the MMRP fails to accurately reflect the mitigation measures in the Final EIR due to a clerical error, the language of the policies and implementation measures as set forth in the Final EIR shall control. The impact numbers and mitigation measure numbers used in these findings reflect the information contained in the Final EIR.

The potentially significant impacts of the Project that will be mitigated through implementation of mitigation measures include impacts related to:

- cumulative construction-related transportation;
- archeological resources and human remains;
- paleontological resources; and
- construction and operational noise and vibration;

The Project Sponsor has agreed to implement all mitigation measures identified in the Final EIR. The required mitigation measures are fully enforceable and will be included as conditions of approval by and the Commission and other City decisionmakers. Pursuant to CEQA Section 21081.6, adopted mitigation measures will be implemented and monitored as described in the MMRP, which is incorporated herein by reference.

With the required mitigation measures, all potential project impacts, with the exception of impacts related to historic resources and construction air quality as described in Section III below, would be avoided or reduced to a less-than-significant level.

As authorized by CEQA Section 21081 and CEQA Guidelines Section 15091, 15092, and 15093, based on substantial evidence in the whole record of this proceeding, the City finds that, unless otherwise stated, all of the changes or alterations to the Project listed herein have been or will be required in, or incorporated into, the project to mitigate or avoid the significant or potentially significant environmental impacts listed herein, as identified in the Final EIR, that these mitigation measures will be effective to reduce or avoid the potentially significant impacts as described in the EIR, and these mitigation measures are feasible to implement and are within the responsibility and jurisdiction of the City and County of San Francisco to implement or enforce.

III. Significant Impacts That Cannot Be Avoided Or Reduced To A Less-Than-Significant Level

Based on substantial evidence in the whole record of these proceedings, the Commission finds that, where feasible, changes or alterations have been required, or incorporated into, the Project to reduce the significant environmental impacts. The Commission finds that the mitigation measures in the Final EIR and described below are feasible and appropriate, and that changes have been required in, or incorporated into, the Project that, pursuant to Public Resources Code section 21002 and CEQA Guidelines section 15091, may substantially lessen, but do not avoid (i.e., reduce to less than significant levels), the potentially significant environmental effect associated with implementation of the Project. The Commission adopts all of the mitigation measures proposed in the Final EIR and set forth in the MMRP. The Commission further finds, however, for the impacts listed below, despite the implementation of mitigation measures, the effects remain significant and unavoidable.

The Commission determines that the following significant impacts on the environment, as reflected in the Final EIR, are unavoidable, but under Public Resources Code Section 21081(a)(3) and (b), and CEQA Guidelines 15091(a)(3), 15092(b)(2)(B), and 15093, the Commission determines that the impacts are

acceptable due to the overriding considerations described in Section V below. This finding is supported by substantial evidence in the record of this proceeding.

A. Significant and Unavoidable Impacts to Historic Resources.

Impact CR-1: The proposed demolition of the existing 1924 Medical Administration Building would have a substantial adverse effect on an individual historical resource and on the National Register of Historic Places/California Register of Historical Resources-eligible Chinatown historic district.

- Mitigation Measure M-CR-1a. Written and Photographic Documentation; and
- Mitigation Measure M-CR-1b: Permanent Interpretative Display.

Completing historical resource documentation and installing a permanent interpretive display would reduce this impact, but not to a less-than-significant level. Thus, this impact remains significant and unavoidable.

Impact CR-2: The proposed Replacement Hospital building would have a substantial adverse effect on the National Register of Historic Places/California Register of Historical Resources-eligible Chinatown historic district.

- Mitigation Measure M-CR-1a. Written and Photographic Documentation.

Completing historical resource documentation would reduce this impact, but not to a less-than-significant level. Thus, this impact remains significant and unavoidable.

Impact C-CR-1: The proposed project in combination with other past, present and reasonably foreseeable future projects in the project vicinity would result in a cumulatively considerable contribution to significant adverse impacts on the National Register of Historic Places/California Register of Historical Resources-eligible Chinatown historic district.

- Mitigation Measure M-CR-1a. Written and Photographic Documentation.

Completing historical resource documentation would reduce this impact, but not to a less-than-significant level. Thus, this impact remains significant and unavoidable.

B. Significant and Unavoidable Impacts to Air Quality.

Impact AQ-3: Construction of the proposed project would generate substantial levels of PM2.5 and other toxic air contaminants, including diesel particulate matter, that could significantly affect nearby sensitive receptors.

- Mitigation M-AQ-3: Construction Emissions Minimization Plan.

Developing and implementing a construction emissions minimization plan would reduce this impact, but not to a less-than-significant level. Thus, this impact remains significant and unavoidable.

Pursuant to Section 21067 of CEQA and Sections 15040, 15081, and 15082 of the State CEQA Guidelines, the Commission finds that the proposed Project would result in impacts that cannot be avoided if the Project is implemented: demolition of the 1924 Medical Administration Building, an historic resource, construction of the Replacement Hospital within the National Register of Historic Places/California Register of Historical Resources-eligible Chinatown historic district, and construction related air quality impacts. These impacts would remain significant and unavoidable if the Project were implemented.

IV. Consideration of Project Alternatives

This Section describes the Project alternatives and the reasons for approving the Project and for rejecting the alternatives. CEQA mandates that an EIR evaluate a reasonable range of alternatives to the Project or the Project location that generally reduce or avoid potentially significant impacts of the Project. CEQA requires that every EIR also evaluate a "No Project" alternative. Alternatives provide a basis of comparison to the Project in terms of their significant impacts and their ability to meet Project objectives. This comparative analysis is used to consider reasonable, potentially feasible options for minimizing environmental consequences of the Project.

The Commission certifies that it has independently reviewed and considered the information on the alternatives provided in the Final EIR and in the record. The Final EIR reflects the Commission's and the City's independent judgment as to the alternatives.

The Commission finds that the Project provides the best balance between satisfaction of the project objectives and mitigation of environmental impacts to the extent feasible, as described and analyzed in the EIR and adopts a statement of overriding considerations as set forth in Section IV below.

A. Alternatives Analyzed in the FEIR

The FEIR analyzed four alternatives to the Project: the No Project Alternative, the Full Preservation Alternative, the Partial Preservation Alternative, and the Compatible Replacement Hospital Alternative. The No Project Alternative analyzes no immediate change to the Project site, including no demolition of the Medical Administration Building or the parking garage, no construction of the new hospital, and no renovation of the existing Chinese Hospital. The Full Preservation Alternative analyzes retaining and reusing the 1924 Medical Administration Building by constructing a 1-story roof top addition to the Medical Administration Building and seismically retrofitting it for use as a replacement hospital, demolishing the parking garage and constructing in its place a 5-story (plus basement) rear addition that would be connected to the 1924 Medical Administration Building, and seismically retrofitting the existing Chinese Hospital; under this alternative, the sky bridge connecting the two buildings would be removed and reconstructed after completion of the roof top addition to the 1924 Medical Administration Building. The Partial Preservation Alternative analyzes retaining and seismically retrofitting the most architecturally significant portion of the 1924 Medical Administration Building, demolishing the parking garage, constructing a new tower behind the Medical Administration Building, and remodeling the

existing Chinese Hospital. The Compatible Replacement Hospital Alternative analyzes demolishing the 1924 Medical Administration Building and the parking garage, constructing a replacement hospital in their place with a different massing and design, and remodeling and refurbishing the existing Chinese Hospital.

B. Alternatives Rejected and Reasons for Rejection

1. No Project Alternative. The No Project Alternative would not be desirable or meet the Project Sponsor's goals. The No Project Alternative would not be in compliance with the requirements of SB 1953, other state agencies, and hospital industry associations. The No Project Alternative is rejected in favor of the project and is found infeasible for the following environmental, economic, and social reasons:
 - A. The No Project Alternative would not provide modern healthcare facilities for the community.
 - B. The No Project Alternative would not provide a seismically safe environment that meets the requirements of SB 1953 for patients, visitors, physicians, or employees.
 - C. As a pre-Northridge Earthquake hospital facility, the existing Chinese Hospital is susceptible to structural damage and could result in interruption of healthcare services to the community for an extended period of time in the event of a major earthquake. In addition, the Medical Administration Building is rated as a SPC-1 structure (indicating that the structure poses a "significant risk of collapse and is a danger to the public after a strong earthquake"), and accordingly, in the event of an earthquake the No Project Alternative could potentially endanger patients, visitors, physicians, and staff occupying the existing Medical Administration Building.
 - D. The No Project Alternative would not provide space for advanced medical practices, technology, or equipment.
 - E. The No Project Alternative would not replace the existing 54 acute-care beds or upgrade and modernize them.
 - F. The No Project Alternative would not provide a new 22-bed skilled nursing facility.
 - G. The No Project Alternative would not provide opportunities for new sources of jobs, fees, taxes, or revenue.
2. Full Preservation Alternative. The Full Preservation Alternative would not be desirable or meet all of the Project Sponsor's goals. The Full Preservation Alternative is rejected in favor of the project and is found infeasible for the following environmental, economic, and social reasons:

- A. The Full Preservation Alternative would meet some, but not all of the Project Sponsor's Objectives.
 - B. The Full Preservation Alternative would provide four fewer acute-care beds than the project or the existing Chinese Hospital.
 - C. The Full Preservation Alternative would not have sufficient space to accommodate the following services on the main project site: satellite laboratory in the surgery area, medical gas storage area, information technology, materials management, medical records, medical staff offices, social services, utilization review, and nursing administration.
 - D. The Full Preservation Alternative would result in separation of related functions, which would affect hospital efficiency and staffing. The separation of related hospital functions would increase the need to transport patients between floors.
 - E. Construction of the Full Preservation Alternative would commence approximately three to four years later than the project due to Office of Statewide Health Planning and Development (OSHPD) review.
 - F. The Full Preservation Alternative would not provide a new 22-bed skilled nursing facility.
 - G. The Full Preservation Alternative would not be cost efficient or improve the operation of the Chinese Hospital.
3. Partial Preservation Alternative. The Partial Preservation Alternative would not be desirable or meet the Project Sponsor's goals. The Partial Preservation Alternative is rejected in favor of the project and is found infeasible for the following environmental, economic, and social reasons:
- A. The Partial Preservation Alternative would meet some, but not all of the Project Sponsor's Objectives.
 - B. The Partial Preservation Alternative would provide 32 fewer acute-care beds than the project or the existing Chinese Hospital.
 - C. The Partial Preservation Alternative would result in operational deficiencies, which would increase the operational costs for the Chinese Hospital.
 - D. Construction of the Partial Preservation Alternative would commence approximately three to four years later than the project due to OSHPD review.
 - E. The Partial Preservation Alternative would not provide a new 22-bed skilled nursing facility.
 - F. The Partial Preservation Alternative would result in a significant and unavoidable impact on the Medical Administration Building individual historic resource.

- G. Construction of the new hospital tower under Partial Preservation Alternative would result in a significant and unavoidable project-level impact on the NRHP/CRHR-eligible Chinatown historic district and make a considerable contribution to a significant cumulative impact on the NRHP/CRHR-eligible Chinatown historic district.
 - H. The Partial Preservation Alternative could have a significant and unavoidable shadow impact on Recreation and Park Commission properties and could make a considerable contribution to a significant cumulative shadow impact.
 - I. The Partial Preservation Alternative would not reduce the impacts created by the project to a less than significant level.
4. Compatible Replacement Hospital Alternative. The Compatible Replacement Hospital Alternative would not be desirable or meet the Project Sponsor's goals. The Compatible Replacement Hospital Alternative is rejected in favor of the project and is found infeasible for the following environmental, economic, and social reasons:
- A. The Compatible Replacement Hospital Alternative would meet most, but not all of the Project Sponsor's Objectives.
 - B. The Compatible Replacement Hospital Alternative would result in operational deficiencies and would require eight additional staff compared to the project, which would increase the operational costs for the Chinese Hospital.
 - C. Construction of the Compatible Replacement Hospital Alternative would commence approximately three to four years later than the project due to OSHPD review.
 - D. The Compatible Replacement Hospital Alternative would provide one fewer bed in the skilled nursing facility as compared to the project.
 - E. The Compatible Replacement Hospital Alternative would result in a significant and unavoidable impact on the Medical Administration Building individual historic resource and significant project-level and cumulative impacts on the NRHP/CRHR-eligible Chinatown historic district.
 - F. The new hospital tower under Compatible Replacement Hospital Alternative would result in a significant and unavoidable project-level impact on the NRHP/CRHR-eligible Chinatown historic district and make a considerable contribution to a significant cumulative impact on the NRHP/CRHR-eligible Chinatown historic district.
 - G. The Compatible Replacement Hospital would not reduce the impacts created by the project to a less than significant level.

- H. The Compatible Replacement Hospital Alternative could have a significant and unavoidable shadow impact on Recreation and Park Commission properties and could make a considerable contribution to a significant cumulative shadow impact.

V. Statement of Overriding Considerations

Pursuant to CEQA section 21081 and CEQA Guideline 15093, the Commission hereby finds, after consideration of the Final EIR and the evidence in the record, that each of the specific overriding economic, legal, social, technological and other benefits of the Project as set forth below independently and collectively outweighs the significant and unavoidable impacts and is an overriding consideration warranting approval of the Project. Any one of the reasons for approval cited below is sufficient to justify approval of the Project. Thus, even if a court were to conclude that not every reason is supported by substantial evidence, the Commission will stand by its determination that each individual reason is sufficient. The substantial evidence supporting the various benefits can be found in the preceding findings, which are incorporated by reference into this Section, and in the documents found in the Record of Proceedings, as defined in Section I.

On the basis of the above findings and the substantial evidence in the whole record of this proceeding, the Commission specially finds that there are significant benefits of the Project in spite of the unavoidable significant impacts, and therefore makes this Statement of Overriding Considerations. The Commission further finds that, as part of the process of obtaining Project approval, all significant effects on the environment from implementation of the Project have been eliminated or substantially lessened where feasible. All mitigation measures proposed in the Final EIR for the proposed Project are adopted as part of this approval action. Furthermore, the Commission has determined that any remaining significant effects on the environment found to be unavoidable are acceptable due to the following specific overriding economic, technical, legal, social and other considerations. In addition, the Commission finds that the rejected Project Alternatives are also rejected for the following specific economic, social, or other considerations, in addition to the specific reasons discussed in Section II above.

1. The project would provide much needed healthcare services to the Chinatown community. By providing these community services to the Chinatown neighborhood and community residents, the project would preserve the Chinatown community.
2. The project is crucial for the continued operation and success of the Chinese Hospital and the Chinatown community that it supports. The project serves to bring the Chinese Hospital into compliance with current laws and regulations, such as the Americans with Disabilities Act and SB 1953 (the Alfred E. Alquist Hospital Seismic Safety Act of 1983). Without the project, the Chinese Hospital will become outdated and could cease being able to provide crucial medical care to the Chinatown community.
3. The project would create a 22-bed skilled nursing facility that would improve the transition of patients from the acute care setting and allow Chinatown residents to remain close to their homes and loved ones while they recover from inpatient procedures.

4. The project would allow the Chinese Hospital to provide innovative healthcare services in a state of the art facility, which would not be possible in the building in which the hospital currently operates.
5. The Project Sponsor would create a variety of features that would pay tribute to the historical relevance of the Medical Administration Building, such as photos, plaques, and explanations of the history of the project site.
6. The project would provide numerous jobs for Chinatown residents and business both during and after construction.
7. The project would be well suited for modern healthcare practices and procedures that require more spacious facilities for new medical equipment leading to improved healthcare quality and safety for patients, and a safe and accessible work environment for hospital staff.
8. The project would allow the Chinese Hospital to replace its two, three, and four-bed patient rooms with single patient rooms that utilize modern medical equipment.
9. The project would provide an approximately 890-sf landscaped and hardscaped open space on Jackson Street that would serve as an exterior community-gathering place for respite and relaxation along the uphill walk on Jackson Street.

DECISION

That based upon the Record, the submissions by the Applicant, the staff of the Department and other interested parties, the oral testimony presented to this Commission at the public hearings, and all other written materials submitted by all parties, the Commission hereby ADOPT the foregoing CEQA Findings and the Mitigation Monitoring and Reporting Program attached hereto as Exhibit A.

I hereby certify that the Planning Commission ADOPTED the foregoing Motion on July 12, 2012.

Linda D. Avery
Commission Secretary

AYES:

NAYS:

ABSENT:

ADOPTED: July 12, 2012

EXHIBIT A				
MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT				
(Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
MITIGATION MEASURES FOR THE CHINESE HOSPITAL REPLACEMENT PROJECT				
<i>Cultural Resources (Historic Architectural Resources) Mitigation Measures</i>				
Mitigation Measure M-CR-1a: Documentation				
<p>The project sponsor shall retain a professional who meets the Secretary of the Interior’s Professional Qualifications Standards for Architectural History to prepare written and photographic documentation of the 1924 MAB.</p> <p>The documentation for the property shall be prepared based on the National Park Service’s Historic American Building Survey (HABS) / Historic American Engineering Record (HAER) Historical Report Guidelines. This type of documentation is based on a combination of both HABS/HAER standards (Levels I, II and III) and the National Park Service’s policy for photographic documentation as outlined in the National Register of Historic Places (NR) and National Historic Landmarks (NHL) Survey Photo Policy Expansion. The measured drawings for this documentation shall follow HABS/HAER Level I standards. To determine the number of the measured drawings, the professional shall consult with the San Francisco Planning Department’s Preservation Coordinator.</p> <p>The written historical data for this documentation shall follow HABS / HAER Level II standards. The written data shall be accompanied by a sketch plan of the property. Efforts should also be made to locate original construction drawings or plans of the property during the period of significance. If located, these drawings should be photographed, reproduced, and included in the dataset. If construction drawings or plans cannot be located, as-built drawings shall be produced. Either HABS/HAER standard large format or digital photography shall be used. If digital photography is used, the ink and paper combinations for printing photographs must be in compliance with NR-NHL Photo Policy Expansion and have a permanency rating of approximately 115 years. Digital photographs will be taken as uncompressed, TIF file format. The size of each image will be 1600x1200 pixels at 330 ppi (pixels per inch) or larger, color format, and printed in black and white. The file name for each electronic image shall correspond with the index of photographs and photograph label.</p> <p>Photograph views for the dataset shall include (a) contextual views; (b) views of each side of each building and interior views, where possible; (c) oblique views of buildings; and (d) detail views of character-defining features, including features on the interiors of some buildings. All views shall be referenced on a photographic key. This photographic key shall be on a map of the property and shall show the photograph number with an arrow to indicate the direction of the view. Historic photographs shall</p>	<p>Project sponsor to retain qualified professional consultant.</p> <p>Consultant to prepare documentation.</p> <p>Planning Department shall review, request revisions if appropriate, and ultimately approve documentation.</p>	<p>Prior to any action to demolish or remove the 1924 MAB consultant to submit documentation package per HABS / HAER / HALS Guidelines documentation for review by Planning Department.</p> <p>Prior to construction, transmit documentation to the History Center in SF Library, and NWIC.</p>	<p>Consultant to submit draft and final documentation prepared pursuant to HABS/HAER/HALS Guidelines to Planning Department for review and approval.</p> <p>Following approval of documentation, consultant to transmit documentation to the SF History Center in SF Library, Planning Department, and NWIC.</p>	

EXHIBIT A MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT (Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>also be collected, reproduced, and included in the dataset.</p> <p>The project sponsor shall transmit such documentation, in both printed and electronic form, to the Chinese Historical Society of America, to the History Room of the San Francisco Public Library, and to the Northwest Information Center of the California Historical Resource Information System.</p> <p>All documentation will be reviewed and approved by the San Francisco Planning Department's Preservation Coordinator prior to granting any demolition permit.</p> <p>Mitigation Measure M-CR-1b: Interpretation</p> <p>The project sponsor shall provide a permanent display of interpretive materials concerning the history and architectural features of the original 1924 MAB and its historic and architectural relationship to the larger Chinatown community. Interpretation of the site's history shall be supervised by an architectural historian or historian who meets the Secretary of the Interior's Professional Qualification Standards, and shall be conducted in coordination with an exhibit designer. The interpretative materials (which may include, but are not limited to, a display of photographs, news articles, memorabilia, video) shall be placed in a prominent public setting within the Replacement Hospital building or MAOC. The project sponsor shall also transmit such interpretive materials, in both printed and electronic form (to the extent these materials are reproducible), to the Chinese Historical Society of America.</p> <p>A proposal describing the general parameters of the interpretive program shall be approved by the San Francisco Planning Department's Preservation Coordinator prior to issuance of a Site Permit. The substance, media and other characteristics of such interpretive display shall be approved by the San Francisco Planning Department's Preservation Coordinator prior to issuance of a Temporary Certificate of Occupancy.</p>	<p>Project Sponsor to establish location(s), media, and characteristics of the display.</p> <p>Project sponsor and their architectural historian to prepare the display.</p>	<p>Prior to any demolition or removal activities, approval of interpretative materials to occur.</p>	<p>Consultant to submit materials to Planning Department for approval.</p>	
Cultural Resources (Archeological Resources) Mitigation Measures				
Mitigation Measure M-CP-2: Subsurface Archaeological Resources				
<p>Based on a reasonable presumption that archaeological resources may be present within</p>	<p>Project sponsor to</p>	<p>Prior to commencement</p>	<p>(See below regarding</p>	

EXHIBIT A MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT (Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>the project site, the following measures shall be undertaken to avoid any potentially significant adverse effect from the proposed project on buried or submerged archaeological resources. The project sponsor shall retain the services of an archaeological consultant from the pool of qualified archaeological consultants maintained by the Planning Department archaeologist. The archaeological consultant shall undertake an archaeological testing program as specified below. In addition, the consultant shall be available to conduct an archaeological monitoring and/or data recovery program if required pursuant to this measure. The archaeological consultant's work shall be conducted in accordance with this measure and with the requirements of the project archaeological research design and treatment plan (Archeo-Tec, <i>Archaeological Research Design and Treatment Plan for the Chinese Hospital Replacement Project</i>, April 2011) at the direction of the Environmental Review Officer (ERO). In instances of inconsistency between the requirement of the project archaeological research design and treatment plan and of this archaeological mitigation measure, the requirement of this archaeological mitigation measure shall prevail. All plans and reports prepared by the consultant as specified herein shall be submitted first and directly to the ERO for review and comment, and shall be considered draft reports subject to revision until final approval by the ERO. Archaeological monitoring and/or data recovery programs required by this measure could suspend construction of the project for up to a maximum of four weeks. At the direction of the ERO, the suspension of construction can be extended beyond four weeks only if such a suspension is the only feasible means to reduce to a less-than-significant level potential effects on a significant archaeological resource as defined in <i>CEQA Guidelines</i> Sect. 15064.5(a)(c).</p> <p>Consultation with Descendant Communities: On discovery of an archeological site [fn: The term "archeological site" is intended here to minimally include any archeological deposit, feature, burial, or evidence of burial.] associated with descendant Native Americans or the Overseas Chinese an appropriate representative [fn: An "appropriate representative" of the descendant group is here defined to mean, in the case of Native Americans, any individual listed in the current Native American Contact List for the City and County of San Francisco maintained by the California Native American Heritage Commission and in the case of the Overseas Chinese, the Chinese Historical Society of America.] of the descendant group and the ERO shall be contacted. The representative of the descendant group shall be given the opportunity to monitor archeological field investigations of the site and to consult with the ERO regarding appropriate archeological treatment of the site, of recovered data from the site, and, if applicable, any interpretative treatment of the associated archeological site. A copy of the Final Archaeological Resources Report shall be provided to the representative of</p>	<p>retain qualified professional archaeologist from the pool of consultants maintained by the Planning Department.</p> <p>Project sponsor shall contact ERO and descendant group representative upon discovery of an archaeological site.</p>	<p>of soil-disturbing activities, submittal of reports for approval by Planning Department.</p> <p>For the duration of soil-disturbing activities, the representative of the descendant group shall be given the opportunity to monitor archaeological field investigations on the site and consult with the ERO regarding appropriate archaeological treatment of the site, of recovered data from the site, and, if applicable, any interpretative</p>	<p>archaeologist's reports).</p> <p>Consultant shall prepare a Final Archaeological Resources Report in consultation with the ERO. A copy of this report shall be provided to the representative of the descendant group</p>	

EXHIBIT A				
MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT				
(Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>the descendant group.</p> <p><i>Archaeological Testing Program.</i> The archaeological consultant shall prepare and submit to the ERO for review and approval an archaeological testing plan (ATP). The archaeological testing program shall be conducted in accordance with the approved ATP. The ATP shall identify the property types of the expected archaeological resource(s) that potentially could be adversely affected by the proposed project, the testing method to be used, and the locations recommended for testing. The purpose of the archaeological testing program will be to determine to the extent possible the presence or absence of archaeological resources and to identify and to evaluate whether any archaeological resource encountered on the site constitutes an historical resource under CEQA.</p> <p>At the completion of the archaeological testing program, the archaeological consultant shall submit a written report of the findings to the ERO. If, based on the archaeological testing program, the archaeological consultant finds that significant archaeological resources may be present, the ERO in consultation with the archaeological consultant shall determine if additional measures are warranted. Additional measures that may be undertaken include additional archaeological testing, archaeological monitoring, and/or an archaeological data recovery program. If the ERO determines that a significant archaeological resource is present and that the resource could be adversely affected by the proposed project, at the discretion of the project sponsor either:</p> <p style="margin-left: 40px;">A) The proposed project shall be re-designed so as to avoid any adverse effect on the significant archaeological resource; or</p> <p style="margin-left: 40px;">B) A data recovery program shall be implemented, unless the ERO determines that the archaeological resource is of greater interpretive than research significance and that interpretive use of the resource is feasible.</p> <p><i>Archaeological Monitoring Program (AMP).</i> If the ERO in consultation with the archaeological consultant determines that an archaeological monitoring program shall be implemented, the archaeological monitoring program shall minimally include the following provisions:</p> <ul style="list-style-type: none"> • The archaeological consultant, project sponsor, and ERO shall meet and consult on the scope of the AMP reasonably prior to any project-related soils- 	<p>Archaeological consultant to undertake archaeological testing program</p> <p>Archaeological consultant to submit results of testing, and in consultation with ERO, determine whether redesign of a data recovery program is warranted.</p> <p>Project sponsor and their archaeologist(s), in consultation with ERO.</p>	<p>treatment of the associated archaeological site.</p> <p>Archaeological Testing Plan to be submitted to and approved by ERO prior to testing, which is to be prior to any excavation, site preparation or construction</p> <p>At the completion of the archaeological testing program.</p> <p>Prior to any demolition or removal activities, and during construction at any location.</p>	<p>Consultant to prepare ATP in consultation with the ERO</p> <p>Consultant to submit report of findings from testing program to Planning Department.</p> <p>Consultant to prepare Archaeological Monitoring Program (AMP) in consultation with the ERO.</p>	

EXHIBIT A MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT (Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>Native American remains, notification of the California State Native American Heritage Commission (NAHC) who shall appoint a Most Likely Descendant (MLD) (Pub. Res. Code Sec. 5097.98). The archaeological consultant, project sponsor, and MLD shall make all reasonable efforts to develop an agreement for the treatment of, with appropriate dignity, human remains and associated or unassociated funerary objects (CEQA Guidelines. Sec. 15064.5(d)). The agreement should take into consideration the appropriate excavation, removal, recordation, analysis, custodianship, curation, and final disposition of the human remains and associated or unassociated funerary objects.</p> <p><i>Final Archaeological Resources Report.</i> The archaeological consultant shall submit a Draft Final Archaeological Resources Report (FARR) to the ERO that evaluates the historical significance of any discovered archaeological resource and describes the archaeological and historical research methods employed in the archaeological testing/monitoring/data recovery program(s) undertaken. Information that may put at risk any archaeological resource shall be provided in a separate removable insert within the final report.</p> <p>Once approved by the ERO, copies of the FARR shall be distributed as follows: California Archaeological Site Survey Northwest Information Center (NWIC) shall receive one (1) copy and the ERO shall receive a copy of the transmittal of the FARR to the NWIC. The Environmental Planning division of the Planning Department shall receive three copies of the FARR along with copies of any formal site recordation forms (CA DPR 523 series) and/or documentation for nomination to the National Register of Historic Places/California Register of Historical Resources. In instances of high public interest in or the high interpretive value of the resource, the ERO may require a different final report content, format, and distribution than that presented above.</p>	<p>Project sponsor and their archaeologist(s), in consultation with ERO.</p>	<p>Upon completion of cataloguing and analysis of recovered data and findings.</p> <p>Upon approval of Final Archaeological Resources Report by ERO.</p>	<p>Francisco, and in the event of the Coroner's determination that the human remains, notification of the California State Native American Heritage Commission who shall appoint a Most Likely Descendant (MLD) who shall make reasonable efforts to develop an agreement for the treatment of human remains and/or associated or unassociated funerary objects</p> <p>Consultant to prepare draft and final Archeological Resources Report reports.</p> <p>The ERO to review and approve the FARR.</p> <p>Consultant to transmit final, approved documentation to NWIC and San Francisco Planning Department.</p>	

EXHIBIT A MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT (Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>Mitigation Measure M-CP-3: Paleontological Resources Monitoring and Mitigation Program</p> <p>The project sponsor shall retain the services of a qualified paleontological consultant having expertise in California paleontology to design and implement a Paleontological Resources Monitoring and Mitigation Program (PRMMP). The PRMMP shall include a description of when and where construction monitoring would be required; emergency discovery procedures; sampling and data recovery procedures; procedure for the preparation, identification, analysis, and curation of fossil specimens and data recovered; preconstruction coordination procedures; and procedures for reporting the results of the monitoring program.</p> <p>The PRMMP shall be consistent with the Society for Vertebrate Paleontology (SVP) Standard Guidelines for the mitigation of construction-related adverse impacts to paleontological resources and the requirements of the designated repository for any fossils collected. During construction, earth-moving activities shall be monitored by a qualified paleontological consultant having expertise in California paleontology in the areas where these activities have the potential to disturb previously undisturbed native sediment or sedimentary rocks. Monitoring need not be conducted in areas where the ground has been previously disturbed, in areas of artificial fill, in areas underlain by nonsedimentary rocks, or in areas where exposed sediment would be buried, but otherwise undisturbed.</p> <p>The consultant's work shall be conducted in accordance with this measure and at the direction of the City's ERO. Plans and reports prepared by the consultant shall be submitted first and directly to the ERO for review and comment, and shall be considered draft reports subject to revision until final approval by the ERO. Paleontological monitoring and/or data recovery programs required by this measure could suspend construction of the Proposed Project for up to a maximum of four weeks. At the direction of the ERO, the suspension of construction can be extended beyond four weeks only if such a suspension is the only feasible means to reduce potential effects on a significant paleontological resource as previously defined to a less-than-significant level.</p>	<p>Project sponsor to retain appropriately qualified consultant to prepare PRMMP and carry out monitoring and reporting.</p>	<p>Prior to and during construction.</p> <p>The project paleontological consultant to consult with the ERO as indicated; completed when ERO accepts final report.</p>	<p>ERO to approve final PRMMP.</p> <p>Consultant shall provide brief monthly reports to ERO during monitoring or as identified in the PRMMP, and notify the ERO immediately if work should stop for data recovery during monitoring.</p> <p>The ERO to review and approve the final documentation as established in the PRMMP.</p>	

<i>Transportation Mitigation Measures</i>				
Mitigation Measure C-M-TR-2				

EXHIBIT A				
MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT				
(Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>The project sponsor and/or contractor shall develop and implement a Construction Transportation Management Plan (“TMP”) in order to anticipate and minimize potential impacts of various construction activities associated with the proposed project. The Construction TMP shall disseminate appropriate information to contractors and affected agencies with respect to coordinating construction activities to minimize overall disruptions and ensure that overall circulation in the project area is maintained to the extent possible, with particular focus on ensuring pedestrian, transit, and bicycle connectivity.</p> <p>The Construction TMP shall supplement and expand, rather than modify or supersede, any manual, regulations, or provisions set forth by SFMTA, Department of Public Works, or other City departments and agencies.</p> <p>Specifically, the Construction TMP should:</p> <ul style="list-style-type: none"> • Identify construction traffic management and a cohesive program of operational and demand management strategies designed to maintain acceptable levels of travel flow during periods of construction activities. These include, but are not limited to, construction strategies, demand management activities, alternative route strategies, and public information strategies consistent with best practices in San Francisco, as well as other cities or agencies that, although not being implemented in the City, could provide valuable management practices for the project. Management practices include, but are not limited to: <ul style="list-style-type: none"> - Identifying ways to reduce construction worker vehicle trips through transportation demand management programs and methods to manage construction work parking demands; - Consider alternative routes and vehicle types for construction vehicles, and work further with DPW to identify the best traffic detours during each construction phase; - Identifying best practices for accommodating pedestrians, such as temporary pedestrian wayfinding signage or temporary walkways; - Identifying ways to consolidate truck delivery trips, including a plan to consolidate deliveries from a centralized construction material and equipment storage facility; and - Identifying best practices for managing traffic flows on surrounding streets. • Develop a public information plan to provide adjacent residents and businesses with regularly-updated information regarding project construction, 	<p>Project sponsor and their construction contractor(s) to prepare CTMP.</p> <p>Planning Department to coordinate with other City agencies and approve CTMP.</p> <p>Construction contractors to disseminate appropriate information from the CTMP to employees and subcontractors.</p> <p>Project sponsor and their construction contractor to implement approved CTMP, including each of the bulleted items.</p>	<p>Prior to commencement to demolition or any other of soil-disturbing activities, submittal prepare CTMP and submit for approval.</p>	<p>Construction contractors to report to project sponsor, SFMTA, SFDPW, TASC, and the Planning Department for review and approval.</p>	

EXHIBIT A MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT (Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>including construction activities, durations, peak construction vehicle activities (e.g., concrete pours), travel lane closures, and other lane closures.</p> <ul style="list-style-type: none"> Hire a transportation manager, preferably a Chinese-speaking bilingual person, to actively manage the construction vehicle, truck loading, passenger loading and emergency vehicle access to the project site through at least the most intense phases of construction. <p>The Construction TMP shall be submitted to SFMTA, SFDPW, TASC, and the Planning Department for review and approval.</p>				
Noise Mitigation Measures				
<p>Mitigation Measure M-NO-1a</p> <p>To ensure that operational noise generated by the proposed stationary noise sources, specifically the emergency generator does not exceed the City’ noise standards resulting in a substantial increase in ambient noise levels, the project sponsor shall undertake the following:</p> <ul style="list-style-type: none"> The project sponsor, Chinese Hospital, shall retain the services of a qualified acoustical consultant to measure the noise levels of operating exterior mechanical equipment, such as emergency generators among other mechanical equipment, after installation of such equipment on the project site. If such exterior mechanical equipment is below the mechanical noise threshold established by the Noise Ordinance (to be no more than 8 dBA in excess of the ambient noise levels at the property line), no further action is required. If such mechanical exterior equipment is not below the mechanical noise threshold established by the Noise Ordinance (to be no more than 8 dBA in excess of the ambient noise levels at the property line), the project sponsor, Chinese Hospital, shall replace and/or redesign the exterior mechanical equipment to meet the City’s established noise standards. Results of the mechanical noise measurements shall be provided to Hospital Facilities Management/Engineering and the appropriate City agencies (Planning Department, Department of Building Inspection and Department of Public Health) to show compliance with Noise Ordinance mechanical noise standards. 	<p>Project sponsor to retain qualified expert to monitor stationary noises source, and retain qualified acoustical engineer if noise standards are exceeded.</p>	<p>Monitoring to be carried out within three months of installation of stationary noise sources, at each structure with stationary noise sources.</p>	<p>Reports of monitoring results to be submitted to Planning Department.</p>	

EXHIBIT A				
MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT				
(Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>Mitigation Measure M-NO-1b</p> <p>To ensure that the proposed Replacement Hospital building would be designed with appropriate noise-insulating features to achieve interior traffic noise levels below 45 dB (Ldn), the project sponsor shall undertake the following:</p> <ul style="list-style-type: none"> The project sponsor, Chinese Hospital, shall obtain the services of a qualified acoustical consultant to perform a detailed interior-noise analysis and develop noise-insulating features for the habitable interior spaces of the proposed Replacement Hospital building that would reduce the interior traffic-noise level inside the hospital to 45 dB (Ldn). Interior spaces of the Replacement Hospital building shall be designed to include insulating features (e.g., laminated glass, acoustical insulation, and/or acoustical sealant) that would reduce interior noise levels to 45 dB (Ldn) or lower. 	<p>Project sponsor to retain qualified acoustical consultants to prepare plans for acoustical insulation, and following construction and occupancy to monitor for adequacy of measures.</p>	<p>Prior to completion of design and issuance of the building permit allowing commencement of construction.</p> <p>Monitoring to be carried out at least one time within one year following completion and occupancy.</p>	<p>Consultant(s) to submit reports to Department of Building Inspection.</p> <p>Building designers to follow the recommendations of the acoustical consultant. DBI to review plans to ensure recommendations are included in plans.</p> <p>Monitoring report to be filed with DBI by acoustical consultant.</p>	
<p>Mitigation Measure M NO-2: General Construction Noise Control Measures</p> <p>To ensure that project noise from construction activities is minimized to the maximum extent feasible, the project sponsor shall undertake the following:</p> <ul style="list-style-type: none"> The project sponsor shall require the general contractor to ensure that equipment and trucks used for project construction utilize the best available noise control techniques (e.g., improved mufflers, equipment redesign, use of intake silencers, ducts, engine enclosures and acoustically-attenuating shields or shrouds, wherever feasible). The project sponsor shall require the general contractor to locate stationary noise sources (such as compressors) as far from adjacent or nearby sensitive receptors as possible, to muffle such noise sources, and to construct barriers around such sources and/or the construction site, which could reduce construction noise by as much as 5 dBA. To further reduce noise, the contractor shall locate stationary equipment in pit areas or excavated areas, if feasible. The project sponsor shall require the general contractor to use impact tools (e.g., jack hammers, pavement breakers, and rock drills) that are hydraulically or electrically powered wherever possible to avoid noise associated with compressed air exhaust from pneumatically powered tools. Where use of pneumatic tools is unavoidable, an exhaust muffler on the compressed air exhaust shall be used, along with external noise jackets on the 	<p>Project sponsor and their construction contractor(s).</p> <p>Project sponsor to designate Noise Disturbance Coordinator; all Construction contractors shall work with Coordinator and post construction schedule.</p>	<p>Construction contractors to report on noise measures implemented on a monthly basis.</p> <p>Noise Disturbance Coordinator to be available throughout construction.</p>	<p>Construction contractors to report on implementation on a monthly basis to DPW if construction is permitted under a street permit, or DBI if construction is under a site or building permit.</p>	

EXHIBIT A MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT (Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>tools, which could reduce noise levels by as much as 10 dBA.</p> <ul style="list-style-type: none"> The project sponsor shall include noise control requirements in specifications provided to construction contractors. Such requirements could include, but not be limited to, performing all work in a manner that minimizes noise to the extent feasible; use of equipment with effective mufflers; undertaking the most noisy activities during times of least disturbance to surrounding residents and occupants, as feasible; and selecting haul routes that avoid residential buildings inasmuch as such routes are otherwise feasible. Prior to the issuance of building permits, along with the submission of construction documents, the project sponsor shall submit to the Planning Department and Department of Building Inspection (DBI) a list of measures to respond to and track complaints pertaining to construction noise. These measures shall include (1) a procedure and phone numbers for notifying DBI, the Department of Public Health, and the Police Department (during regular construction hours and off-hours); (2) a sign posted on-site describing noise complaint procedures and a complaint hotline number that shall be answered at all times during construction; (3) designation of an on-site construction complaint and enforcement manager for the project; and (4) notification of neighboring residents and non-residential building managers within 300 feet of the project construction area at least 30 days in advance of extreme noise generating activities (defined as activities generating noise levels of 90 dBA or greater) about the estimated duration of the activity. 				

<i>Air Quality Mitigation Measures</i>				
Mitigation M-AQ-3: Construction Emissions Minimization Plan				
<p>To reduce the potential health risk resulting from project construction activities, the project sponsor shall prepare a Construction Emissions Minimization Plan designed to reduce construction-related diesel particulate matter emissions from off-road construction equipment used at the site by at least 79 percent, or by as much as feasible if the 79 percent reduction cannot be met, compared to the construction equipment list, schedule, and inventory provided by the project sponsor.</p>	<p>Project sponsor and project construction contractor(s) shall prepare and implement Construction</p>	<p>At least 14 days prior to the commencement of construction activities, submit the Construction Emissions Minimization Plan to the ERO for</p>	<p>Construction Emissions Minimization Plan submitted to ERO.</p>	

EXHIBIT A MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT (Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>The project sponsor shall include all requirements identified in the Construction Emissions Minimization Plan in contract specifications for the entire duration of construction activities.</p> <p>The Construction Emissions Minimization Plan may include the following requirements:</p> <ul style="list-style-type: none"> • limiting idling times by either shutting equipment off when not in use or reducing the maximum idling time to two minutes; • prohibiting use of diesel generators for electric power because on-site distribution of electricity is available; • requiring construction contractors to use electric powered devices for the following types of equipment: <ul style="list-style-type: none"> - Tower Crane - Grout Pumps; • requiring construction contractors to use compressors that are either electric powered or engines compliant with Tier 4 standards; • requiring the use of Interim Tier 4 or Tier 4 equipment where such equipment is available and feasible for use; and • requiring use of Tier 2/Tier 3 equipment retrofitted with CARB Level 3 Verified Diesel Emissions Control System (VDECS, which includes diesel particulate filters). The following types of equipment are identified as candidates for retrofitting with CARB-certified Level 3 VDECS, (which are capable of reducing DPM emissions by 85 percent or more), due to their expected operating modes (i.e., fairly constant use at high revolutions per minute): <ul style="list-style-type: none"> - Excavators - Concrete Boom Pumps <p>If a 79 percent reduction cannot be met, the Construction Emissions Minimization Plan shall demonstrate that all feasible mitigation has been incorporated and shall substantiate why additional mitigation measures are not feasible.</p> <p>The project sponsor shall submit the Construction Emissions Minimization Plan to the Environmental Review Officer (ERO) for review and approval by an Environmental Planning Air Quality Specialist prior to the commencement of construction activities.</p>	Emissions Minimization Plan.	<p>review and approval by an Environmental Planning Air Quality Specialist</p> <p>For the duration of construction activities, project sponsor, at least 14 days prior to implementation, submit a demonstration that alternative measures achieve the specified emissions reduction, if the project sponsor elects to substitute alternative emissions minimization measures during construction.</p>		
IMPROVEMENT MEASURES FOR THE CHINESE HOSPITAL REPLACEMENT PROJECT				
Improvement Measure I-TR-1a				

EXHIBIT A				
MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT				
(Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>Chinese Hospital has agreed to designate a person to coordinate the TDM program, including the following elements:</p> <ul style="list-style-type: none"> • Monitor and update the TDM program using the results of the Employee and Patient and Visitor Travel Behavior Surveys; • Create and update a dedicated web page and newsletter providing relevant transit information and related links; • Coordinate with 511.org to establish rideshare matching program; • Organize a Transportation Day Fair; • Coordinate parking management; • Develop an information package of transportation services and benefits offered by Chinese Hospital, and participate in employee orientation training; and • Sell transit passes on site (Muni, BART, Caltrain, SamTrans, AC Transit, and GG Transit). <p>Chinese Hospital has agreed to promote the TDM Program, including the following elements:</p> <ul style="list-style-type: none"> • Organize and conduct an annual Transportation Day Fair to include representatives from local and regional transportation agencies, the San Francisco Bicycle Coalition, 511.org, and car-share companies, and provide information about transit, ridesharing, and bicycling; • The TDM Coordinator would promote attendance at these events by providing incentives for employees to attend the Fair, such as free transit passes and free bicycles as prizes, and food and drink; • Create a dedicated web page and newsletter; and • Set up an information center with computer terminals for accessing transit and ride sharing information via a dedicated web page. <p>Chinese Hospital has agreed to promote transit use, including the following elements:</p> <ul style="list-style-type: none"> • Provide public transit information to Chinese Hospital employees, patients, and visitors on a dedicated web page; • Sell transit passes on site (Muni, BART, Caltrain, SamTrans, AC Transit, and Golden Gate Transit); and • Promote commuter checks, which allow employees to deduct up to \$120 per person per month on a pre-tax basis for transit passes. <p>Chinese Hospital has agreed to promote ride share/car share/carpool/vanpool, including</p>	<p>Project sponsor to designate a TDM Coordinator.</p>	<p>Prior to completion and occupancy.</p>	<p>Project sponsor shall provide the draft TDM to Planning Department and SFMTA for approval.</p>	

EXHIBIT A				
MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT				
(Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
<p>the following elements:</p> <ul style="list-style-type: none"> • Establish a rideshare matching program through the 511.org database; • Join a car-share company as a corporate member, allowing employees to use car-share services without an initiation fee; and • Provide a bonus for carpools and vanpools that last 3 months or more. 				
<p>Improvement Measure I-TR-1b</p> <p>Under the Off-Street Parking Variant, the project sponsor has agreed to coordinate with SFMTA Operations to monitor the number of conflicts observed between turning vehicles and transit operations during peak periods. If warranted to further reduce this less-than-significant impact, and upon the determination of SFMTA, the project sponsor has agreed to limit access in and out of the Powell Street Parking Garage to right-turn-only movements.</p>	Project sponsor and project construction contractor(s) to consult with SFMTA.	Prior to building permit issuance.	Planning Department, SFMTA, and Muni to approve method to minimize transit conflicts.	
<p>Improvement Measure I-TR-3a</p> <p>The project sponsor has agreed to improvements for Stone Street, such as raised crosswalk at the intersection of Jackson Street and Stone Street, and pedestrian-scale street lights or lighting along Stone Street.</p>	Project sponsor and project construction contractor(s) to consult with SFMTA and the DPW.	Prior to building permit issuance.	Planning Department, SFMTA, and DPW to approve method to minimize pedestrian conflicts.	
<p>Improvement Measure I-TR-3b</p> <p>Under the Off-Street Parking Variant, the project sponsor has agreed to install an audible and visible electronic warning sign at the access point of the Powell Street Parking Garage driveway to alert pedestrians to exiting vehicles.</p>	Project sponsor and project construction contractor(s) to install pedestrian alert device.	Prior to building occupancy.	Planning Department and Department of Building Inspection.	
<p>Improvement Measure I-TR-5.1a</p> <p>The project sponsor has agreed to schedule truck loading activities for off-peak hours to minimize the potential for conflicts between truck loading activities, passenger loading activities, and peak hour traffic on Jackson Street. Additionally, delivery trucks less than 20 feet long could be assigned to the existing off-street loading area on Stone Street.</p>	Project sponsor to limit trucking hours.	Prior to building occupancy.	Planning Department and SFMTA.	
<p>Improvement Measure I-TR-5.1b</p> <p>The project sponsor has agreed to work with the SFMTA to determine whether a section of the proposed 153-foot-long white zone in front of the main project site could</p>	Project sponsor and project construction	Prior to building permit issuance.	Planning Department, SFMTA, and DPW.	

EXHIBIT A				
MITIGATION MONITORING AND REPORTING PROGRAM FOR CHINESE HOSPITAL REPLACEMENT PROJECT				
(Includes Text for Adopted Mitigation and Improvement Measures)				
MEASURES ADOPTED AS CONDITIONS OF APPROVAL	Responsibility for Implementation	Schedule	Monitoring/Reporting Responsibility	Status/Date Completed
be converted to a yellow loading space if the loading demand became a concern in the future.	contractor(s) to consult with SFMTA.			
Improvement Measure I-TR-5.1c The project sponsor has agreed to work with the SFMTA to post signs along Jackson Street to inform motorists that the white zone is for passenger loading of no more than 5 minutes and to train its security guards to enforce proper use of the white zone and direct motorists to nearby parking garages, if necessary.	Project sponsor and project construction contractor(s) to consult with SFMTA.	Prior to building permit issuance.	Planning Department, SFMTA, and DPW.	
Improvement Measure I-TR-Parking 1 Under the Off-Street Parking Variant, the project sponsor has agreed to develop a parking management program that reserves a maximum of 50 parking spaces for physicians and employees to ensure that a sufficient number of parking spaces are available for patient and visitor parking.	Project sponsor	Prior to building occupancy.	Project sponsor shall provide the draft parking management program to Planning Department and SFMTA for approval.	
Improvement Measure I-TR-Parking 2 Under the Off-Street Parking Variant, the project sponsor has agreed that the operator of the Powell Street Parking Garage will monitor conditions to ensure that vehicle queues do not occur on a regular basis in the public right-of-way, including adjacent sidewalks. The project sponsor has agreed to install an electronic FULL sign at its entrance above the sidewalk that is clearly visible to drivers. The project sponsor has agreed to close the Powell Street Parking Garage for a period of time when it is full until a sufficient number of vacant spaces become available. Additionally, other measures to address any queuing that is found to occur could be an increase in the travel demand management strategies; and/or parking demand management strategies such as parking time limits, parking pricing or validated parking.	Project sponsor and project construction contractor(s) to install garage signage.	Prior to building occupancy.	Planning Department and Department of Building Inspection.	



SAN FRANCISCO PLANNING DEPARTMENT

Planning Commission Draft Resolution

General Plan Amendments

HEARING DATE: JULY 12, 2012

Date: July 5, 2012
Case No.: 2008.0762EMZC
Project Address: 835-845 JACKSON STREET
Zoning: Chinatown Residential Neighborhood Commercial District
65-N Height and Bulk District
Block/Lot: 0192/041
Project Sponsor: Linda Schumacher
Chinese Hospital Association
835-845 Jackson Street
San Francisco, CA 94133
Staff Contact: Rick Crawford – (415) 558-6358
rick.crawford@sfgov.org

1650 Mission St.
Suite 400
San Francisco,
CA 94103-2479

Reception:
415.558.6378

Fax:
415.558.6409

Planning
Information:
415.558.6377

RESOLUTION OF THE PLANNING COMMISSION RECOMMENDING THAT THE BOARD OF SUPERVISORS AMEND "POLICY 1.2 AND MAP 1 OF THE CHINATOWN AREA PLAN OF THE GENERAL PLAN TO FACILITATE DEVELOPMENT OF THE CHINESE HOSPITAL REPLACEMENT AT 835-845 JACKSON STREET, BLOCK 0192, LOT 041, ADOPTING FINDINGS OF CONSISTENCY WITH THE GENERAL PLAN AND THE EIGHT PRIORITY POLICIES OF SECTION 101.1(B) OF THE PLANNING CODE.

RECITALS

1. **WHEREAS**, Section 4.105 of the Charter of the City and County of San Francisco mandates that the Planning Commission shall periodically recommend to the Board of Supervisors for approval or rejection proposed amendments to the General Plan.
2. **WHEREAS**, the Chinese Hospital campus (835-845 Jackson Street) currently consists of the Chinese Hospital at 845 Jackson Street, built in 1979; the Medical Administration Building at 835 Jackson Street (the original Chinese Hospital, built in 1924); and the Chinese Hospital Parking Garage, located directly behind the 1924 Medical Administration Building. The Chinese Hospital Association, (the "Project Sponsor") proposes to demolish the Medical Administration Building and the parking garage, construct a new, modern hospital building in their place, and remodel and refurbish the existing hospital building (the "project"). The proposed new hospital would be an acute care hospital with 54 acute care beds (the same number of licensed acute-care beds as in the existing Chinese Hospital) and a new skilled nursing facility with 22 beds.
3. **WHEREAS**, the Project Sponsor applied for environmental review on June 24, 2008. The San Francisco Planning Department (the "Department") determined that an Environmental Impact Report

was required and provided public notice of the preparation of such report on May 18, 2011. The Department published a Draft Environmental Impact Report (DEIR) on April 16, 2012. The Commission held a public hearing to solicit testimony on the DEIR on May 17, 2012. The Department received written comments on the DEIR from April 17 to May 31, 2012. The Department published the Comments and Responses on June 28, 2012. The DEIR, together with the Comments and Responses constitute the Final Environmental Impact Report (FEIR). The Commission certified the FEIR on July 12, 2012 in Motion No. _____.

4. **WHEREAS**, in order for the project to proceed, "Policy 1.2 of the Chinatown Area Plan of the General Plan, which states "Promote a building form that harmonizes with the scale of existing buildings and width of Chinatown's streets" would need to be amended to exclude the area within the Chinese Hospital Special Use District to facilitate development of the project.
5. **WHEREAS**, in order for the project to proceed, the amendment of "Map 1 - Generalized Height Plan" of the Chinatown Area Plan to reference a height limit of 110 feet for the property at 835-845 Jackson Street, Block 0192, Lot 041 would be required.
6. **WHEREAS**, the General Plan consists of goals, policies and programs for the future physical development of the City and County of San Francisco that take into consideration social, economic and environmental factors.
7. **WHEREAS**, the General Plan shall be periodically amended in response to changing physical, social, economic, environmental or legislative conditions.
8. **WHEREAS**, Section 340 of the Planning Code of the City and County of San Francisco provides that an amendment to the General Plan may be initiated by the Planning Commission upon an application by one or more property owners, residents or commercial lessees, or their authorized agents.
9. **WHEREAS**, on May 8, 2012, at a meeting of the Board of Supervisors (the "Board"), Supervisor Chiu introduced amendments to the San Francisco Planning Code to (1) add Section 249.69 to create the Chinese Hospital Special Use District and (2) amend the San Francisco Zoning Map Sectional Maps ZN01, HT01, and SU01 to show the Chinese Hospital Special Use District and reflect a change in Height and Bulk classification from 65-N to 110-G.
10. **WHEREAS**, on May 8, 2012, Supervisor Chiu introduced a resolution before the Board urging the Commission to initiate and consider amendments to the General Plan concerning the Chinese Hospital Special Use District and replacement project. Accompanying that introduction was a Proposed Ordinance making the necessary amendments to the General Plan to implement the project. The Office of the City Attorney has approved the Proposed Ordinance as to form and it is attached hereto as Exhibit A.
11. **WHEREAS**, On May 30, 2012, the Project Sponsor submitted a request to amend "Policy 1.2 Promote a building form that harmonizes with the scale of existing buildings and width of Chinatown's streets" within the Chinatown Area Plan to add the language, "other than construction within the

Chinese Hospital Special Use District” to the second paragraph of the Policy, and to amend “Map 1 - Generalized Height Plan” of the Chinatown Area Plan to reference a height limit of 110 feet for the property at 835-845 Jackson Street, Block 0192, Lot 041.

12. **WHEREAS**, the Proposed Ordinance would amend the San Francisco General Plan by (1) amending “Policy 1.2 Promote a building form that harmonizes with the scale of existing buildings and width of Chinatown’s streets” within the Chinatown Area Plan to add the language, “other than construction within the Chinese Hospital Special Use District” to the second paragraph of the Policy and (2) amending of “Map 1 - Generalized Height Plan” of the Chinatown Area Plan to reference a height limit of 110 feet for the property at 835-845 Jackson Street, Block 0192, Lot 041 (collectively, the “General Plan Amendments”).
13. **WHEREAS**, on May 15, 2012, the Board approved the resolution urging the Commission to initiate and consider the General Plan Amendments.
14. **WHEREAS**, on June 7, 2012, the Commission adopted a resolution of intention to initiate the General Plan Amendments, by Motion No. 18642.
15. **WHEREAS**, on July 12, 2012, the Commission conducted a duly noticed public hearing at a regularly scheduled meeting to consider the General Plan Amendments.
16. **WHEREAS**, Section 4.105 of the City Charter and Section 340 of the Planning Code, require that the Commission consider any proposed amendments to the City’s General Plan and make a recommendation for approval or rejection to the Board of Supervisors before the Board of Supervisors acts on the proposed amendments.
17. **WHEREAS**, the General Plan Amendments are necessary for development of the project, which would promote the public necessity, convenience, and general welfare in that it would create a state-of-the-art hospital that is crucial for the continued operation and success of the Chinese Hospital and the Chinatown community that it supports. The project also serves to bring the Chinese Hospital into compliance with current laws and regulations, such as the Americans with Disabilities Act and SB 1953 (the Alfred E. Alquist Hospital Seismic Safety Act of 1983). Upon completion, the project would be well suited for modern healthcare practices and procedures that require more spacious facilities for new medical equipment leading to improved healthcare quality and safety for patients, and a safe and accessible work environment for hospital staff. The project would allow the Chinese Hospital to replace its two, three, and four-bed patient rooms with single patient rooms that utilize modern medical equipment. It would also create a new 22-bed skilled nursing facility that would improve the transition of patients from the acute care setting. By providing these essential healthcare services to the Chinatown area and the community residents, the project would promote the preservation of the Chinatown community, and thereby conserve and protect the existing cultural and economic diversity of the Chinatown neighborhood.
18. **WHEREAS**, the General Plan Amendments are consistent with and will promote the following relevant objectives and policies of the General Plan.

COMMUNITY SAFETY ELEMENT

Objectives and Policies

OBJECTIVE 1:

REDUCE STRUCTURAL AND NON-STRUCTURAL HAZARDS TO LIFE SAFETY AND MINIMIZE PROPERTY DAMAGE RESULTING FROM FUTURE DISASTERS.

Policy 1.3:

Assure that new construction meets current structural and life safety standards.

Policy 1.25:

Prepare for medical emergencies and pandemics.

The General Plan Amendments are necessary for the project, which would create a new, seismically secure hospital that would be in compliance with current laws and regulations, such as SB 1953 (the Alfred E. Alquist Hospital Seismic Safety Act of 1983) and Office of Statewide Health Planning and Development (OSHPD) requirements. The project would increase the availability of healthcare services and of medical professionals in Chinatown, which would better prepare the Chinatown neighborhood for emergencies and pandemics.

OBJECTIVE 2:

BE PREPARED FOR THE ONSET OF DISASTER BY PROVIDING PUBLIC EDUCATION AND TRAINING ABOUT EARTHQUAKES AND OTHER NATURAL AND MAN-MADE DISASTERS, BY READYING CITY INFRASTRUCTURE, AND BY ENSURING THE NECESSARY COORDINATION IS IN PLACE FOR A READY RESPONSE.

Policy 2.5:

Maintain a comprehensive, current Emergency Response Plan, in compliance with applicable state and federal regulations, to guide the response to disasters.

Policy 2.17:

Ensure the City's plan for medical response is coordinated with its privately owned hospitals.

The project would bring the Chinese Hospital into compliance with applicable seismic requirements and help ensure that the Chinese Hospital continues to operate at full capacity in the event of an emergency. The Chinese Hospital helps provide medical care and is part of the City's medical response in the event of a disaster.

URBAN DESIGN ELEMENT

Objectives and Policies

OBJECTIVE 1:

EMPHASIS OF THE CHARACTERISTIC PATTERN WHICH GIVES TO THE CITY AND ITS NEIGHBORHOODS AN IMAGE, A SENSE OF PURPOSE, AND A MEANS OF ORIENTATION.

Policy 1.3:

Recognize that buildings, when seen together, produce a total effect that characterizes the city and its districts.

Policy 1.5:

Emphasize the special nature of each district through distinctive landscaping and other features.

The project would include landscaping and street furniture that relate to the cultural character of the neighborhood. The theme of the plaza on Jefferson Street, and a mural proposed along Stone Street will include features complimenting the cultural heritage of Chinatown. The Chinese Hospital Association would also create a variety of features in the new building that would pay tribute to the historical relevance of the Medical Administration Building, such as photos, plaques, and explanations of the history of the Project Site.

OBJECTIVE 2:

CONSERVATION OF RESOURCES WHICH PROVIDE A SENSE OF NATURE, CONTINUITY WITH THE PAST, AND FREEDOM FROM OVERCROWDING.

Policy 2.6:

Respect the character of older development nearby in the design of new buildings.

Policy 2.8:

Maintain a strong presumption against the giving up of street areas for private ownership or use, or for construction of public buildings.

The project would be consistent with and respect the character of the architectural and historical context of the Chinatown neighborhood and surrounding buildings. Due to the unique massing and volume requirements for medical facilities, almost all hospital buildings require special considerations for bulk, and the proposed height and bulk are consistent with precedent from other hospital approvals. No street areas would be given up for private ownership.

OBJECTIVE 3:

MODERATION OF MAJOR NEW DEVELOPMENT TO COMPLEMENT THE CITY PATTERN, THE RESOURCES TO BE CONSERVED, AND THE NEIGHBORHOOD ENVIRONMENT.

Policy 3.1:

Promote harmony in the visual relationships and transitions between new and older buildings.

Policy 3.2:

Avoid extreme contrasts in color, shape and other characteristics which will cause new buildings to stand out in excess of their public importance.

Policy 3.4:

Promote building forms that will respect and improve the integrity of open spaces and other public areas.

Policy 3.5:

Relate the height of buildings to important attributes of the city pattern and to the height and character of existing development.

Policy 3.9:

Encourage a continuing awareness of the long-term effects of growth upon the physical form of the city.

The design of the project would respect the architectural context of the surrounding buildings. Similar to other buildings in the Chinatown neighborhood, the project would incorporate the horizontal design features of the existing structure. The new hospital would blend in with surrounding buildings and create a new open space along the Jackson Street frontage. The height of the new project would be similar to that of the retained structure and both buildings are compatible with the existing scale of the Chinatown neighborhood and reflect the importance of the Chinese Hospital to the community.

OBJECTIVE 4:

IMPROVEMENT OF THE NEIGHBORHOOD ENVIRONMENT TO INCREASE PERSONAL SAFETY, COMFORT, PRIDE AND OPPORTUNITY.

Policy 4.6:

Emphasize the importance of local centers providing commercial and government services.

Policy 4.12:

Install, promote and maintain landscaping in public and private areas.

Policy 4.13:

Improve pedestrian areas by providing human scale and interest.

The Chinese Hospital is a local center providing healthcare services to Chinatown residents. The new project would create an approximately 890 square foot landscaped seating area along Jackson Street that would provide an important rest point and open space for Chinatown residents. These landscaping and open space improvements would also wrap around and continue along James Alley adjacent to the Project Site.

CHINATOWN AREA PLAN

Objectives and Policies

OBJECTIVE 1:

PRESERVE THE DISTINCTIVE URBAN CHARACTER, PHYSICAL ENVIRONMENT AND CULTURAL HERITAGE OF CHINATOWN.

Policy 1.2:

Promote a building form that harmonizes with the scale of existing buildings and width of Chinatown's streets.

Policy 1.4:

Protect the historic and aesthetic resources of Chinatown.

The General Plan Amendments would allow for development of a new hospital that would harmonize with the existing buildings in the Chinatown neighborhood. By providing healthcare services to the Chinatown area and community residents, the project would preserve the Chinatown community and thereby protect the existing historic and aesthetic resources of Chinatown. The project would also provide additional employment and business opportunities for Chinatown residents, which would further protect the cultural character of the neighborhood. The project would preserve the buildings' aesthetic contributions to Chinatown.

OBJECTIVE 2:

RETAIN AND REINFORCE CHINATOWN'S MUTUALLY SUPPORTIVE FUNCTIONS AS NEIGHBORHOOD, CAPITAL CITY AND VISITOR ATTRACTION.

The General Plan Amendments would allow the Chinese Hospital to continue operating at a high level and providing valuable healthcare services for Chinatown residents, which would preserve the urban role of Chinatown as a residential neighborhood. The project would also provide additional jobs that would support Chinatown's function as a capital city.

OBJECTIVE 4:

PRESERVE THE URBAN ROLE OF CHINATOWN AS A RESIDENTIAL NEIGHBORHOOD.

Policy 4.1:

Protect and enhance neighborhood-serving character of commercial uses in predominantly residential areas.

Policy 4.2:

Control proliferation of uses that tend to crowd out the needed neighborhood services.

Policy 4.4:

Expand open space opportunities.

The General Plan Amendments would preserve and improve healthcare services for residents of the Chinatown neighborhood, which would preserve the urban role of Chinatown as a residential neighborhood. By providing healthcare services to the Chinatown area and community residents, the Chinese Hospital would protect and enhance the neighborhood serving character of Chinatown. Moreover, hospital and

medical center use is an important neighborhood service that would complement and not crowd out other neighborhood services. The project would also create new open space on Jackson Street and James Alley.

OBJECTIVE 6:

RETAIN CHINATOWN'S ROLE AS A CAPITAL CITY.

Policy 6.1:

Provide incentives for location and expansion of institutions and cultural facilities.

The General Plan Amendments would allow for the expansion of the Chinese Hospital, which has been a Chinatown institution since 1924. The project would also provide healthcare services for the Chinatown community, providing incentives for businesses to locate and expand in Chinatown.

19. **WHEREAS**, the General Plan Amendments meet the priority policies of Planning Code Section 101.1(b) for the following reasons.

A. That existing neighborhood-serving retail uses be preserved and enhanced and future opportunities for resident employment in and ownership of such businesses be enhanced.

The General Plan Amendments are necessary for development of the project and the project would not cause the reduction or loss of any neighborhood-serving retail use. While the project is under construction, there would be opportunities for local residents and businesses to perform the work and provide other services related to the project. Upon completion of the project, it would provide employment opportunities for residents of the Chinatown community. The project would also provide ancillary retail, employment, and ownership opportunities by helping to preserve and maintain the Chinatown neighborhood through the provision of much-needed and important healthcare services. Moreover, through the continued provision of important medical care to Chinatown residents, the project would develop and foster a rich community environmental that would produce economic growth and stability in Chinatown.

B. That existing housing and neighborhood character be conserved and protected in order to preserve the cultural and economic diversity of our neighborhoods.

The project would have no effect on existing housing. The project would preserve the Chinatown community, thereby conserve, and protect the existing cultural and economic diversity of the Chinatown neighborhood by providing healthcare services to the Chinatown area and community residents. Healthcare is crucial to the long-term stability and prosperity of any neighborhood and this is especially true of Chinatown, which contains both residential and commercial uses. Moreover, the project would not introduce any new use to Chinatown, the hospital and medical center use has co-existed with residential, commercial, educational, and religious uses in Chinatown for over 100 years..

C. That the City's supply of affordable housing be preserved and enhanced,

There is not any housing on the site and the project would not reduce the amount of affordable housing in the Chinatown neighborhood.

- D. That commuter traffic not impede MUNI transit service or overburden our streets or neighborhood parking.

The Project Site is accessed via Stockton and Powell Streets, which are important transportation corridors. The project would be well served by public transit, as there are several Muni lines in the immediate vicinity of the project. The Powell-Hyde and Powell-Mason cable car lines are also a short walk from the project and provide access to downtown BART stations. Upon completion, the project would provide care primarily to residents of the neighborhood and many of the visitors and patient family members would come from within walking distance. Overall, traffic patterns upon completion of the project would be substantially similar to current traffic patterns.

- E. That a diverse economic base be maintained by protecting our industrial and service sectors from displacement due to commercial office development, and that future opportunities for resident employment and ownership in these sectors be enhanced.

The General Plan Amendments and the project would not displace any industrial or service sectors. Demolition of the Medical Administration Building and the parking garage and development of the project would provide extensive economic opportunities for Chinatown residents. The Chinese Hospital would ultimately employ more people than were employed before the alterations, which would provide new opportunities for resident employment. In addition, by providing healthcare services to the Chinatown area and community residents, the project would preserve the Chinatown community and thereby enhance future employment and ownership opportunities for residents of the Chinatown neighborhood. Healthcare is crucial to the long-term stability and prosperity of any neighborhood and this is especially true of Chinatown, which contains both residential and commercial uses. Without the project, it is unclear what healthcare services would be available in Chinatown and the future prospects of the neighborhood could decline.

- F. That the City achieve the greatest possible preparedness to protect against injury and loss of life in an earthquake.

The project would have a significant positive impact on the preparedness of the Chinatown neighborhood in the event of an earthquake. One of the main purposes of the project is to improve the seismic safety of the hospital and the project would be fully compliant with all laws regarding seismic safety. In the event of an earthquake, the Chinese Hospital would provide valuable, timely, and critical aid that would protect against injury and loss of life.

- G. That landmarks and historic buildings be preserved.

Although the 1924 Medical Administration Building, which would be demolished under the project, is not a designated historic landmark, it is a historic resource, eligible for listing under the California Register of Historic Resources both individually and as a contributor to a potential historic district.

Demolition this building is necessary to construct the project and bring the Chinese Hospital into compliance with state structural performance guidelines. The Chinese Hospital Association would create a variety of features in the new building that would pay tribute to the historical relevance of the Medical Administration Building, such as photos, plaques, and explanations of the history of the Project Site. Moreover, the project would provide much needed healthcare services to the Chinatown community. By providing these community services to Chinatown and its residents, the project would foster the preservation of the Chinatown neighborhood community, and thereby support and encourage the continuity of the existing Chinatown neighborhood and its features.

- H. That our parks and open space and their access to sunlight and vistas be protected from development.

The exterior of the project would perpetuate, enhance, and expand the existing tradition of providing an exterior gathering place. Currently, there is a small open space area in the front setback area of the Chinese Hospital on Jackson Street, which is used by hospital visitors and community members as a gathering and meeting place and provides a rest point for Chinatown residents walking up Jackson Street. The project proposes to expand this open space and would provide an approximately 890 square foot landscaped seating area along the Jackson Street frontage created by a setback of 17 feet from the property line along Jackson Street at the ground and first floors, which would be landscaped and hardscaped. This area would wrap around the side of the building along James Alley, where the entire building would also be set back 5 feet from the east property line. The Project Sponsor also is in discussions to purchase and/or obtain easement rights over the other half of James Alley, which Project Sponsor currently does not own, upon which Project Sponsor intends to expand the landscaping and open space improvements along James Alley and possibly create a landscaped open seating area or other usable open space within James Alley for the public to enjoy. Overall, the project would maintain and improve the existing open space on the Project Site.

20. **WHEREAS**, On July 12, 2012, at a duly noticed public hearing, the Commission adopted approval findings under CEQA, including findings rejecting alternatives and adopting a statement of overriding considerations (“CEQA Findings”) by Motion No. ____, Attached as Exhibit A to Motion No. ____ is the Mitigation Monitoring and Reporting Program (“MMRP”). The Commission hereby adopts and incorporates by reference as though fully set forth herein the CEQA Findings including rejecting alternatives and the statement of overriding considerations, found in Motion No. ____ and the MMRP attached thereto as Exhibit A.

NOW, THEREFORE BE IT RESOLVED THAT, the Planning Commission hereby **ADOPTS** and **RECOMMENDS** that the Board of Supervisors approve the following amendments to the General Plan: (1) amendment of "Policy 1.2 Promote a building form that harmonizes with the scale of existing buildings and width of Chinatown's streets" within the Chinatown Area Plan to add the language, "other than construction within the Chinese Hospital Special Use District" to the second paragraph of the Policy and (2) amendment of "Map 1 - Generalized Height Plan" of the Chinatown Area Plan to reference a height limit of 110 feet for the property at 835-845 Jackson Street, Block 0192, Lot 041.

I hereby certify that the Planning Commission **ADOPTED** the foregoing Resolution on July 12, 2012.

Linda D. Avery
Commission Secretary

AYES:

NAYS:

ABSENT:

ADOPTED: July 12, 2012

1 [General Plan Amendment—Chinese Hospital Special Use District]

2

3 **Ordinance amending the San Francisco General Plan by amending Policy 1.2 and Map**
4 **1 of the Chinatown Area Plan to facilitate development of the Chinese Hospital**
5 **Replacement Project at 835 and 845 Jackson Street (Assessor's Block 0192, Lot 041);**
6 **and making findings, including environmental findings and findings of consistency**
7 **with the General Plan and Planning Code sections 101.1 and 340.**

8

NOTE: Additions are *single-underline italics Times New Roman*;
9 deletions are ~~*strike-through italics Times New Roman*~~.
Board amendment additions are double-underlined;
10 Board amendment deletions are ~~strikethrough normal~~.

11

12 Be it ordained by the People of the City and County of San Francisco:

13 Section 1. Findings. The Board of Supervisors of the City and County of San Francisco
14 hereby finds and determines that:

15 (a) General Plan and Planning Code Findings.

16 (1) Pursuant to San Francisco Charter Section 4.105 and Planning Code Section
17 340, any amendments to the General Plan shall first be considered by the Planning
18 Commission and thereafter recommended for approval or rejection by the Board of
19 Supervisors. On _____, the Commission conducted a duly noticed public hearing on
20 the proposed General Plan Amendments pursuant to Planning Code Section 340 and, by
21 Resolution No. _____, adopted the General Plan Amendments, and recommended
22 them for approval to the Board of Supervisors. A copy of Planning Commission Resolution
23 No. _____ is on file with the Clerk of the Board of Supervisors in File No.

24

25

1 (2) The Board of Supervisors finds that the proposed General Plan amendments
2 are in conformity with the priority policies of Planning Code Section 101.1 and on balance is
3 consistent with the General Plan as it is proposed for amendment herein, and hereby adopts
4 the findings set forth in Planning Commission Resolution No. _____ and
5 incorporates such findings herein by reference.

6 (3) Pursuant to Planning Code Section 340, the Board finds that the proposed
7 General Plan amendments will serve the public necessity, convenience and welfare for the
8 reasons set forth in Planning Commission Resolution No. _____, which reasons are
9 incorporated herein by reference as though fully set forth.

10 (b) Environmental Findings. On _____, at a duly noticed public hearing,
11 the Planning Commission, reviewed and considered a Final Environmental Impact Report
12 (Final EIR) for the Chinese Hospital Replacement Project (Project) and found that the
13 contents of the Final EIR and the procedures through which the Final EIR was prepared,
14 publicized, and reviewed complied with the provisions of California Environmental Quality Act
15 (California Public Resources Code section 21000 *et seq.*) ("CEQA"), 14 California Code of
16 Regulations sections 15000 *et seq.* ("the CEQA Guidelines"), and Chapter 31 of the San
17 Francisco Administrative Code ("Chapter 31").

18 The Planning Commission found the Final EIR was adequate, accurate and objective,
19 reflected the independent analysis and judgment of the Department and the Commission, and
20 that the summary of comments and responses contained no significant revisions to the Draft
21 EIR, and certified the Final EIR for the Project in compliance with CEQA, the CEQA
22 Guidelines, and Chapter 31. Additionally, Planning Department staff prepared a Mitigation
23 Monitoring and Reporting Program ("MMRP") for the Project, which is attached to Planning
24 Commission Motion No. _____. The Final EIR, the MMRP and all supporting
25

1 documents and files have been made available to the public, the Planning Commission, and
2 this Board for review, consideration and action.

3 The Planning Commission Secretary is the custodian of records for the Project's
4 environmental review, located in the File for Case No. 2008.0762E, at 1650 Mission Street,
5 Fourth Floor, San Francisco, California.

6 On _____, at a duly noticed public hearing, in recommending approval of the
7 proposed Planning Code amendments and approving the Project, the Planning Commission
8 adopted approval findings under CEQA, including findings rejecting alternatives and adopting
9 a statement of overriding considerations, by Motion No. _____. Additionally, the
10 Planning Commission adopted the MMRP, which is attached to Planning Commission Motion
11 No. _____ and incorporated by reference. Planning Commission Motion No.
12 _____ and the MMRP are on file with the Clerk of the Board of Supervisors in File
13 No. _____ and are hereby incorporated herein by reference as though fully set forth
14 in this Ordinance. This Board finds that these Planning Code amendments are within the
15 scope of the Final EIR and the Planning Commission's adopted CEQA findings and MMRP.
16 This Board hereby affirms the Planning Commission's certification of the Final EIR and adopts
17 the CEQA approval findings set forth in Planning Commission Motion No. _____ as
18 its own and adopts the MMRP.

19 (c) General Findings.

20 (1) The properties commonly known as 835 and 845 Jackson Street on Block 0192,
21 Lot 041 are located on the south side of Jackson Street, between Powell and Stockton Streets
22 in the Chinatown area of the City and County of San Francisco. The properties are within the
23 Chinatown Residential Neighborhood Commercial District and within a 65-N Height and Bulk
24 District. Block 0192, Lot 041 currently contains three (3) structures: 835 Jackson Street
25 currently serves as a medical administration building for hospital administration and outpatient

1 healthcare services, 845 Jackson Street is the existing five-story hospital, and behind 835
2 Jackson Street is a three-story parking structure. No undeveloped space currently exists for
3 the development of a new hospital.

4 (2) To provide for the future healthcare needs of Chinatown and the local
5 community and to comply with the seismic retrofit requirements for all acute care hospitals
6 imposed by the Office of Statewide Health Planning and Development ("OSHPD"), the
7 Chinese Hospital, which is a community-owned nonprofit organization, proposes to replace
8 the buildings located at 835 Jackson Street (the 1924-era original hospital building, now used
9 for administration and outpatient services and the related parking structure) with a new eight-
10 story hospital and convert the existing hospital at 845 Jackson Street to a medical center use
11 with outpatient clinic services. Without amendment, the Planning Code would not allow the
12 proposed development of a new hospital on the site, and the Chinatown Area Plan of the
13 General Plan would not permit the requisite height and design of the Chinese Hospital Project.

14 (3) The Chinese Hospital Special Use District is being established and these
15 conforming amendments to the General Plan are being proposed in order to allow the sponsor
16 to develop a new Chinese Hospital on the subject site to the proposed bulk and height.

17

18 Section 2. The San Francisco General Plan is hereby amended by amending Policy 1.2
19 of the Chinatown Area Plan, to read as follows:

20 POLICY 1.2 Promote a building form that harmonizes with the scale of existing
21 buildings and width of Chinatown's streets.

22 The Chinatown area is primarily composed of small-scaled buildings. Most existing
23 buildings are quite low and due to the pattern of the lots, many are relatively short in depth as
24 well. The typical lot size is only 3,500 square feet. The few large buildings in the area intrude
25 into this fine-scaled texture of development. Further development along these lines would

1 severely damage the appearance of this historic part of the city and would also produce
2 deeply shadowed streets.

3 Urban design guidelines should be applied to new construction in Chinatown, other than
4 construction within the Chinese Hospital Special Use District, in order to (1) integrate new
5 buildings into the dominant fine scale of development characterized by small varied buildings
6 in a manner that does not create sharp contrasts in scale or significantly alter the texture of
7 the area as viewed from surrounding areas and (2) maintain the unifying rhythm of facade
8 widths and the general scale of street walls as viewed from the streets. Generally, buildings
9 above a height of 40 feet should not exceed a width (measured parallel to the street) of 50 to
10 75 feet or a maximum diagonal of 100 feet. As buildings approach these dimensions,
11 increasingly stronger measures will be required to minimize the apparent bulk and scale of the
12 project and insure a harmonious fit with the contextual setting. Larger projects may
13 necessitate division of the facade into independent designs, changes of height of several
14 floors and setbacks to achieve the desired relationship.

15 These design controls have been presented as guidelines rather than rigid rules. This
16 is essential given the wide range of sites and situations in which a project may be proposed.
17 The ultimate development potential in a given property is dependent not only on the zoning
18 and height limit but also on the nature of surrounding development.

19
20 Section 3. The Board of Supervisors hereby approves the following amendments to
21 Map 1 of the Chinatown Area Plan of the General Plan:

22 Map 1 of the Chinatown Area Plan is amended to reference a height limit of 110 feet on
23 Block 0192, Lot 041.

1 Section 4. The Board of Supervisors hereby approves the following amendment to the
2 General Plan Land Use Index:

3 The Land Use Index shall be updated as necessary to reflect the amendments set forth
4 in Sections 2 and 3, above.

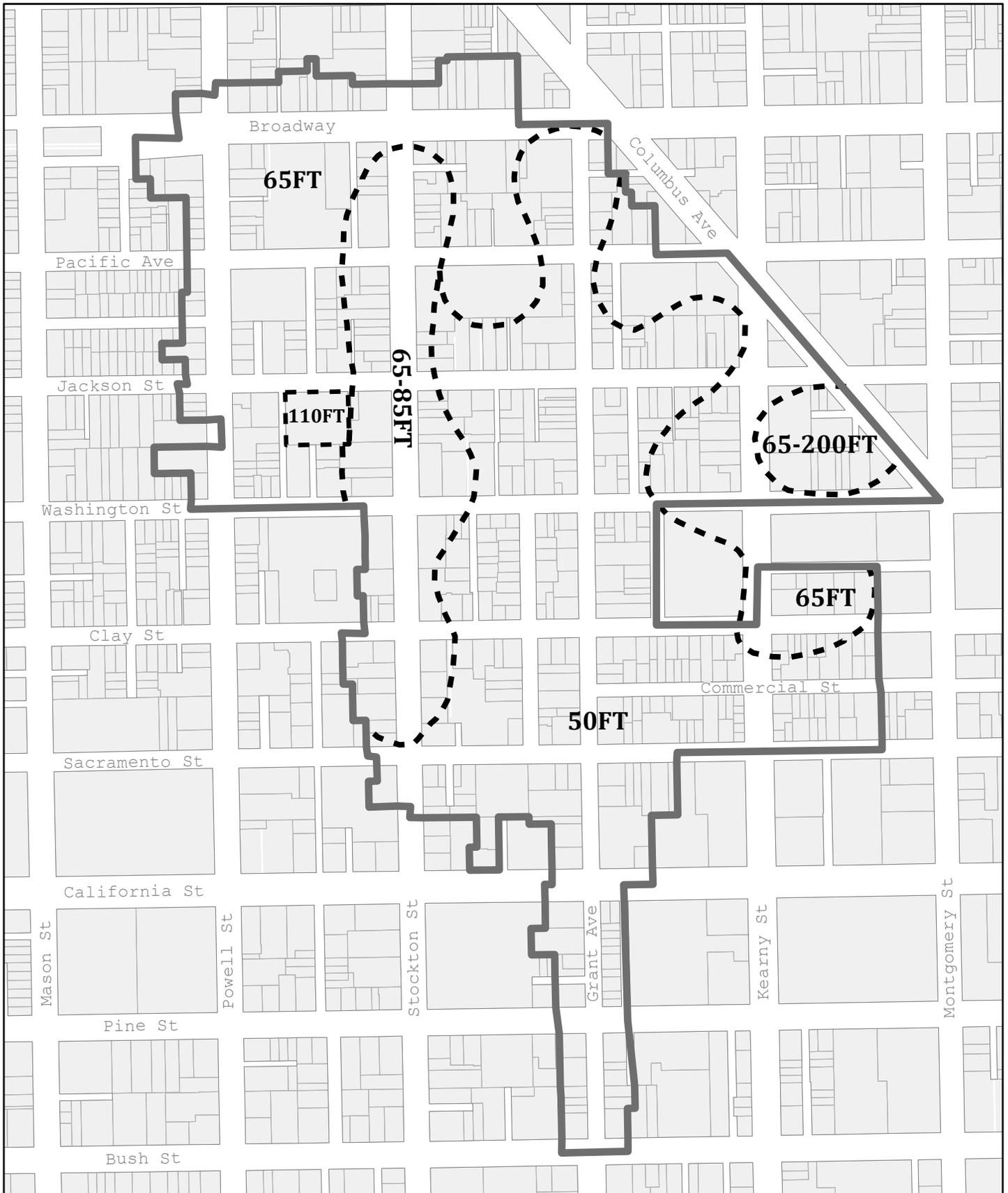
5
6 Section 5. Effective Date. This ordinance shall become effective 30 days from the
7 date of passage.

8
9 Section 6. In enacting this Ordinance, the Board intends to amend only those words,
10 phrases, paragraphs, subsections, sections, articles, numbers, punctuation, charts, diagrams,
11 or any other constituent part of the General Plan that are explicitly shown in this legislation as
12 additions, deletions, Board amendment additions, and Board amendment deletions in
13 accordance with the "Note" that appears under the official title of the legislation.

14
15 APPROVED AS TO FORM:
DENNIS J. HERRERA, City Attorney

16
17 By:


18 Marlena G. Byrne
Deputy City Attorney



GENERALIZED HEIGHT PLAN

Map 1

1 [Urging the Planning Commission to Initiate and Consider Amendments to the General Plan
2 Concerning the Chinese Hospital Special Use District and Replacement Project]

3 **Resolution urging the Planning Commission to initiate and consider amendments to**
4 **Policy 1.2 and Map 1 of the Chinatown Area Plan of the San Francisco General Plan as**
5 **part of the Chinese Hospital Replacement Project (835 and 845 Jackson Street,**
6 **Assessor's Block 0192, Lot 041).**
7

8 WHEREAS, The Chinese Hospital has provided healthcare to residents of Chinatown
9 and San Francisco since 1899, first as the Tung Wah Dispensary and then in 1925 as the
10 Chinese Hospital. The Chinese Hospital is a community-owned nonprofit organization, and is
11 the only independent community hospital in San Francisco. The Chinese Hospital is governed
12 by a community based board of trustees who represent Chinese family associations and
13 benevolent organizations of Chinatown; and
14

15 WHEREAS, The Chinese Hospital serves as a center for healthcare, healthcare
16 education and wellness services for local residents and the Chinese community in the Bay
17 Area. More than 90% of the Chinese Hospital's patients are residents of San Francisco and
18 almost 40% are from the Chinatown, North Beach and surrounding residential neighborhoods.
19 Approximately 90% of the Chinese Hospital's patients speak Chinese as their primary
20 language; and

21 WHEREAS, In 2009 and 2010, the Chinese Hospital had approximately 4,000
22 emergency visits to its urgent care center, provided healthcare services to almost 2,000 acute
23 care patients, and performed 4,500 outpatient surgeries. More than 90% of its acute care
24 patients were 60 years or older and about 90% were Medicare and Medi-Cal patients; and
25

1 WHEREAS, To provide for the future healthcare needs of Chinatown and the local
2 community, and to comply with the seismic retrofit requirements for all acute care hospitals
3 imposed by the Office of the Statewide Health Planning and Development (“OSHPD”), the
4 Chinese Hospital proposes to replace the building at 835 Jackson Street and the related
5 parking structure with a new eight-story hospital and convert the existing hospital at 845
6 Jackson Street to a medical administrative office use building with outpatient clinic services
7 (“Proposed Project”). The Proposed Project would not displace any residential uses or
8 demolish any residential buildings as it would be developed on its existing parcels; and

9 WHEREAS, The Proposed Project would be well suited for modern healthcare
10 practices and procedures that require more spacious facilities for new medical equipment
11 leading to improved healthcare quality and safety for patients, and a safe and accessible work
12 environment for hospital staff. In particular, the Proposed Project would permit the hospital to
13 replace its two, three and four-bed patient rooms with single patient rooms and utilize modern
14 medical equipment. In addition, the Proposed Project would provide a new 22-bed skilled
15 nursing facility to improve the transition of patients from the acute care setting while they
16 recover from inpatient procedures. By providing these essential healthcare services to the
17 Chinatown area and the community residents, the Proposed Project would promote the
18 preservation the Chinatown community, and thereby conserve and protect the existing cultural
19 and economic diversity of the Chinatown neighborhood; and

20 WHEREAS, The Chinese Hospital and its agents (Project Sponsor) has applied to the
21 City for environmental review of the Proposed Project. A Draft Environmental Impact Report
22 (Draft EIR) was published on April 16, 2012, the Planning Commission will hold a public
23 hearing and receive public comment on the Draft EIR on May 17, 2012, and the Planning
24 Department will accept written public comment on the Draft EIR from April 16, 2012 through
25 May 31, 2012; and

Supervisor Chiu
BOARD OF SUPERVISORS

1 WHEREAS, The Planning Department will prepare a Responses to Comments
2 document, responding to any comments received on the Draft EIR during the public comment
3 period, and the Planning Commission will hold a public hearing to consider certification of the
4 Final EIR; and

5 WHEREAS, The new development would be inconsistent with the design guidelines set
6 forth in the Chinatown Area Plan of the General Plan, and such General Plan would not permit
7 the requisite height and design of the proposed development. Accordingly, to allow for the
8 new development, thereby permitting the Chinese Hospital to satisfy the healthcare needs of
9 Chinatown and the local community, improve the healthcare quality and safety for patients,
10 and comply with the retrofit requirements of OSHPD, the Project Sponsor proposes to amend
11 Policy 1.2 and Map 1 of the Chinatown Area Plan of the General Plan; and now, therefore, be
12 it

13 RESOLVED, That the Board of Supervisors urges the Planning Commission to initiate
14 and consider those proposed amendments to Policy 1.2 and Map 1 of the Chinatown Area
15 Plan of the General Plan that are included in the attached ordinance, consistent with the
16 proposed Chinese Hospital Replacement Project.

17
18
19
20
21
22
23
24
25



SAN FRANCISCO PLANNING DEPARTMENT

Planning Commission Draft Resolution Planning Code and Zoning Map Amendments

HEARING DATE: JULY 12, 2012

Date: July 5, 2012
Case No.: 2008.0762EMZC
Project Address: 835-845 JACKSON STREET
Zoning: Chinatown Residential Neighborhood Commercial District
65-N Height and Bulk District
Block/Lot: 0192/041
Project Sponsor: Linda Schumacher
Chinese Hospital Association
835-845 Jackson Street
San Francisco, CA 94133
Staff Contact: Rick Crawford – (415) 558-6358
rick.crawford@sfgov.org

1650 Mission St.
Suite 400
San Francisco,
CA 94103-2479

Reception:
415.558.6378

Fax:
415.558.6409

Planning
Information:
415.558.6377

RESOLUTION OF THE PLANNING COMMISSION ADOPTING FINDINGS RECOMMENDING THAT THE BOARD OF SUPERVISORS ADOPT A PROPOSED ORDINANCE ADDING PLANNING CODE SECTION 249.69 TO ESTABLISH THE CHINESE HOSPITAL SPECIAL USE DISTRICT, TO AMEND SHEETS SU01 AND ZN01 OF THE ZONING MAP TO REFLECT THIS NEW SPECIAL USE DISTRICT AND AMEND SHEET HT01 OF THE ZONING MAP TO REFLECT A CHANGE IN HEIGHT AND BULK CLASSIFICATION FROM 65-N TO 110-G FOR PROPERTY AT 835-845 JACKSON STREET (LOT 041 IN ASSESSOR'S BLOCK 0192), TO FACILITATE THE DEVELOPMENT OF THE CHINESE HOSPITAL REPLACEMENT PROJECT; AND MAKING ENVIRONMENTAL FINDINGS AND FINDINGS OF CONSISTENCY WITH THE GENERAL PLAN AND THE PRIORITY POLICIES OF PLANNING CODE SECTION 101.1.

PREAMBLE

WHEREAS, on May 8, 2012, Supervisor David Chiu introduced a proposed Ordinance under Board of Supervisors (hereinafter "Board") File Number 120475, attached as EXHIBIT A, which would amend the San Francisco Planning Code by adding Section 249.69 to create the Chinese Hospital Special Use District ("SUD") and to amend Sheet SU01 and ZN01 of the Zoning Map the City and County of San Francisco to reflect this new SUD and would further amend Sheet HT01 of the Zoning Map to reflect a change in height and bulk classification from 65-N to 110-G to facilitate the development of the Chinese Hospital Replacement Project at 835-845 Jackson Street located on the south of Jackson Street between Powell and Stockton Streets (Lot 041 in Assessor's Block 0192).

WHEREAS, the Chinese Hospital campus (835-845 Jackson Street) currently consists of the Chinese Hospital at 845 Jackson Street, built in 1979; the Medical Administration Building at 835 Jackson Street

(the original Chinese Hospital, built in 1924); and the Chinese Hospital Parking Garage, located directly behind the 1924 Medical Administration Building. The Chinese Hospital Association, (the Project Sponsor) proposes to demolish the Medical Administration Building and the parking garage, construct a new, modern hospital building in their place, and remodel and refurbish the existing hospital building (the “project”). The proposed new hospital would be an acute care hospital with 54 acute care beds (the same number of licensed acute-care beds as in the existing Chinese Hospital) and a new skilled nursing facility with 22 beds.

WHEREAS, the Project Sponsor applied for environmental review on June 24, 2008. The San Francisco Planning Department (the “Department”) determined that an Environmental Impact Report was required and provided public notice of the preparation of such report on May 18, 2011. The Department published a Draft Environmental Impact Report (DEIR) on April 16, 2012. The Commission held a public hearing to solicit testimony on the DEIR on May 17, 2012. The Department received written comments on the DEIR from April 17 to May 31, 2012. The Department published the Comments and Responses on June 28, 2012. The DEIR, together with the Comments and Responses constitute the Final Environmental Impact Report (FEIR). The Commission certified the FEIR on July 12, 2012 in Motion No. _____.

WHEREAS, the project requires amendments to the Planning Code to (1) add Section 249.69 to the Planning Code to create the Chinese Hospital Special Use District and (2) amend the San Francisco Zoning Map Sectional Maps ZN01, HT01, and SU01 to show the Chinese Hospital Special Use District (collectively, the “SUD and Zoning Map Amendments”).

WHEREAS, on July 12, 2012, the Commission conducted a duly noticed public hearing at a regularly scheduled meeting on the SUD and Zoning Map Amendments.

WHEREAS, pursuant to Planning Code Section 302, the Planning Code may be amended whenever the public necessity, convenience, and general welfare require.

WHEREAS, the SUD and Zoning Map Amendments are necessary for development of the project, which would promote the public necessity, convenience, and general welfare in that it would facilitate the development of a state-of-the-art hospital that is crucial for the continued operation and success of the Chinese Hospital and the Chinatown community that it supports. The project also serves to bring the Chinese Hospital into compliance with current laws and regulations, such as the Americans with Disabilities Act and SB 1953 (the Alfred E. Alquist Hospital Seismic Safety Act of 1983). Upon completion, the project would be well suited for modern healthcare practices and procedures that require more spacious facilities for new medical equipment leading to improved healthcare quality and safety for patients, and a safe and accessible work environment for hospital staff. The project would allow the Chinese Hospital to replace its two, three, and four-bed patient rooms with single patient rooms that utilize modern medical equipment. It would also create a new 22-bed skilled nursing facility that would improve the transition of patients from the acute care setting. By providing these essential healthcare services to the Chinatown area and the community residents, the project would promote the preservation of the Chinatown community, and thereby conserve and protect the existing cultural and economic diversity of the Chinatown neighborhood.

1. The SUD and Zoning Map Amendments are consistent with and will promote the following relevant objectives and policies of the General Plan.

COMMUNITY SAFETY ELEMENT

Objectives and Policies

OBJECTIVE 1:

REDUCE STRUCTURAL AND NON-STRUCTURAL HAZARDS TO LIFE SAFETY AND MINIMIZE PROPERTY DAMAGE RESULTING FROM FUTURE DISASTERS.

Policy 1.3:

Assure that new construction meets current structural and life safety standards.

Policy 1.25:

Prepare for medical emergencies and pandemics.

The SUD and Zoning Map Amendments are necessary for the project, which would create a new, seismically secure hospital that would be in compliance with current laws and regulations, such as SB 1953 (the Alfred E. Alquist Hospital Seismic Safety Act of 1983) and Office of Statewide Health Planning and Development (OSHPD) requirements. The project would increase the availability of healthcare services and of medical professionals in Chinatown, which would better prepare the Chinatown neighborhood for emergencies and pandemics.

OBJECTIVE 2:

BE PREPARED FOR THE ONSET OF DISASTER BY PROVIDING PUBLIC EDUCATION AND TRAINING ABOUT EARTHQUAKES AND OTHER NATURAL AND MAN-MADE DISASTERS, BY READYING CITY INFRASTRUCTURE, AND BY ENSURING THE NECESSARY COORDINATION IS IN PLACE FOR A READY RESPONSE.

Policy 2.5:

Maintain a comprehensive, current Emergency Response Plan, in compliance with applicable state and federal regulations, to guide the response to disasters.

Policy 2.17:

Ensure the City's plan for medical response is coordinated with its privately owned hospitals.

The project would bring the Chinese Hospital into compliance with applicable seismic requirements and help ensure that the Chinese Hospital continues to operate at full capacity in the event of an emergency. The Chinese Hospital helps provide medical care and is part of the City's medical response in the event of a disaster.

URBAN DESIGN ELEMENT

Objectives and Policies

OBJECTIVE 1:

EMPHASIS OF THE CHARACTERISTIC PATTERN WHICH GIVES TO THE CITY AND ITS NEIGHBORHOODS AN IMAGE, A SENSE OF PURPOSE, AND A MEANS OF ORIENTATION.

Policy 1.3:

Recognize that buildings, when seen together, produce a total effect that characterizes the city and its districts.

Policy 1.5:

Emphasize the special nature of each district through distinctive landscaping and other features.

The project would include landscaping and street furniture that relate to the cultural character of the neighborhood. The theme of the plaza on Jefferson Street, and a mural proposed along Stone Street will include features complimenting the cultural heritage of Chinatown. The Chinese Hospital Association would also create a variety of features in the new building that would pay tribute to the historical relevance of the Medical Administration Building, such as photos, plaques, and explanations of the history of the Project Site.

OBJECTIVE 2:

CONSERVATION OF RESOURCES WHICH PROVIDE A SENSE OF NATURE, CONTINUITY WITH THE PAST, AND FREEDOM FROM OVERCROWDING.

Policy 2.6:

Respect the character of older development nearby in the design of new buildings.

Policy 2.8:

Maintain a strong presumption against the giving up of street areas for private ownership or use, or for construction of public buildings.

The project would be consistent with and respect the character of the architectural and historical context of the Chinatown neighborhood and surrounding buildings. Due to the unique massing and volume requirements for medical facilities, almost all hospital buildings require special considerations for bulk, and the proposed height and bulk are consistent with precedent from other hospital approvals. No street areas would be given up for private ownership.

OBJECTIVE 3:

MODERATION OF MAJOR NEW DEVELOPMENT TO COMPLEMENT THE CITY PATTERN, THE RESOURCES TO BE CONSERVED, AND THE NEIGHBORHOOD ENVIRONMENT.

Policy 3.1:

Promote harmony in the visual relationships and transitions between new and older buildings.

Policy 3.2:

Avoid extreme contrasts in color, shape and other characteristics which will cause new buildings to stand out in excess of their public importance.

Policy 3.4:

Promote building forms that will respect and improve the integrity of open spaces and other public areas.

Policy 3.5:

Relate the height of buildings to important attributes of the city pattern and to the height and character of existing development.

Policy 3.9:

Encourage a continuing awareness of the long-term effects of growth upon the physical form of the city.

The design of the project would respect the architectural context of the surrounding buildings. Similar to other buildings in the Chinatown neighborhood, the project would incorporate the horizontal design features of the existing structure. The new hospital would blend in with surrounding buildings and create a new open space along the Jackson Street frontage. The height of the new project would be similar to that of the retained structure and both buildings are compatible with the existing scale of the Chinatown neighborhood and reflect the importance of the Chinese Hospital to the community.

OBJECTIVE 4:

IMPROVEMENT OF THE NEIGHBORHOOD ENVIRONMENT TO INCREASE PERSONAL SAFETY, COMFORT, PRIDE AND OPPORTUNITY.

Policy 4.6:

Emphasize the importance of local centers providing commercial and government services.

Policy 4.12:

Install, promote and maintain landscaping in public and private areas.

Policy 4.13:

Improve pedestrian areas by providing human scale and interest.

The Chinese Hospital is a local center providing healthcare services to Chinatown residents. The new project would create an approximately 890 square foot landscaped seating area along Jackson Street that would provide an important rest point and open space for Chinatown residents. These landscaping and open space improvements would also wrap around and continue along James Alley adjacent to the Project Site.

CHINATOWN AREA PLAN

Objectives and Policies

OBJECTIVE 1:

PRESERVE THE DISTINCTIVE URBAN CHARACTER, PHYSICAL ENVIRONMENT AND CULTURAL HERITAGE OF CHINATOWN.

Policy 1.2:

Promote a building form that harmonizes with the scale of existing buildings and width of Chinatown's streets.

Policy 1.4:

Protect the historic and aesthetic resources of Chinatown.

The SUD and Zoning Map Amendments would allow for development of a new hospital that would harmonize with the existing buildings in the Chinatown neighborhood. By providing healthcare services to the Chinatown area and community residents, the project would preserve the Chinatown community and thereby protect the existing historic and aesthetic resources of Chinatown. The project would also provide additional employment and business opportunities for Chinatown residents, which would further protect the cultural character of the neighborhood. The project would preserve the buildings' aesthetic contributions to Chinatown.

OBJECTIVE 2:

RETAIN AND REINFORCE CHINATOWN'S MUTUALLY SUPPORTIVE FUNCTIONS AS NEIGHBORHOOD, CAPITAL CITY AND VISITOR ATTRACTION.

The SUD and Zoning Map Amendments would allow the Chinese Hospital to continue operating at a high level and providing valuable healthcare services for Chinatown residents, which would preserve the urban role of Chinatown as a residential neighborhood. The project would also provide additional jobs that would support Chinatown's function as a capital city.

OBJECTIVE 4:

PRESERVE THE URBAN ROLE OF CHINATOWN AS A RESIDENTIAL NEIGHBORHOOD.

Policy 4.1:

Protect and enhance neighborhood serving character of commercial uses in predominantly residential areas.

Policy 4.2:

Control proliferation of uses that tend to crowd out the needed neighborhood services.

Policy 4.4:

Expand open space opportunities.

The SUD and Zoning Map Amendments would preserve and improve healthcare services for residents of the Chinatown neighborhood, which would preserve the urban role of Chinatown as a residential neighborhood. By providing healthcare services to the Chinatown area and community residents, the

Chinese Hospital would protect and enhance the neighborhood serving character of Chinatown. Moreover, hospital and medical center use is an important neighborhood service that would complement and not crowd out other neighborhood services. The project would also create new open space on Jackson Street and James Alley.

OBJECTIVE 6:

RETAIN CHINATOWN'S ROLE AS A CAPITAL CITY.

Policy 6.1:

Provide incentives for location and expansion of institutions and cultural facilities.

The SUD and Zoning Map Amendments would allow for the expansion of the Chinese Hospital, which has been a Chinatown institution since 1924. The project would also provide healthcare services for the Chinatown community, providing incentives for businesses to locate and expand in Chinatown.

2. The SUD and Zoning Map Amendments meet the priority policies of Planning Code Section 101.1(b) for the following reasons.
 - A. That existing neighborhood-serving retail uses be preserved and enhanced and future opportunities for resident employment in and ownership of such businesses be enhanced.

The SUD and Zoning Map Amendments are necessary for development of the project and the project would not cause the reduction or loss of any neighborhood-serving retail use. While the project is under construction, there would be opportunities for local residents and businesses to perform the work and provide other services related to the project. Upon completion of the project, it would provide employment opportunities for residents of the Chinatown community. The project would also provide ancillary retail, employment, and ownership opportunities by helping to preserve and maintain the Chinatown neighborhood through the provision of much-needed and important healthcare services. Moreover, through the continued provision of important medical care to Chinatown residents, the project would develop and foster a rich community environment that would produce economic growth and stability in Chinatown.

- B. That existing housing and neighborhood character be conserved and protected in order to preserve the cultural and economic diversity of our neighborhoods.

The project would have no effect on existing housing. The project would preserve the Chinatown community, thereby conserve, and protect the existing cultural and economic diversity of the Chinatown neighborhood by providing healthcare services to the Chinatown area and community residents. Healthcare is crucial to the long-term stability and prosperity of any neighborhood and this is especially true of Chinatown, which contains both residential and commercial uses. Moreover, the project would not introduce any new use to Chinatown, the hospital and medical center use has co-existed with residential, commercial, educational, and religious uses in Chinatown for over 100 years.

- C. That the City's supply of affordable housing be preserved and enhanced,

There is not any housing on the site and the project would not reduce the amount of affordable housing in the Chinatown neighborhood.

- D. That commuter traffic not impede MUNI transit service or overburden our streets or neighborhood parking.

The Project Site is accessed via Stockton and Powell Streets, which are important transportation corridors. The project would be well served by public transit, as there are several Muni lines in the immediate vicinity of the project. The Powell-Hyde and Powell-Mason cable car lines are also a short walk from the project and provide access to downtown BART stations. Upon completion, the project would provide care primarily to residents of the neighborhood and many of the visitors and patient family members would come from within walking distance. Overall, traffic patterns upon completion of the project would be substantially similar to current traffic patterns.

- E. That a diverse economic base be maintained by protecting our industrial and service sectors from displacement due to commercial office development, and that future opportunities for resident employment and ownership in these sectors be enhanced.

The project would not displace any industrial or service sectors. Demolition of the Medical Administration Building and the parking garage and development of the project would provide extensive economic opportunities for Chinatown residents. The Chinese Hospital would ultimately employ more people than were employed before the alterations, which would provide new opportunities for resident employment. In addition, by providing healthcare services to the Chinatown area and community residents, the project would preserve the Chinatown community and thereby enhance future employment and ownership opportunities for residents of the Chinatown neighborhood. Healthcare is crucial to the long-term stability and prosperity of any neighborhood and this is especially true of Chinatown, which contains both residential and commercial uses. Without the project, it is unclear what healthcare services would be available in Chinatown and the future prospects of the neighborhood could decline.

- F. That the City achieve the greatest possible preparedness to protect against injury and loss of life in an earthquake.

The project would have a significant positive impact on the preparedness of the Chinatown neighborhood in the event of an earthquake. One of the main purposes of the project is to improve the seismic safety of the hospital and the project would be fully compliant with all laws regarding seismic safety. In the event of an earthquake, the Chinese Hospital would provide valuable, timely, and critical aid that would protect against injury and loss of life.

- G. That landmarks and historic buildings be preserved.

Although the 1924 Medical Administration Building, which would be demolished under the project, is not a designated historic landmark, it is a historic resource, eligible for listing under the California Register of Historic Resources both individually and as a contributor to a potential historic district. Demolition this building is necessary to construct the project and bring the Chinese Hospital into compliance with state

structural performance guidelines. The Chinese Hospital Association would create a variety of features in the new building that would pay tribute to the historical relevance of the Medical Administration Building, such as photos, plaques, and explanations of the history of the Project Site. Moreover, the project would provide much needed healthcare services to the Chinatown community. By providing these community services to Chinatown and its residents, the project would foster the preservation of the Chinatown neighborhood community, and thereby support and encourage the continuity of the existing Chinatown neighborhood and its features.

- H. That our parks and open space and their access to sunlight and vistas be protected from development.

The exterior of the project would perpetuate, enhance, and expand the existing tradition of providing an exterior community gathering place for respite and relaxation on the uphill walk along Jackson Street. Currently, there is a small open space area in the front setback area of the Chinese Hospital on Jackson Street, which is used by hospital visitors and community members as a gathering and meeting place and provides a rest point for Chinatown residents walking up Jackson Street. The project proposes to expand this open space and would provide an approximately 890 square foot landscaped seating area along the Jackson Street frontage created by a setback of 17 feet from the property line along Jackson Street at the ground and first floors, which would be landscaped and hardscaped. This area would wrap around the side of the building along James Alley, where the entire building would also be set back 5 feet from the east property line. The Project Sponsor also is in discussions to purchase and/or obtain easement rights over the other half of James Alley, which Project Sponsor currently does not own, upon which Project Sponsor intends to expand the landscaping and open space improvements along James Alley and possibly create a landscaped open seating area or other usable open space within James Alley for the public to enjoy. Overall, the project would maintain and improve the existing open space on the Project Site.

WHEREAS, Further, for the foregoing reasons and based on the facts presented, the Commission finds, pursuant to Planning Code Section 302, that the public necessity, convenience, and general welfare require the adoption of this legislation.

3. Environmental Findings. **Whereas**, On July 12, 2012, at a duly noticed public hearing, the Commission adopted approval findings under CEQA, including findings rejecting alternatives and adopting a statement of overriding considerations (“CEQA Findings”) by Motion No. ____, Attached as Exhibit A to Motion No. ____ is the Mitigation Monitoring and Reporting Program (“MMRP”). The Commission hereby adopts and incorporates by reference as though fully set forth herein the CEQA Findings including rejecting alternatives and the statement of overriding considerations, found in Motion No. ____ and the MMRP attached thereto as Exhibit A.

NOW THEREFORE BE IT RESOLVED, that the Planning Commission hereby recommends that the Board of Supervisors ADOPT the proposed Ordinance to amend the Planning Code by adding Section 249.69 to create the Chinese Hospital Special Use District and to amend the San Francisco Zoning Map Sectional Maps ZN01, HT01, and SU01 to show the Chinese Hospital Special Use District and reflect a change in Height and Bulk classification from 65-N to 110-G, as fully set forth in Exhibit A to this Resolution.

**Draft Motion
July 12, 2012**

**CASE NO. 2008.0762EMZC
835-845 Jackson Street, Chinese Hospital**

I hereby certify that the Planning Commission ADOPTED the foregoing Resolution on July 12, 2012.

Linda D. Avery
Commission Secretary

AYES:

NAYS:

ABSENT:

ADOPTED: July 12, 2012

BOARD of SUPERVISORS



City Hall
Dr. Carlton B. Goodlett Place, Room 244
San Francisco 94102-4689
Tel. No. 554-5184
Fax No. 554-5163
TDD/TTY No. 554-5227

May 18, 2012

Planning Commission
Attn: Linda Avery
1660 Mission Street, 5th Floor
San Francisco, CA 94103

Dear Commissioners:

May 8, 2012, Supervisor Chiu introduced the following proposed legislation:

File No. 120475

Ordinance amending the San Francisco Planning Code by adding Section 249.69 to create the Chinese Hospital Special Use District for the properties at 835 and 845 Jackson Street (Assessor's Block No. 0192, Lot No. 041) to facilitate development of the Chinese Hospital Replacement Project; amending Sectional Maps ZN01, HT01, and SU01 of the San Francisco Zoning Map to reflect the Chinese Hospital Special Use District; and making findings, including environmental findings and findings of consistency with the General Plan and Planning Code Section 101.1.

The proposed ordinance is being transmitted pursuant to Planning Code Section 302(b) for public hearing and recommendation. The ordinance is pending before the Land Use & Economic Development Committee and will be scheduled for hearing upon receipt of your response.

Angela Calvillo, Clerk of the Board

A handwritten signature in cursive script that reads "Alisa Miller".

By: Alisa Miller, Committee Clerk
Land Use & Economic Development Committee

- c: John Rahaim, Director of Planning
- Scott Sanchez, Zoning Administrator
- Bill Wycko, Chief, Major Environmental Analysis
- AnMarie Rodgers, Legislative Affairs
- Monica Pereira, Environmental Planning
- Joy Navarrete, Environmental Planning

1 [Planning Code and Zoning Map - Chinese Hospital Special Use District]

2
3 **Ordinance amending the San Francisco Planning Code by adding Section 249.69 to**
4 **create the Chinese Hospital Special Use District for the properties at 835 and 845**
5 **Jackson Street (Assessor's Block No. 0192, Lot No. 041) to facilitate development of**
6 **the Chinese Hospital Replacement Project; amending Sectional Maps ZN01, HT01, and**
7 **SU01 of the San Francisco Zoning Map to reflect the Chinese Hospital Special Use**
8 **District; and making findings, including environmental findings and findings of**
9 **consistency with the General Plan and Planning Code Section 101.1.**

10 NOTE: Additions are *single-underline italics Times New Roman*;
11 deletions are *strike through italics Times New Roman*.
12 Board amendment additions are double-underlined;
Board amendment deletions are ~~strikethrough normal~~.

13 Be it ordained by the People of the City and County of San Francisco:

14 Section 1. Findings. The Board of Supervisors of the City and County of San Francisco
15 hereby finds and determines that:

16 (a) General Plan and Planning Code Findings.

17 (1) On _____, at a duly noticed public hearing, the Planning
18 Commission in Resolution No. _____ found that the proposed Planning Code
19 amendments contained in this ordinance were consistent with the City's General Plan, as
20 proposed to be amended, and with Planning Code Section 101.1(b). In addition, the Planning
21 Commission recommended that the Board of Supervisors adopt the proposed Planning Code
22 amendments. A copy of said Resolution is on file with the Clerk of the Board of Supervisors in
23 File No. _____ and is incorporated herein by reference. The Board finds that the
24 proposed Planning Code amendments contained in this ordinance are on balance consistent
25

1 with the City's General Plan and with Planning Code Section 101.1(b) for the reasons set forth
2 in said Resolution.

3 (2) Pursuant to Planning Code Section 302, the Board finds that the proposed
4 ordinance will serve the public necessity, convenience and welfare for the reasons set forth in
5 Planning Commission Resolution No. _____, which reasons are incorporated herein
6 by reference as though fully set forth.

7 (b) Environmental Findings. On _____, at a duly noticed
8 public hearing, the Planning Commission, reviewed and considered a Final Environmental
9 Impact Report (Final EIR) for the Chinese Hospital Replacement Project (Project) and found
10 that the contents of the Final EIR and the procedures through which the Final EIR was
11 prepared, publicized, and reviewed complied with the provisions of California Environmental
12 Quality Act (California Public Resources Code section 21000 *et seq.*) ("CEQA"), 14 California
13 Code of Regulations sections 15000 *et seq.* ("the CEQA Guidelines"), and Chapter 31 of the
14 San Francisco Administrative Code ("Chapter 31").

15 The Planning Commission found the Final EIR was adequate, accurate and objective,
16 reflected the independent analysis and judgment of the Department and the Commission, and
17 that the summary of comments and responses contained no significant revisions to the Draft
18 EIR, and certified the Final EIR for the Project in compliance with CEQA, the CEQA
19 Guidelines, and Chapter 31. Additionally, Planning Department staff prepared a Mitigation
20 Monitoring and Reporting Program ("MMRP") for the Project, which is attached to Planning
21 Commission Motion No. _____. The Final EIR, the MMRP and all supporting
22 documents and files have been made available to the public, the Planning Commission, and
23 this Board for review, consideration and action.

1 The Planning Commission Secretary is the custodian of records for the Project's
2 environmental review, located in the File for Case No. 2008.0762E, at 1650 Mission Street,
3 Fourth Floor, San Francisco, California.

4 On _____, at a duly noticed public hearing, in recommending
5 approval of the proposed Planning Code amendments and approving the Project, the
6 Planning Commission adopted approval findings under CEQA, including findings rejecting
7 alternatives and adopting a statement of overriding considerations, by Motion No. _____.
8 Additionally, the Planning Commission adopted the MMRP, which is attached to Planning
9 Commission Motion No. _____ and incorporated by reference. Planning Commission
10 Motion No. _____ and the MMRP are on file with the Clerk of the Board of
11 Supervisors in File No. _____ and are hereby incorporated herein by reference as
12 though fully set forth in this Ordinance. This Board finds that these Planning Code
13 amendments are within the scope of the Final EIR and the Planning Commission's adopted
14 CEQA findings and MMRP. This Board hereby affirms the Planning Commission's
15 certification of the Final EIR and adopts the CEQA approval findings set forth in Planning
16 Commission Motion No. _____ as its own and adopts the MMRP.

17 (c) General Findings.

18 (1) The properties commonly known as 835 and 845 Jackson Street on Block 0192,
19 Lot 041 are located on the south side of Jackson Street, between Powell and Stockton Streets
20 in the Chinatown area of the City and County of San Francisco. The properties are within the
21 Chinatown Residential Neighborhood Commercial District and within a 65-N Height and Bulk
22 District. Block 0192, Lot 041 currently contains three (3) structures: 835 Jackson Street
23 currently serves as a medical administration building for hospital administration and outpatient
24 healthcare services, 845 Jackson Street is the existing five-story hospital, and behind 835
25

1 Jackson Street is a three-story parking structure. No undeveloped space currently exists for
2 the development of a new hospital. A map showing the location of Block 0192, Lot 041 is on
3 file with the Clerk of the Board of Supervisors in File No. _____ and is
4 incorporated herein by reference.

5 (2) To provide for the future healthcare needs of Chinatown and the local
6 community and to comply with the seismic retrofit requirements for all acute care hospitals
7 imposed by the Office of Statewide Health Planning and Development ("OSHPD"), the
8 Chinese Hospital, which is a community-owned nonprofit organization, proposes to replace
9 the buildings located at 835 Jackson Street (the 1924-era original hospital building, now used
10 for administration and outpatient services and the related parking structure) with a new eight-
11 story hospital and convert the existing hospital at 845 Jackson Street to a medical center use
12 with outpatient clinic services. Without amendment, the Planning Code would not allow the
13 proposed development of a new hospital on the site, and the Chinatown Area Plan of the
14 General Plan would not permit the requisite height and design of the Chinese Hospital Project.

15 (3) This Chinese Hospital Special Use District is being established and conforming
16 amendments to the General Plan are being proposed in order to allow the sponsor to develop
17 a new Chinese Hospital on the subject site to the proposed bulk and height.

18 Section 2. The San Francisco Planning Code is hereby amended by adding Section
19 249.69, to read as follows:

20 SEC. 249.69 CHINESE HOSPITAL SPECIAL USE DISTRICT.

21 (a) Purposes. In order to facilitate the development of a new Chinese Hospital located at
22 835 and 845 Jackson Street, (Assessor's Block 0192, Lot 041), which development will insure the
23 retention and continuation of general acute health care services to local residents, the Chinese
24 Hospital Special Use District ("Chinese Hospital SUD") is established as shown on Sectional Map
25

1 SU01 of the Zoning Map of the City and County of San Francisco. The Chinese Hospital SUD consists
2 of Assessor's Block 0192, Lot 041.

3 (b) Controls. All provisions of the Planning Code currently applicable to the Chinatown
4 Residential Neighborhood Commercial District ("CRNC") shall apply to the Chinese Hospital SUD,
5 except as specifically provided in this Section 249.69. The following controls shall apply in the Chinese
6 Hospital SUD:

7 (1) Conditional Use Authorizations. In making determinations on applications for
8 conditional use authorizations under Section 303 of this Code, the Planning Commission shall consider
9 the purposes set forth in subsection (a) above, in addition to the criteria set forth in Section 303. In
10 addition to the conditionally permitted uses in the CRNC District, uses that exceed the use size
11 maximums set forth in Section 121.4 shall be permitted as a conditional use.

12 (2) Signs. In addition to any signs permitted in the CRNC District (including as provided in
13 Section 607.2), the following shall be permitted:

14 (A) One sign, which may be illuminated 24 hours per day, seven days per week, up to 28 feet
15 in width, with an area not to exceed 42 square feet, placed on top of a marquee that is no greater than
16 58 feet in width, projecting no more than 6 feet from the façade of the building and not exceeding
17 twenty feet in height at the principal entrance to the hospital; and

18 (B) One sign, which may be illuminated 24 hours per day, seven days per week, up to 12 feet
19 in width with an area not to exceed 12 square feet, placed on top of a marquee that is no greater than
20 14 feet in width, projecting no more than 6 feet from the façade of the building and not exceeding a
21 twenty feet in height at the emergency entrance to the hospital.

22 (3) Lot Size. In addition to the criteria of Section 303 of the Code and Section b(1) above,
23 and in lieu of the criteria in Section 121.3, the Planning Commission shall consider whether the
24
25

1 proposed use will serve the neighborhood, in whole or in significant part, when making determinations
2 on applications for conditional use authorizations under Section 121.3.

3 (4) Floor Area Ratio. The applicable floor area ratio for hospitals or medical centers shall
4 be 6.8:1.

5 (5) Open Space Requirements. For institutional developments exceeding 10,000 gross
6 square feet, the requirements of Section 135.1 shall not apply, provided that:

7 (A) Any such development provide one square foot of usable open space for every 130
8 square feet of gross floor area; and

9 (B) The design of the open space is approved by the Planning Commission.

10 (6) Streetscape and Pedestrian Improvements. The requirements of Section 138.1(c)(1)
11 shall not apply, provided that a landscape and street improvement plan for a project and/or any
12 adjacent street or alley space is approved by the Planning Commission.

13 (7) Maximum Street Frontages. The requirements of Section 145.3 governing street
14 frontages shall not apply.

15 (8) Hours of Operation. Hospitals and medical centers may operate 24 hours per day,
16 seven days per week.

17 Section 3. The San Francisco Planning Code is hereby amended by amending
18 Sectional Map ZN01 of the Zoning Map of the City and County of San Francisco, as follows:

19

Description of Property	Use Districts to be Superseded	Use Districts Hereby Approved
835 and 845 Jackson Street, Assessor's Block 0192, Lot 041	Chinatown Residential Neighborhood Commercial District	Chinese Hospital Special Use District

	("CRNC")	
--	----------	--

Section 4. The San Francisco Planning Code is hereby amended by amending Sectional Map HT01 of the Zoning Map of the City and County of San Francisco, as follows:

Description of Property	Height and Bulk District to be Superseded	Height and Bulk District Hereby Approved
835 and 845 Jackson Street, Assessor's Block 0192, Lot 041	65-N	110-G

Section 5. The San Francisco Planning Code is hereby amended by amending Sectional Map SU01 of the Zoning Map of the City and County of San Francisco, as follows:

Description of Property	Special Use District Hereby Approved
835 and 845 Jackson Street, Assessor's Block 0192, Lot 041	Chinese Hospital Special Use District

Section 6. Effective Date. This ordinance shall become effective 30 days from the date of passage.

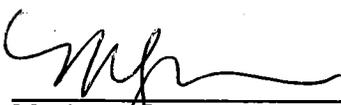
Section 7. In enacting this Ordinance, the Board intends to amend only those words, phrases, paragraphs, subsections, sections, articles, numbers, punctuation, charts, diagrams, or any other constituent part of the Planning Code that are explicitly shown in this legislation as additions, deletions, Board amendment additions, and Board amendment deletions in accordance with the "Note" that appears under the official title of the legislation.

APPROVED AS TO FORM:
DENNIS J. HERRERA, City Attorney

Supervisor Chiu
BOARD OF SUPERVISORS

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

By:



Marlena G. Byrne
Deputy City Attorney



SAN FRANCISCO PLANNING DEPARTMENT

Subject to: (Select only if applicable)

- | | |
|--|---|
| <input type="checkbox"/> Affordable Housing (Sec. 415) | <input checked="" type="checkbox"/> First Source Hiring (Admin. Code) |
| <input type="checkbox"/> Jobs Housing Linkage Program (Sec. 413) | <input type="checkbox"/> Child Care Requirement (Sec. 414) |
| <input type="checkbox"/> Downtown Park Fee (Sec. 412) | <input type="checkbox"/> Other |

1650 Mission St.
Suite 400
San Francisco,
CA 94103-2479

Reception:
415.558.6378

Fax:
415.558.6409

Planning
Information:
415.558.6377

Planning Commission Draft Motion Conditional Use Authorization

HEARING DATE: JULY 12, 2012

Date: July 5, 2012
Case No.: **2008.0762EMZC**
Project Address: **835-845 JACKSON STREET**
Zoning: Chinatown Residential Neighborhood Commercial District
65-N Height and Bulk District
Block/Lot: 0192/041
Project Sponsor: Linda Schumacher
Chinese Hospital Association
835-845 Jackson Street
San Francisco, CA 94133
Staff Contact: Rick Crawford – (415) 558-6358
rick.crawford@sfgov.org

ADOPTING FINDINGS RELATING TO THE APPROVAL OF CONDITIONAL USE AUTHORIZATION PURSUANT TO SECTION 303, 249, 254, 812.80 and 812.20 OF THE PLANNING CODE TO ALLOW CONSTRUCTION OF A HOSPITAL AND MEDICAL CENTER USE ON ALL FLOORS OF A BUILDING WITH A FLOOR AREA EXCEEDING 2,500 SQUARE FEET IN AREA AND 35 FEET IN HEIGHT WITHIN THE CRNC (CHINATOWN RESIDENTIAL NEIGHBORHOOD COMMERCIAL) DISTRICT AND A 65-N HEIGHT AND BULK DISTRICT.

PREAMBLE

On June 24, 2008, the Chinese Hospital Association (the "Project Sponsor") filed an Environmental Evaluation application with the Planning Department (the "Department") (Case File No. 2008.0762E) to demolish the 29,793 square-foot Medical Administration Building at 835 Jackson Street and the 15,000 square-foot Chinese Hospital Parking Garage located directly behind the Medical Administration Building, construct a new hospital building in their place, and remodel and refurbish the 43,368 square-foot Chinese Hospital at 845 Jackson Street (the "Project"). A Revised Environmental Evaluation application was subsequently submitted on September 24, 2009.

The Department determined that an Environmental Impact Report (EIR) was required and the Department printed and circulated a Notice of Preparation/Initial Study (NOP/IS) on May 18, 2011

announcing its intent to prepare and distribute an EIR. The Department accepted comments on the NOP/IS content through June 20, 2011. Subsequently, the Department published a Draft Environmental Impact Report (DEIR) on April 16, 2012. The Planning Commission held a public hearing to solicit testimony on the DEIR on May 17, 2012. The Department received written comments on the DEIR from April 17 to May 31, 2012. The Department published the Comments and Responses on June 28, 2012. The DEIR, together with the Comments and Responses constitute the Final Environmental Impact Report (FEIR).

On April 26, 2012 the Project Sponsor filed an application with the Planning Department for Conditional Use Authorization to allow development of a hospital and medical center use on all floors of a building with a floor area exceeding 2,500 square feet in area and 35 feet in height at 835-845 Jackson Street, Lot 041 within Assessor's Block 0192 (Project Site) within the CRNC (Chinatown Residential Neighborhood Commercial) Zoning District and a 65-N Height and Bulk District.

At the May 8, 2012 meeting of the San Francisco Board of Supervisors (the "Board"), Supervisor Chiu introduced amendments to the San Francisco Planning Code that would (1) add Section 249.69 to create the Chinese Hospital SUD and (2) amend the San Francisco Zoning Map Sectional Maps ZN01, HT01, and SU01 to show the Chinese Hospital Special Use District (SUD) and to reclassify the height and bulk limits on the property from 65-N to 110-G (together, the "Planning Code Amendments").

On May 8, 2012, Supervisor Chiu introduced a resolution before the Board urging the Commission to initiate and consider amendments to the General Plan concerning the Chinese Hospital SUD and the project that would (1) amend "Policy 1.2 Promote a building form that harmonizes with the scale of existing buildings and width of Chinatown's streets" within the Chinatown Area Plan to add the language, "other than construction within the Chinese Hospital Special Use District" to the second paragraph of the Policy and (2) amend "Map 1 - Generalized Height Plan" of the Chinatown Area Plan to reference a height limit of 110 feet for the property at 835-845 Jackson Street, Lot 041 of Assessor's Block 0192, (the "General Plan Amendments" and, together with the Planning Code Amendments, the "SUD Legislation"). On May 15, the Board approved the resolution urging the Commission to initiate and consider the General Plan Amendments (Board File No. 120480). On June 7, the Commission adopted a resolution of intention to initiate the General Plan Amendments, by Motion No. 18642.

On July 12, 2012, the San Francisco Planning Commission (the "Commission") certified the FEIR for the project. The FEIR identifies the following project-level and cumulative significant unavoidable environmental impacts: (1) demolition of the Medical Administration Building would result in significant and unavoidable historic architectural resources impacts on an individual historic resource (the Medical Administration Building) and on the NRHP/CRHR-eligible Chinatown historic district; (2) construction of the replacement hospital would result in a significant unavoidable historic architectural resources impact on the NRHP/CRHR-eligible Chinatown historic district; (3) demolition of the Medical Administration Building and construction of the replacement hospital would result in a cumulatively considerable contribution to significant adverse impacts on the NRHP/CRHR-eligible Chinatown historic district; and (4) construction of the project would generate substantial levels of PM_{2.5} and other toxic air contaminants, including diesel particulate matter, that could substantially affect sensitive receptors and this would be a significant and unavoidable air quality-related health risk impact. Mitigation measures

that are recommended for implementation by the Project Sponsor would reduce but not eliminate these impacts. On July 12, 2012, at a duly noticed public hearing, the Commission adopted approval findings under CEQA, including findings rejecting alternatives and adopting a statement of overriding considerations, (“CEQA Findings”) by Motion No. _____. Attached as Exhibit A to Motion No. _____ is the Mitigation Monitoring and Reporting Program (“MMRP”). Both the CEQA Findings and the MMRP are incorporated herein by reference as fully set forth.

On July 12, 2012, the Commission approved the Planning Code Amendments, by motion No. _____. On July 12, 2012, the Commission adopted and recommended that the Board approve the General Plan Amendments, by Motion No. _____.

On July 12, 2012, the Commission conducted a duly noticed public hearing at a regularly scheduled meeting on Conditional Use Application No. 2008.0762EMZC.

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

MOVED, that the Commission hereby authorizes the Conditional Use requested in Application No. 2008.0762EC, subject to the conditions contained in “EXHIBIT A” of this motion; and approves the open space and streetscape improvements and landscaping plan for the Project, based on the following findings:

FINDINGS

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

1. The above recitals are accurate and constitute findings of this Commission.
2. **Site Description and Present Use.** The Chinese Hospital campus currently consists of the Chinese Hospital at 845 Jackson Street, built in 1979; the Medical Administration Building at 835 Jackson Street (the original Chinese Hospital, built in 1924); and the Chinese Hospital Parking Garage, located directly behind the 1924 Medical Administration Building. The project is located on the south side of Jackson Street between Stockton and Powell Streets and is occupied by the 43,368 square foot, five-story Chinese Hospital, the 29,793 square foot, five-story, Medical Administration Building and the 15,000 square foot, two-story, Chinese Hospital Parking Garage. The project site is approximately 22,516 square feet in area.
3. **Surrounding Properties and Neighborhood.** The project site is located in the Chinatown neighborhood. The area surrounding the project site features a mix of residential, retail, restaurant, educational, and institutional uses. The Ping Yuen Housing complex is located nearby, as are the Chinatown Public Library and the Gordon Lau Public Elementary School. The scale of development in the project vicinity varies widely, with building heights ranging from one to seven stories.

4. **Project Description.** The Project Sponsor proposes to demolish the existing Medical Administration Building at 835 Jackson Street and the parking garage, construct a new hospital building in their place, and remodel and refurbish the existing hospital building. The proposed new hospital will be an acute care hospital with 54 acute care beds and a new skilled nursing facility with 22 beds. The new hospital building would be seven-stories over a basement and approximately 90.5 feet tall (excluding a approximately 30-foot tall mechanical penthouse) with a floor area of approximately 101,545 square feet. As part of the project, the Project Sponsor would create a landscaped usable openspace on Jackson Street that would wrap around the replacement hospital and include a portion of James Alley. The Chinese Hospital replacement project was identified in the most recent Institutional Master Plan for Chinese Hospital that was accepted by the Planning Commission on May 19, 2011.
5. **Public Comment.** In addition to the comments regarding the Environmental Impact Report, the Department has received nine letters in favor of the project from residents of the area and no communications in opposition.
6. **Planning Code Compliance:** The Commission finds that the project is consistent with the relevant provisions of the Planning Code in the following manner:

- A. **Floor Area Ratio.** Planning Code Section 124 establishes a basic floor area ratio of 1.0:1 for the CRNC District. Upon enactment of the SUD Legislation, the applicable floor area ratio for hospitals or medical centers in the Chinese Hospital SUD will be 6.8:1 pursuant to Planning Code Section 249.69(b)(4).

Based on a site area of approximately 22,516 square feet, a 6.8:1 floor area ratio would allow approximately 153,108-gsf. The project contains approximately 144,913-gsf, which results in a floor area ratio of less than 6.8:1.

- B. **Open Space Requirements.** Planning Code Section 135.1 requires open space be provided at a ratio of one square foot of open space for each 50 square feet of building area when construction of additional floor area exceeds 10,000 square feet. Upon enactment of the SUD Legislation, Planning Code Section 249.69 will provide that institutional developments in the Chinese Hospital SUD exceeding 10,000 gross square feet are not subject to the requirements of Planning Code Section 135.1, provided that: (i) any such development provide one square foot of usable open space for every 130 square feet of gross floor area and (ii) the design of the open space is approved by the Commission.

The project would be an institutional development of approximately 144,913-gsf, which would require at least 1,115 square feet of usable open space. The project would provide approximately 890 square feet of landscaped seating along the Jackson Street frontage as well as approximately 687 square feet of landscaped open space along the portion of James Alley currently owned by the Project Sponsor, for a total of approximately 1,547 square feet of usable open space, all of which would serve as an exterior gathering place. The Project Sponsor is also in discussions to purchase or obtain easements rights over

the portion of James Alley not currently owned by the Project Sponsor. The Project Sponsor intends to expand the landscaping and hardscaping improvements over the other portions of James Alley and possibly create an open landscape seating area or other usable open space for the public to enjoy.

- C. **Freight Loading Spaces.** Planning Code Section 152 provides that hospital and medical center uses between 100,001 and 200,000 square feet must have at least one off-street freight loading space.

The project would have 144,913 square feet of hospital and medical center use and would continue to use the one existing off-street freight loading space at the rear of the Project Site, off Stone Street behind the existing building.

In addition to freight loading, the project provides for ambulance access to the hospital's Emergency Department. The Emergency entrance to the hospital will remain on Jackson Street but will move from the current location in front of the existing hospital to the northeast corner of the new hospital at James Alley. The Hospital will request an extended white zone at the curb to provide for ambulances.

- D. **Shower Facilities and Lockers.** Planning Code Section 155.3(c) requires four showers and eight clothes lockers for new buildings and buildings with major renovations where the gross square footage of the floor area exceeds 50,000 square feet.

The project would have 144,913 square feet of hospital and medical center use and would include four showers and eight clothes lockers, and thus would comply with Planning Code Section 155.3(c).

- E. **Bicycle Parking.** Planning Code Section 155.4(d) requires 12 bicycle parking spaces for new buildings and buildings with major renovations where the gross square footage of the floor area exceeds 50,000 square feet.

The project would have 144,913 square feet of hospital and medical center use and would include 12 bicycle parking spaces.

- F. **Off-Street Parking.** Planning Code Section 161(c) states that no off-street parking shall be required for non-residential uses in the Chinatown Residential Neighborhood Commercial District.

The project would demolish the existing 41-stall (78 spaces with valet parking) Chinese Hospital Parking Garage and will not provide any off-street parking as part of the project. Chinese Hospital physicians, staff, patients and visitors would park at existing public parking garages in Chinatown and North Beach, such as the Powell Street Parking Garage at 1140 Powell Street, Portsmouth Square Garage at 733 Kearny Street, the Chinatown Parking Garage at 728 Pacific Avenue, and the Royal Pacific Inn at 661 Broadway, all less than a 10-minute walk from Chinese Hospital.

- G. **Height Exceeding 35 Feet in Chinatown.** Planning Code Section 254 requires conditional use authorization for construction of a building exceeding 35 feet in the China Town Residential Neighborhood Commercial district.

The proposed new hospital building would be approximately 90.5 feet tall (excluding an approximately 30-foot tall mechanical penthouse). Similar to other buildings in the Chinatown neighborhood, the project would incorporate the horizontal design features of the existing structure. The height of the new project would be similar to that of the retained structure. Due to the unique massing and volume requirements for medical facilities, almost all hospital buildings require special considerations for bulk, and the proposed height and bulk are consistent with precedent from other hospital approvals.

- H. **Institutional Master Plan.** Planning Code Section 304.5, states that each medical institution in San Francisco shall have on file with the Planning Department a current institutional master plan (IMP) describing the existing and anticipated future development of that institution. IMPs for medical institutions shall be reviewed by a health planner overseen by the Department of Public Health to comment on the institution's long-range development goals and their relationship to citywide health care needs. The IMP must be updated every ten years.

The IMP for Chinese Hospital was reviewed by the Health Planner supervised by the Department of Public Health and accepted by the Planning Commission at their meeting of May 19, 2011. The project was identified in the IMP.

- I. **Signage.** Planning Code Section 607.2 regulates signs in mixed-use districts. Upon enactment of the SUD Legislation, Planning Code Section 249.69 will provide that, in the Chinese Hospital SUD, in addition to any signs permitted in the CRNC District (including as provided in Planning Code Section 607.2), the following shall be permitted: (i) one sign, which may be illuminated 24 hours per day, seven days per week, up to 28 feet in width, with an area not to exceed 42 square feet, placed on top of a marquee that is no greater than 58 feet in width, projecting no more than 6 feet from the façade of the building and not exceeding twenty feet in height at the principal entrance to the hospital; and (ii) one sign, which may be illuminated 24 hours per day, seven days per week, up to 12 feet in width with an area not to exceed 12 square feet, placed on top of a marquee that is no greater than 14 feet in width, projecting no more than 6 feet from the façade of the building and not exceeding twenty feet in height at the emergency entrance to the hospital.

The project would include the following proposed signs: (i) one sign to mark the main entrance to the hospital of approximately 28 feet in width, with an area of approximately 42 square feet, on a marquee of approximately 58 feet in width, projecting approximately six feet from the façade; and (ii) one sign to mark the emergency entrance to the hospital of approximately 12 feet in width, with an area of approximately 12 square feet, on a marquee of approximately 14 feet in width, projecting approximately 6 feet from the façade.

- J. **Use Size.** Planning Code Sections 121.4 and 812.20 requires Conditional Use authorization for uses that exceed 2,500 square feet in area and prohibits uses that exceed 4,000 square feet in area. Upon enactment of the SUD Legislation, the maximum floor area limits of Planning Code Section 812.20 will not apply to developments in the Chinese Hospital SUD, and uses that exceed the use size maximum set forth in Planning Code Section 121.4 will be permitted as a conditional use.

The new hospital building and the refurbished Medical Administration and Outpatient Center would have approximately 144,913 square feet of hospital and medical center and related uses.

- K. **Hours of Operation.** Planning Code Section 812.27 principally permits hours of operation between 6 a.m. and 11:00 p.m. and permits hours between 11:00 p.m. and 2:00 a.m. with Conditional Use authorization. Upon enactment of the SUD Legislation, the hours of operation hospitals and medical centers would have no limit.

Chinese Hospital is now and would continue to operate 24 hours per day and seven days per week.

- L. **Hospital and Medical Center Use.** Planning Code Section 812.80 provides that a Conditional Use Authorization is required for Hospital and Medical Center uses on any floor of a building in the CRNC District, as defined by Planning Code Section 890.44. Upon enactment of the SUD Legislation, Planning Code Section 249.69 will require the Commission, when reviewing applications for conditional use in the Chinese Hospital SUD, to consider whether the conditional use facilitates the development of a new Chinese Hospital located at 835 and 845 Jackson Street, which development will ensure the retention and continuation of general acute health care services to local residents.

Planning Code Section 890.44 defines hospital and medical center as a public or private institutional use, which provides medical facilities for inpatient care, medical offices, clinics, and laboratories. The project would be a hospital and medical center within the definition of hospital and medical center.

The conditional use authorizations described herein are necessary for the development of the project, which would ensure the retention and continuation of general acute health care services to Chinatown residents. The project is necessary to comply with SB 1953 and would allow the Chinese Hospital to continue to operate in a statutorily compliant and seismically safe manner. Without the project, there would not be adequate medical care in Chinatown, which would be a detriment to Chinatown residents.

7. **Planning Code Section 303** establishes criteria for the Planning Commission to consider when reviewing applications for Conditional Use approval. On balance, the project does comply with said criteria in that:
- A. The proposed new uses and building, at the size and intensity contemplated and at the proposed location, will provide a development that is necessary or desirable, and compatible with, the neighborhood or the community.

Since 1899, the Chinese Hospital Association has been devoted to providing healthcare services to generations of Chinatown residents and it has operated a hospital at the Project Site since 1924. The use of the project is compatible with the Chinatown neighborhood and community because it is not a new use, but rather a continuation of an existing use at the same location. .

The project would provide much needed healthcare services to the Chinatown community. By providing these community services to the Chinatown neighborhood and community residents, the project would preserve the Chinatown community and thereby support, protect, and encourage the continuity of the existing historic Chinatown neighborhood and the aesthetic features of Chinatown. A key aspect of the project is the addition of a 22-bed skilled nursing facility, which would improve the transition of patients from the acute care setting and allow Chinatown residents to remain close to their homes and loved ones while they recover from inpatient procedures. The project is also necessary to comply with SB 1953 and would allow the Chinese Hospital to continue to operate in a statutorily compliant and seismically safe manner. Without the project, there would not be adequate medical care in Chinatown, which would be a detriment to Chinatown residents.

In addition, the project is desirable for the neighborhood because it would increase employment opportunities for neighborhood residents both during and after development. Construction of the project would create numerous construction related jobs and, upon its completion, there would be more jobs for neighborhood residents to staff the expanded hospital. Moreover, through the continued provision of important medical care to Chinatown residents, the project would develop and foster a rich community environmental that would produce economic growth and stability in Chinatown.

- B. The proposed project will not be detrimental to the health, safety, convenience or general welfare of persons residing or working in the vicinity. There are no features of the project that could be detrimental to the health, safety or convenience of those residing or working the area, in that:
- i. Nature of proposed site, including its size and shape, and the proposed size, shape and arrangement of structures;

The scale of development in the project vicinity varies widely, with building heights ranging from one to 13 stories. The 7-story replacement hospital would not be inconsistent with the scale of these larger buildings. Steps would be taken to ensure that the façade and exterior of the project is consistent with neighborhood design and architectural features while still enabling the project to provide modern healthcare services at the highest level. Due to the unique massing and volume requirements for medical facilities, almost all hospital buildings require special considerations for bulk, and the proposed height and bulk are consistent with precedent from other hospital approvals.

- ii. The accessibility and traffic patterns for persons and vehicles, the type and volume of such traffic, and the adequacy of proposed off-street parking and loading;

Demolition of the existing Medical Administration Building and the parking garage and construction of the project would have a minimal impact on traffic patterns for persons and vehicles. Vehicular traffic on Jackson Street would not be substantially disrupted and access to important neighborhood features, such as the Chinese Hospital, would remain open throughout the project. Renovation of the existing hospital building would be mostly limited to the interior. The project would be well served by public transit, as there are several Muni lines in the immediate vicinity of the project. The Project Site is also near the Powell-Hyde and Powell-Mason cable car lines providing access to downtown BART stations. The new Chinatown Subway Station is located just over a block from the Project Site. Upon completion, the project would provide care to residents of the neighborhood and many of the visitors and patients would come from within walking distance. Overall, traffic patterns upon completion of the project would be substantially similar to current traffic patterns.

- iii. The safeguards afforded to prevent noxious or offensive emissions such as noise, glare, dust and odor;

The project would not create any noxious or offensive emissions. During demolition and construction, appropriate preventative measures would be taken to control noise, glare, dust, odor, and other noxious or offensive emissions. Upon completion, the project would provide the same services that are currently being provided at the Chinese Hospital and there would not be any new noxious or offensive emissions. Renovation work on the existing hospital building would be mostly limited to the interior of the building and would not produce any noxious or offensive emissions. Throughout the project, all construction, demolition, alterations, and uses will comply with all Building Code requirements with respect to noxious or offensive emissions such as noise, glare, dust, or odor, including the appropriate ventilation and other system requirements of the Building Code intended to address noxious or offensive emissions.

- iv. Treatment given, as appropriate, to such aspects as landscaping, screening, open spaces, parking and loading areas, service areas, lighting and signs;

The exterior of the project would perpetuate, enhance, and expand the existing tradition of providing an exterior gathering place. Currently, there is an open space in front of the Chinese Hospital on Jackson Street, which is used by hospital visitors as a gathering and meeting place and provides a rest point for Chinatown residents walking up Jackson Street. The project proposes to expand this open space and would provide an approximately 890 sq. ft. landscaped seating area along the Jackson Street frontage created by a setback of 17 feet from the property line along Jackson Street at the ground and first floors, which would be landscaped and hardscaped. This area would wrap around the side of the building along James Alley, where the entire building would also be set back 5 feet from the east property line and the portion of James Alley currently owned by the Project Sponsor would be landscaped open space. The Project Sponsor is also in discussions to purchase and/or obtain easements over the portion of James Alley not currently owned by the Project Sponsor, upon which Project Sponsor intends to expand the landscaping improvements and possibly create an expanded landscaped open space seating area or other landscaped open space within James Alley for the public to enjoy. The project would have a new

marquee that clearly indicates the entrance to the hospital as well as signage over the emergency entrance. This feature is critical for providing emergency patients care as quickly as possible and such signage is required for an acute care hospital.

- C. That the use as proposed will comply with the applicable provisions of the Planning Code and will not adversely affect the General Plan.

The General Plan, including the Chinatown Area Plan would be the guiding policy document for the project. The Chinese Hospital SUD would allow for the project in the CRNC District, and the project would comply with all applicable provisions of the Planning Code and the policies of the Chinatown Area Plan as modified by the proposed legislation. The project would be a continuation of an existing use, and would not introduce any new use to the Chinatown community and would not adversely affect the General Plan.

According to Planning Code Section 812.1, CRNC District controls are designed to “preserve neighborhood-serving uses and protect the residential livability of the area... Institutional uses are also encouraged.” By providing vital services to the Chinatown area and community residents, the project would preserve the community and support, protect, and encourage the continuity of the existing historic Chinatown neighborhood and the aesthetic features of Chinatown. Without the project, there would be significantly less healthcare available to Chinatown residents, which would negatively affect the livability and overall vitality of the neighborhood.

The project complies with all relevant requirements and standards of the Planning Code and is consistent with objectives and policies of the General Plan as detailed below.

- D. That the use as proposed would provide development that is in conformity with the purpose of the applicable Neighborhood Commercial District.

The project is not located in a Neighborhood Commercial district. The use is a neighborhood serving hospital and medical center that is consistent with the stated purposes of CRNC District and the Chinese Hospital SUD.

8. **General Plan Compliance.** The Project is, on balance, consistent with the following Objectives and Policies of the General Plan:

COMMUNITY SAFETY ELEMENT

Objectives and Policies

OBJECTIVE 1:

REDUCE STRUCTURAL AND NON-STRUCTURAL HAZARDS TO LIFE SAFETY AND MINIMIZE PROPERTY DAMAGE RESULTING FROM FUTURE DISASTERS.

Policy 1.3:

Assure that new construction meets current structural and life safety standards.

Policy 1.25:

Prepare for medical emergencies and pandemics.

The project would create a new, seismically secure hospital that would comply with current laws and regulations, such as SB 1953 (the Alfred E. Alquist Hospital Seismic Safety Act of 1983) and Office of Statewide Health Planning and Development (OSHPD) requirements. The project would increase the availability of healthcare services and of medical professionals in Chinatown, and would better prepare the Chinatown neighborhood for emergencies and pandemics.

OBJECTIVE 2:

BE PREPARED FOR THE ONSET OF DISASTER BY PROVIDING PUBLIC EDUCATION AND TRAINING ABOUT EARTHQUAKES AND OTHER NATURAL AND MAN-MADE DISASTERS, BY READYING CITY INFRASTRUCTURE, AND BY ENSURING THE NECESSARY COORDINATION IS IN PLACE FOR A READY RESPONSE.

Policy 2.5:

Maintain a comprehensive, current Emergency Response Plan, in compliance with applicable state and federal regulations, to guide the response to disasters.

Policy 2.17:

Ensure the City's plan for medical response is coordinated with its privately owned hospitals.

The project would bring the Chinese Hospital into compliance with applicable seismic requirements and help ensure that the Chinese Hospital continues to operate at full capacity in the event of an emergency. The Chinese Hospital helps provide medical care and is part of the City's medical response in the event of a disaster.

URBAN DESIGN ELEMENT

Objectives and Policies

OBJECTIVE 1:

EMPHASIS OF THE CHARACTERISTIC PATTERN WHICH GIVES TO THE CITY AND ITS NEIGHBORHOODS AN IMAGE, A SENSE OF PURPOSE, AND A MEANS OF ORIENTATION.

Policy 1.3:

Recognize that buildings, when seen together, produce a total effect that characterizes the city and its districts.

Policy 1.5:

Emphasize the special nature of each district through distinctive landscaping and other features.

The project would include landscaping and street furniture that relate to the cultural character of the neighborhood. The theme of the plaza on Jefferson Street, and a mural proposed along Stone Street will include features complimenting the cultural heritage of Chinatown. The Chinese Hospital Association would also create a variety of features in the new building that would pay tribute to the historical relevance of the Medical Administration Building, such as photos, plaques, and explanations of the history of the Project Site.

OBJECTIVE 2:

CONSERVATION OF RESOURCES WHICH PROVIDE A SENSE OF NATURE, CONTINUITY WITH THE PAST, AND FREEDOM FROM OVERCROWDING.

Policy 2.6:

Respect the character of older development nearby in the design of new buildings.

Policy 2.8:

Maintain a strong presumption against the giving up of street areas for private ownership or use, or for construction of public buildings.

The project would be consistent with and respect the character of the architectural and historical context of the Chinatown neighborhood and surrounding buildings. Due to the unique massing and volume requirements for medical facilities, almost all hospital buildings require special considerations for bulk, and the proposed height and bulk are consistent with precedent from other hospital approvals. No street areas would be given up for private ownership.

OBJECTIVE 3:

MODERATION OF MAJOR NEW DEVELOPMENT TO COMPLEMENT THE CITY PATTERN, THE RESOURCES TO BE CONSERVED, AND THE NEIGHBORHOOD ENVIRONMENT.

Policy 3.1:

Promote harmony in the visual relationships and transitions between new and older buildings.

Policy 3.2:

Avoid extreme contrasts in color, shape and other characteristics which will cause new buildings to stand out in excess of their public importance.

Policy 3.4:

Promote building forms that will respect and improve the integrity of open spaces and other public areas.

Policy 3.5:

Relate the height of buildings to important attributes of the city pattern and to the height and character of existing development.

Policy 3.9:

Encourage a continuing awareness of the long-term effects of growth upon the physical form of the city.

The design of the project would respect the architectural context of the surrounding buildings. Similar to other buildings in the Chinatown neighborhood, the project would incorporate the horizontal design features of the existing structure. The new hospital would blend in with surrounding buildings and create a new open space along the Jackson Street frontage. The height of the new project would be similar to that of the retained structure and both buildings are compatible with the existing scale of the Chinatown neighborhood and reflect the importance of the Chinese Hospital to the community.

OBJECTIVE 4:

IMPROVEMENT OF THE NEIGHBORHOOD ENVIRONMENT TO INCREASE PERSONAL SAFETY, COMFORT, PRIDE AND OPPORTUNITY.

Policy 4.6:

Emphasize the importance of local centers providing commercial and government services.

Policy 4.12:

Install, promote, and maintain landscaping in public and private areas.

Policy 4.13:

Improve pedestrian areas by providing human scale and interest.

The Chinese Hospital is a local center providing healthcare services to Chinatown residents. The new project would create an approximately 890 square foot landscaped seating area along Jackson Street that would provide an important rest point and open space for Chinatown residents. These landscaping and open space improvements would also wrap around and continue along James Alley adjacent to the Project Site.

CHINATOWN AREA PLAN

Objectives and Policies

OBJECTIVE 1:

PRESERVE THE DISTINCTIVE URBAN CHARACTER, PHYSICAL ENVIRONMENT AND CULTURAL HERITAGE OF CHINATOWN.

Policy 1.2:

Promote a building form that harmonizes with the scale of existing buildings and width of Chinatown's streets.

Policy 1.4:

Protect the historic and aesthetic resources of Chinatown.

By providing healthcare services to the Chinatown area and community residents, the project would preserve the Chinatown community and thereby protect the existing historic and aesthetic resources of Chinatown. The project would also provide additional employment and business opportunities for Chinatown residents, which would further protect the character of the neighborhood. The project would preserve the buildings' aesthetic contributions to Chinatown.

OBJECTIVE 2:

RETAIN AND REINFORCE CHINATOWN'S MUTUALLY SUPPORTIVE FUNCTIONS AS NEIGHBORHOOD, CAPITAL CITY AND VISITOR ATTRACTION.

The project would allow the Chinese Hospital to continue operating at a high level and providing valuable healthcare services for Chinatown residents, which would preserve the urban role of Chinatown as a residential neighborhood. The project would also provide additional jobs that would support Chinatown's function as a capital city.

OBJECTIVE 4:

PRESERVE THE URBAN ROLE OF CHINATOWN AS A RESIDENTIAL NEIGHBORHOOD.

Policy 4.1:

Protect and enhance neighborhood-serving character of commercial uses in predominantly residential areas.

Policy 4.2:

Control proliferation of uses that tend to crowd out the needed neighborhood services.

Policy 4.4:

Expand open space opportunities.

The project would preserve the urban role of Chinatown as a residential neighborhood by preserving and improving healthcare services for residents of the Chinatown neighborhood. By providing healthcare services to the Chinatown area and community residents, the Chinese Hospital would protect and enhance the neighborhood serving character of Chinatown. Moreover, hospital and medical center use is an important neighborhood service that would complement and not crowd out other neighborhood services. The project would also create new open space on Jackson Street and James Alley.

OBJECTIVE 6:

RETAIN CHINATOWN'S ROLE AS A CAPITAL CITY.

Policy 6.1:

Provide incentives for location and expansion of institutions and cultural facilities.

The project would allow for the expansion of the Chinese Hospital, which has been a Chinatown institution since 1924. The project would also provide healthcare services for the Chinatown community, providing incentives for businesses to locate and expand in Chinatown.

9. **Planning Code Section 101.1(b)** establishes eight priority-planning policies and requires review of permits for consistency with said policies. On balance, the project does comply with said policies in that:

- A. That existing neighborhood-serving retail uses be preserved and enhanced and future opportunities for resident employment in and ownership of such businesses be enhanced.

The project would not cause the reduction or loss of any neighborhood-serving retail use. While the project is under construction, there would be opportunities for local residents and businesses to perform the work and provide other services related to the project. Upon completion of the project, it would provide employment opportunities for residents of the Chinatown community. The project would also provide ancillary retail, employment, and ownership opportunities by helping to preserve and maintain the Chinatown neighborhood through the provision of much-needed and important healthcare services.

- B. That existing housing and neighborhood character be conserved and protected in order to preserve the cultural and economic diversity of our neighborhoods.

The project would have no effect on existing housing. The project would preserve the Chinatown community, thereby conserve, and protect the existing cultural and economic diversity of the Chinatown neighborhood by providing healthcare services to the Chinatown area and community residents. Healthcare is crucial to the long-term stability and prosperity of any neighborhood and this is especially true of Chinatown, which contains both residential and commercial uses. Moreover, the project would not introduce any new use to Chinatown, the hospital and medical center use has co-existed with residential, commercial, educational, and religious uses in Chinatown for over 100 years.

- C. That the City's supply of affordable housing be preserved and enhanced,

There is not any housing on the site and the project would not reduce the amount of affordable housing in the Chinatown neighborhood.

- D. That commuter traffic not impede MUNI transit service or overburden our streets or neighborhood parking.

The Project Site is accessed via Stockton and Powell Streets, which are important transportation corridors. The project would be well served by public transit, as there are several Muni lines in the immediate vicinity of the project. The Powell-Hyde and Powell-Mason cable car lines are also a short walk from the project and provide access to downtown BART stations. Upon completion, the project would provide care primarily to residents of the neighborhood and many of the visitors and patient family members would come from within walking distance. Overall, traffic patterns upon completion of the project would be substantially similar to current traffic patterns.

- E. That a diverse economic base be maintained by protecting our industrial and service sectors from displacement due to commercial office development, and that future opportunities for resident employment and ownership in these sectors be enhanced.

The project would not displace any industrial or service sectors. Demolition of the Medical Administration Building and the parking garage and construction of the project would provide extensive economic opportunities for Chinatown residents. The Chinese Hospital would ultimately employ more people than were employed before the alterations, which would provide new opportunities for resident employment. In addition, by providing healthcare services to the Chinatown area and community residents, the project would preserve the Chinatown community and thereby enhance future employment and ownership opportunities for residents of the Chinatown neighborhood. Healthcare is crucial to the long-term stability and prosperity of any neighborhood and this is especially true of Chinatown, which contains both residential and commercial uses. Without the project, it is unclear what healthcare services would be available in Chinatown and the future prospects of the neighborhood could decline.

- F. That the City achieve the greatest possible preparedness to protect against injury and loss of life in an earthquake.

The project would have a significant positive impact on the preparedness of the Chinatown neighborhood in the event of an earthquake. One of the main purposes of the project is to improve the seismic safety of the hospital and the project would be fully compliant with all laws regarding seismic safety. In the event of an earthquake, the Chinese Hospital would provide valuable, timely, and critical aid that would protect against injury and loss of life.

- G. That landmarks and historic buildings be preserved.

Although the 1924 Medical Administration Building, which would be demolished under the project, is not a designated historic landmark, it is a historic resource, eligible for listing under the California Register of Historic Resources both individually and as a contributor to a potential historic district. Demolition this building is necessary to construct the project and bring the Chinese Hospital into compliance with state structural performance guidelines. The Chinese Hospital Association would create a variety of features in the new building that would pay tribute to the historical relevance of the Medical Administration Building, such as photos, plaques, and explanations of the history of the Project Site. Moreover, the project would provide much needed healthcare services to the Chinatown community. By providing these community services to Chinatown and its residents, the project would foster the preservation of the Chinatown neighborhood community, and thereby support and encourage the continuity of the existing Chinatown neighborhood and its features.

- H. That our parks and open space and their access to sunlight and vistas be protected from development.

The exterior of the project would perpetuate, enhance, and expand the existing tradition of providing an exterior gathering place. Currently, there is a small open space area in the front setback area of the

Chinese Hospital on Jackson Street, which is used by hospital visitors as a gathering and meeting place and provides a rest point for Chinatown residents. The project proposes to expand this open space and would provide an approximately 890 square foot landscaped seating area along the Jackson Street frontage created by a setback of 17 feet from the property line along Jackson Street at the ground and first floors, which would be landscaped and hardscaped. This area would wrap around the side of the building along James Alley, where the entire building would also be set back 5 feet from the east property line. The Project Sponsor also is in discussions to purchase and/or obtain easement rights over the other half of James Alley, which Project Sponsor currently does not own, upon which Project Sponsor intends to expand the landscaping and open space improvements along James Alley and possibly create a landscaped open seating area or other usable open space within James Alley for the public to enjoy. Overall, the project would maintain and improve the existing open space on the Project Site.

10. The Project is consistent with and would promote the general and specific purposes of the Code provided under Section 101.1(b) in that, as designed, the Project would contribute to the character and stability of the neighborhood and would constitute a beneficial development.
11. The Commission hereby finds that approval of the Conditional Use authorization would promote the health, safety, and welfare of the City.
12. Environmental Findings. The Commission hereby adopts and incorporates by reference as though fully set forth herein the CEQA Findings, including the findings rejecting alternatives and the statement of overriding considerations, found in Motion No. ____ and the MMRP attached thereto as Exhibit A.

DECISION

That based upon the Record, the submissions by the Applicant, the staff of the Department and other interested parties, the oral testimony presented to this Commission at the public hearings, and all other written materials submitted by all parties, the Commission hereby **APPROVES Conditional Use Application No. 2008.0762EMZC** subject to the following conditions attached hereto as "EXHIBIT A" in general conformance with plans on file, received on June 26, 2012, and stamped "EXHIBIT B", which is incorporated herein by reference as though fully set forth.

APPEAL AND EFFECTIVE DATE OF MOTION: Any aggrieved person may appeal this Conditional Use Authorization to the Board of Supervisors within thirty (30) days after the date of this Motion No. XXXXX. The effective date of this Motion shall be the date of this Motion if not appealed (After the 30-day period has expired) OR the date of the decision of the Board of Supervisors if appealed to the Board of Supervisors. For further information, please contact the Board of Supervisors at (415) 554-5184, City Hall, Room 244, 1 Dr. Carlton B. Goodlett Place, San Francisco, CA 94102.

I hereby certify that the Planning Commission ADOPTED the foregoing Motion on July 12, 2012.

Linda D. Avery
Commission Secretary

AYES:

NAYS:

ABSENT:

ADOPTED: July 12, 2012

EXHIBIT A

AUTHORIZATION

This authorization is for a conditional use to allow demolition of the Chinese Hospital Medical Administration Building at 835 Jackson Street and the Chinese Hospital Parking Garage located directly behind the Medical Administration Building, and construction of a new hospital building, seven-stories over a basement and approximately 90.5 feet tall (excluding an approximately 30 foot tall mechanical penthouse) with a floor area of approximately 101,545 square feet, in their place, and remodel and refurbish the 43,368 square-foot Chinese Hospital located at 835-845 Jackson Street, Lot 041 in Assessor's Block 0192, pursuant to Planning Code Section(s) 303, 249, 254, 812.80 and 812.20 within the Chinatown Residential Neighborhood Commercial District and a 65-N Height and Bulk District; in general conformance with plans, received on June 26, 2012, and stamped "EXHIBIT B" included in the docket for Case No. 2008.0762EMZC and subject to conditions of approval reviewed and approved by the Commission on July 12, 2012 under Motion No XXXXXX. This authorization and the conditions contained herein run with the property and not with a particular Project Sponsor, business, or operator.

RECORDATION OF CONDITIONS OF APPROVAL

Prior to the issuance of the building permit or commencement of use for the Project, the Zoning Administrator shall approve and order the recordation of a Notice in the Official Records of the Recorder of the City and County of San Francisco for the subject property. This Notice shall state that the project is subject to the conditions of approval contained herein and reviewed and approved by the Planning Commission on July 12, 2012 under Motion No XXXXXX.

PRINTING OF CONDITIONS OF APPROVAL ON PLANS

The conditions of approval under the 'Exhibit A' of this Planning Commission Motion No. XXXXXX shall be reproduced on the Index Sheet of construction plans submitted with the Site or Building permit application for the Project. The Index Sheet of the construction plans shall reference to the Conditional Use authorization and any subsequent amendments or modifications.

SEVERABILITY

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

CHANGES AND MODIFICATIONS

Changes to the approved plans may be approved administratively by the Zoning Administrator. Significant changes and modifications of conditions shall require Planning Commission approval of a new Conditional Use authorization.

Conditions of Approval, Compliance, Monitoring, and Reporting

CONDITIONS TO THE EFFECTIVENESS OF THIS APPROVAL

1. **General Plan Amendments.** It shall be a condition precedent to the effectiveness of this approval that the General Plan is amended (1) by amending "Policy 1.2 Promote a building form that harmonizes with the scale of existing buildings and width of Chinatown's streets" within the Chinatown Area Plan to add the language, "other than construction within the Chinese Hospital Special Use District" to the second paragraph of the Policy and (2) by amending "Map 1 - Generalized Height Plan" of the Chinatown Area Plan to reference a height limit of 110 feet for the property at 835-845 Jackson Street, Block 0192, Lot 041. This approval shall not be effective until such an amendments have been approved by the Board of Supervisors, have become effective and any appeal or referendum period has run, or if appealed, the amendments have been upheld.
2. **Planning Code Amendments.** It shall be a condition precedent to the effectiveness of this approval that the San Francisco Planning Code is amended to by 1) adding Section 249.69 to the Planning Code to create the Chinese Hospital Special Use District and (2) amending the San Francisco Zoning Map Sectional Maps ZN01, HT01, and SU01 to show the Chinese Hospital Special Use District and to reflect a change in height and bulk classification from 65-N to 110-G. This approval shall not be effective until such an amendments have been approved by the Board of Supervisors, have become effective and any appeal or referendum periods have run, or if appealed, the amendments have been upheld.

PERFORMANCE

3. **Validity and Expiration for Rezoning and Text Map Amendment Applications.** The authorization and right vested by virtue of this action is valid for three years from the effective date of the Motion. The construction of the approved Project shall commence within three (3) years from the date that the Planning Code text amendment(s) and/or Zoning Map amendment(s) become effective, or this authorization shall no longer be valid. A building permit to construct the project and commence the approved use must be issued as this Conditional Use authorization is only an approval of the proposed project and conveys no independent right to construct the project or to commence the approved use. The Planning Commission may, in a public hearing, consider the revocation of the approvals granted if a site or building permit has not been obtained within three (3) years of the date of the Motion approving the Project. Once a site or building permit has been issued, construction must commence within the timeframe required by the Permitting Agency and be continued diligently to completion. The Commission may also consider revoking the approvals if a permit for the Project has been issued but is allowed to expire and more than three (3) years have passed since the Motion was approved.
For information about compliance, contact Code Enforcement, Planning Department at 415-575-6863, www.sf-planning.org
4. **Extension.** This authorization may be extended at the discretion of the Zoning Administrator only where failure to issue a permit to construct the Project is caused by a delay by a local, State or Federal agency or by any appeal of the issuance of such permit(s).

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

5. **Mitigation Measures.** Mitigation measures contained in the Mitigation Monitoring and Reporting Program, attached as Exhibit A to Motion No. XXXX and incorporated herein by reference, shall be conditions of approval and are accepted by the Project Sponsor. If said measures are less restrictive than the other conditions herein, the more restrictive and protective control as determined by the Zoning Administrator, shall govern.

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

DESIGN- COMPLIANCE AT PLAN STAGE

6. **Final Materials.** The Project Sponsor shall continue to work with the Planning Department on the building design. Final materials, glazing, color, window type, and detailing shall be subject to Department staff review and approval. The architectural addenda drawings shall include the above information and shall be reviewed and approved by the Department

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

7. **Streetscape Plan.** The Project Sponsor shall continue to work with the Planning Department on the pedestrian streetscape improvements, including on the number and location of above ground potted street trees (taking into consideration what is achievable based on the location of the underground utility lines and vaults, PG&E requirements, and the location of the passenger and loading zones for the Project and accessibility to the project), in consultation with the Department of Public Works and the Department of Parking and Traffic. The Project Sponsor shall complete the final design of all pedestrian streetscape improvements prior to issuance of first architectural addenda, and shall complete construction of all pedestrian streetscape improvements prior to issuance of first certificate of occupancy

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

8. **Open Space.** The Project Sponsor shall continue to work with Planning Department staff to refine the design and programming of the open space plazas on Jackson Street and James Alley. The architectural addenda drawings shall include the above information and shall be reviewed and approved by the Department

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

9. **Garbage, composting and recycling storage.** Space for the collection and storage of garbage, composting, and recycling shall be provided within enclosed areas on the property and clearly labeled and illustrated on the architectural addenda. Space for the collection and storage of recyclable and compostable materials that meets the size, location, accessibility and other

standards specified by the San Francisco Recycling Program shall be provided at the ground level of the buildings.

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

10. **Rooftop Mechanical Equipment.** Pursuant to Planning Code 141, the Project Sponsor shall submit a roof plan to the Planning Department prior to Planning approval of the building permit application. Rooftop mechanical equipment, if any is proposed as part of the Project, is required to be screened so as not to be visible from any point at or below the roof level of the subject building.

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

11. **Lighting Plan.** The Project Sponsor shall submit an exterior lighting plan to the Planning Department prior to Planning Department approval of the building / site permit application.

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

PROVISIONS

12. **Transit Impact Development Fee.** Pursuant to Planning Code Section 411 (formerly Chapter 38 of the Administrative Code), the Project Sponsor shall pay the Transit Impact Development Fee (TIDF) as required by and based on drawings submitted with the Building Permit Application. Prior to the issuance of a temporary certificate of occupancy, the Project Sponsor shall provide the Planning Director with certification that the fee has been paid.

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

13. **First Source Hiring.** The Project shall adhere to the requirements of the First Source Hiring Construction and End-Use Employment Program approved by the First Source Hiring Administrator, pursuant to Section 83.4(m) of the Administrative Code. The Project Sponsor shall comply with the requirements of this Program regarding construction work and on-going employment required for the Project.

For information about compliance, contact the First Source Hiring Manager at 415-581-2335, www.onestopSF.org.

MONITORING

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

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

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

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

OPERATION

16. **Sidewalk Maintenance.** The Project Sponsor shall maintain the main entrance to the building and all sidewalks abutting the subject property in a clean and sanitary condition in compliance with the Department of Public Works Streets and Sidewalk Maintenance Standards.

For information about compliance, contact Bureau of Street Use and Mapping, Department of Public Works, 415-695-2017, <http://sfdpw.org/>.

17. **Garbage, Recycling, and Composting Receptacles.** Garbage, recycling, and compost containers shall be kept within the premises and hidden from public view, and placed outside only when being serviced by the disposal company. Trash shall be contained and disposed of pursuant to garbage and recycling receptacles guidelines set forth by the Department of Public Works.

For information about compliance, contact Bureau of Street Use and Mapping, Department of Public Works, 415-695-2017, <http://sfdpw.org/>.

18. **Lighting.** All Project lighting shall be directed onto the Project site and immediately surrounding sidewalk area only, and designed and managed so as not to be a nuisance to adjacent residents. Nighttime lighting shall be the minimum necessary to ensure safety, but shall in no case be directed so as to constitute a nuisance to any surrounding property.

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

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

For information about compliance, contact Bureau of Street Use and Mapping, Department of Public Works, 415-695-2017, <http://sfdpw.org/>.



Pillsbury Winthrop Shaw Pittman LLP
50 Fremont Street | San Francisco, CA 94105-2228 | tel 415.983.1000 | fax 415.983.1200
MAILING ADDRESS: P. O. Box 7880 | San Francisco, CA 94120-7880

Rachel B. Horsch
tel 415.983.1193
rachel.horsch@pillsburylaw.com

June 28, 2012

The Honorable Commissioners
San Francisco Planning Commission
1650 Mission Street, Suite 400
San Francisco, CA 94103-2479

Re: Chinese Hospital Replacement Project – Project Approvals

Dear Commissioners:

This letter brief is submitted by Pillsbury Winthrop Shaw Pittman LLP on behalf of the Chinese Hospital Association (“CHA”) for the Chinese Hospital Replacement Project (the “Project”).

I. EXECUTIVE SUMMARY

CHA is a community-owned, nonprofit organization that owns and operates the Chinese Hospital, a general acute care hospital located at 835-845 Jackson Street in the heart of Chinatown (the “Chinese Hospital”). The Chinese Hospital is the only independent community hospital in San Francisco and has provided essential healthcare services to the Chinatown and neighboring communities since 1899, first as the Tung Wah Dispensary and then, in 1925, as the Chinese Hospital. The Chinese Hospital remains an invaluable resource for the Chinatown community because it provides crucial inpatient and outpatient care with a unique-bilingual healthcare program in a convenient location.

To meet the healthcare needs of Chinatown and the local community, and to comply with the seismic safety requirements for acute care hospitals imposed by the Office of Statewide Hospital Planning and Development (“OSHPD”), CHA proposes to: (i) develop a new, state of the art hospital on a site currently occupied by an outdated administration building and parking garage, (ii) refurbish the existing Chinese Hospital building for use as a medical administration and outpatient center, and (iii) provide a new landscaped open space area along Jackson Street that continues around James Alley to serve as a community gathering place. To continue the Chinese Hospital’s role in the community and enable the development and operation of the

new hospital, the Project includes amendments to the General Plan, the Planning Code, and Zoning Maps to create the Chinese Hospital Special Use District (the "Chinese Hospital SUD"). The Project will ensure that the crucial role that the Chinese Hospital plays in the Chinatown community and the City at large continues and is enhanced.

II. PROJECT DESCRIPTION AND BENEFITS

A. The Hospital

The Chinese Hospital campus currently consists of the existing Chinese hospital building at 845 Jackson Street, the medical administration building at 835 Jackson Street, and a parking garage located directly behind the medical administration building.

The Chinese Hospital serves as a center for healthcare, healthcare education, and wellness services for local residents and the Chinese community in the Bay Area. More than 90 percent of its patients live in San Francisco with almost half residing in the Chinatown, North Beach, and Nob Hill neighborhoods and about 90 percent speaking Chinese as their primary language. In addition, more than 90 percent of the Chinese Hospital's acute care patients are 60 years of age or older and around 90 percent are Medicare or Medi-Cal patients.

The Chinese Hospital offers important care to this historically underserved population, namely, the elderly, indigent and monolingual Asian population of the local community. Without this care, many of Chinatown's elderly and monolingual residents would have great difficulty accessing vital healthcare services. Through the Project, CHA is committed to continuing and improving the availability of these high-quality, culturally sensitive, and affordable healthcare services to the community.

The community centric role that the Chinese Hospital plays is highlighted by the intensive use of the small seating area in front of the existing hospital. This area is heavily used by community members whether in conjunction with visits to the hospital, as a meeting and gathering place, or merely as a respite on the long walk up the hill.

In addition to serving the local community, the Chinese Hospital, through its Emergency Preparedness Plan and high quality service, plays a crucial role in various City emergency response plans, such as the San Francisco Chinatown Disaster Response Plan and the Emergency Operations Plan. During the 1989 Loma Prieta earthquake, the Chinese Hospital was a crucial community resource for healthcare

and other community needs. However, as currently designed, the Chinese Hospital's facilities are substandard as compared to modern acute care hospitals, and it would not be expected to continue to operate during or after an earthquake similar to the Northridge quake.

B. The Project

CHA proposes to demolish the outdated administration building and the small parking garage behind it, construct a new seven-story plus basement acute-care hospital building in their place, and remodel and refurbish the existing hospital building for use as a medical administration building with outpatient services. By staging construction in this manner, the existing healthcare services provided to the community will continue uninterrupted.

Unlike the existing Chinese Hospital, the Project will be well suited for modern healthcare practices and procedures that require more spacious facilities for new medical equipment, thereby leading to improved healthcare quality for patients and a safe and accessible work environment for hospital staff. In particular, the new hospital will replace the existing substandard-sized two, three and four-bed patient rooms with single patient rooms for a total of 54 acute care beds (the same number of licensed acute care beds as in the existing Chinese Hospital building).

In addition, the Project will add a new skilled nursing facility with 22 beds to improve the transition of patients from the acute care setting while they recover from inpatient procedures. This addition is particularly important for the services offered by the Chinese Hospital. For the primarily elderly population that is served by the Chinese Hospital, provision of skilled nursing beds will serve a crucial function by providing care to patients who no longer need acute care services but could not function independently at their homes.

The Project will also provide an approximate 890 square foot landscaped seating area along the Jackson Street frontage that wraps onto James Alley, and such other new space in accordance with the Project's approved landscape and street improvement plan. This expanded and improved public area will continue and enhance the role played by the current small seating area in front of the building as a community gathering space.

In order to accommodate the proposed development of the state of the art replacement hospital, including a new skilled nursing facility, outpatient care facility, and all necessary administrative functions, the Project includes amendments to the General Plan, the Planning Code, and Zoning Maps to create the Chinese Hospital SUD.

Create a Seismically Secure Hospital

The Project is crucial for the continued operation and success of the Chinese Hospital and the Chinatown community that it supports. The Project will fulfill the Chinese Hospital's role as an essential healthcare facility in the event of a major disaster in the City by building a replacement hospital that meets the seismic safety requirements for acute care facilities as defined in Senate Bill 1953 (the Alfred E. Alquist Hospital Seismic Safety Act of 1983) and as regulated by OSHPD. The existing 1979 Chinese Hospital building is rated under OSHPD standards as a SPC-3 structure. A SPC-3 rating under Senate Bill 1953 indicates that the structure could experience irreparable structural damage and cease being able to function following strong ground motion.

The replacement hospital will be designed to be a SPC-5 structure, the highest category, and will provide greater assurance that the Chinatown community, and the City at large, will be effectively served by a functional hospital after a major earthquake. By meeting the seismic requirements for acute care hospitals, the Project will help ensure that the Chinese Hospital could continue to play an essential role in the City's emergency response plan following a strong earthquake or other major disaster.

Upon completion, the replacement hospital will provide a secure and safe environment for hospital staff, patients, and visitors. The proposed replacement hospital is designed to meet OSHPD requirements under the California Building Code and to meet hospital industry standards for patient safety, patient privacy, and infection control. The Project also will increase the availability of healthcare services and medical professionals in Chinatown, which would better prepare the Chinatown neighborhood for emergencies and mass casualty events. Importantly, the development plans for the Project will ensure that the Chinese Hospital continues to operate at full capacity during the construction of the replacement hospital and that there continues to be adequate space for existing hospital services.

Provide a State of the Art Healthcare Facility that Supports the Health and Well-Being of Chinatown and San Francisco Residents

Not only does the Project respond to the anticipated healthcare needs of the community, but it also responds to the demands of physicians and patients for higher quality medical facilities and services, advancements in healthcare services, equipment, and technology, and to the healthcare industry's adoption of new "best" hospital practices for patient care and safety. In siting, sizing, and designing the replacement hospital, CHA took into consideration the licensing requirements for

acute care hospitals under the California Code of Regulations. Currently, the existing hospital does not meet the state and federal requirements for new acute care hospitals. The Project will remedy this deficiency and bring the Chinese Hospital into compliance with all of these requirements. The Project would further allow the Chinese Hospital to provide cutting edge healthcare services in a state of the art facility, which would be a major improvement over the building in which the hospital currently operates.

The Project has been carefully designed to meet the OSHPD requirements and is intended to provide additional space for the new and evolving procedures and equipment that an acute care hospital is required to maintain. This redesign will not only improve the healthcare services provided to patients, but it also will provide a better working environment for physicians and staff members and enhance the efficiency of hospital operations. The replacement hospital will include single patient rooms that would replace the existing substandard-sized two, three, and four-bed rooms and provide patients with a better healing environment. The replacement hospital will also a 22-bed skilled nursing facility to improve the transition of patients from the acute care setting and allow Chinatown residents to remain close to their homes and loved ones while they recover from inpatient procedures. These beds will also allow the Chinese Hospital to care for more critical patients by freeing up scarce inpatient beds.

Upon completion, the Project will be well suited for modern healthcare practices and procedures that require more spacious facilities for new medical equipment, leading to improved healthcare quality and safety for patients, and a safe and accessible work environment for hospital staff.

Respect the Cultural and Architectural Heritage of Chinatown

For over 100 years, CHA has been devoted to providing healthcare services to generations of Chinatown residents and it has operated a hospital at the Project site since 1925. One of the primary goals for the design of the Project is to respect the architectural context of the surrounding buildings and honor the tradition of the Chinese Hospital and the Chinatown neighborhood. Although it will not mimic the small historic structures in the area—and will instead project an aura of a state of the art medical facility—the Project will respect the architectural context of surrounding buildings and would be consistent with the tradition of a mix of smaller historic structures with larger, more modern ones. The scale of development in the Project vicinity varies widely, with building heights ranging from one to 13 stories. CHA has worked with Planning Department Staff and will continue to do so in developing the façade and exterior of the replacement hospital so that the design is

consistent with neighborhood design and architectural features to the extent feasible for an acute care hospital, such as incorporating the horizontal design features of the existing structure, while still enabling the Chinese Hospital to provide modern healthcare services at the highest level. The Project will also incorporate a variety of features that pay tribute to the historical relevance of the medical administration building, such as photos, plaques, and explanations of the history of the Project site.

The Project on the whole will preserve the urban role of Chinatown as a residential and commercial neighborhood by providing much needed healthcare services to the Chinatown community. By providing these healthcare services to Chinatown and community residents, the Project will support Chinatown and thereby conserve and protect the existing cultural and economic diversity of the neighborhood and enhance the community-serving character of the area. Healthcare is crucial to the long-term stability and prosperity of any neighborhood and this is especially true of Chinatown, which includes both commercial and residential uses.

Provide Open Space for Chinatown Residents and Hospital Visitors

The exterior of the Project will perpetuate, enhance, and expand the existing tradition of furnishing an outdoor community gathering place for respite and relaxation on the uphill walk along Jackson Street. The Project will provide an approximately 890 square foot landscaped and hardscaped open space along Jackson Street. This area will wrap around the side of the building along James Alley, where the entire building will be set back five feet from the east property line and the portion of James Alley currently owned by CHA would be converted to landscaped open space. CHA is in discussions to purchase and/or obtain easements over the portion of James Alley not currently owned by CHA, upon which CHA intends to expand the landscaping and possibly create a seating area or other usable open space for the public to enjoy. Overall, the Project will maintain and improve the existing open space on the Project site.

Support the Economic Development of Chinatown

The Project will increase employment opportunities for neighborhood residents both during and after development. While the Project is under construction, there would be opportunities for local residents and businesses to perform the work and provide other services related to the Project. Upon completion of the Project, the Chinese Hospital would provide employment opportunities for residents of the Chinatown community and will ultimately offer more jobs than are presently available. The Project will also provide ancillary retail, employment, and ownership opportunities by helping to preserve and maintain the Chinatown neighborhood through the provision

of much-needed and important healthcare services. Moreover, through the continued provision of medical care to Chinatown residents, the Project continues to foster a rich community environment to produce economic growth and stability in Chinatown.

III. PUBLIC SUPPORT

CHA has undertaken extensive community outreach efforts over the past few years and has received broad community support for the Project in the form of letters, cards, petitions and endorsements from over 1,600 individuals, including community leaders, neighborhood merchants, employees and users of the hospital and from over 30 community organizations, including:

- San Francisco Department of Public Health, Chinatown Public Health Center
- Chinatown Community Development Center
- Community Youth Center
- Self-Help for the Elderly
- On Lok, Inc.
- NEMS (North East Medical Services)
- The Chinatown YMCA
- St. Mary's School and Chinese Catholic Center
- Old Saint Mary's Cathedral
- Sidney Chan, CPA
- Chinese Chamber of Commerce
- Graphix
- Yeong Wo Benevolent Association
- CCHCA
- Tung Sen Benevolent Association
- Hop Wo Benevolent Association
- Hoy-sun Ning Yung Benevolent Association of America
- Raymond K. Y. Li, MD
- Chee Kung Tong Association
- American Heart Association
- Jack Lee Fong Insurance Agency
- Harvey Louie Insurance Agency
- Chinese Consolidated Benevolent Association
- Kuomintang of China
- Chinatown Child Development Center
- Asian and Pacific Islander American Health Forum
- Chinese Newcomers Service Center

- UCSF, Department of Ophthalmology
- Chinese Hospital Chief of Staff
- Richmond Area Multi-Services (RAMS)
- National Council of Asian Pacific Islander Physicians
- Chinese Community Healthcare Association
- Asian American Recovery Services, Inc.
- Chinese American Citizens Alliance
- Chinese Historical Society of America

Samples of several support letters from community organizations are attached hereto as an Attachment.

IV. PROJECT APPROVALS

Approval of this Project requires that the Planning Commission take the following actions:

- Adopt findings related to the certification of a Final Environmental Impact Report (FEIR) for the Project and certify the FEIR.
- Adopt California Environmental Quality Act (CEQA) findings for the Project, including findings rejecting alternatives, a statement of overriding considerations, and a Mitigation Monitoring and Reporting Program.
- Recommend that the Board of Supervisors (1) amend Policy 1.2 of the Chinatown Area Plan to allow for development of the replacement hospital and (2) amend “Map 1 – Generalized Height Plan” of the general plan, Chinatown Area Plan to reference a height limit of 110 feet for the Project site.
- Recommend that the Board of Supervisors amend the Planning Code and Zoning Maps to: (1) create the Chinese Hospital SUD and (2) reclassify the height and bulk limits on the Project site.
- Grant conditional use authorization (conditioned on the adoption of the General Plan, Planning Code, and Zoning Map Amendments) to allow:
 - hospital and medical center uses on all floors;
 - floor area in excess of 2,500 square feet in area;
 - uses in excess of and 35 feet in height; and
 - lot size in excess of 5,000 square feet.

In addition to the above approvals, the Project requires approval by the Board of Supervisors of the General Plan, Planning Code, and Zoning Map Amendments.

V. CONCLUSION

The Project will provide a substantial public benefit and is crucial for the continued operation of the Chinese Hospital and the local community that it supports. The Project merits the approvals requested both for the reasons stated herein and because of the substantial health, safety, and social benefits that will result to the City by allowing the Chinese Hospital to maintain and expand the important role it plays in the community. In particular, the Project:

- Responds to the anticipated healthcare needs of the community, the demands of physicians and patients for higher quality medical facilities and services, and advancements in healthcare services, equipment, and technology.
- Allows the Chinese Hospital to provide cutting edge healthcare services in a state of the art facility, which will be a major improvement over the building in which the hospital currently operates.
- Creates a new, seismically secure hospital that will be in compliance with current laws and regulations, such as Senate Bill 1953, the Americans with Disabilities Act, OSHPD requirements, and best industry practices.
- Ensures that the Chinese Hospital continues to operate during the development of the replacement hospital and that there is adequate space for existing hospital functions with minimal disruptions to acute care services and outpatient operations.
- Allows the Chinese Hospital to replace its two, three, and four-bed patient rooms with single patient rooms that utilize modern medical equipment.
- Creates a 22-bed skilled nursing facility that will improve the transition of patients from the acute care setting and allow Chinatown residents to remain close to their homes and loved ones while they recover from inpatient procedures.
- Ensures that the Chinese Hospital remains operational and capable of providing life-saving care in the event of a major earthquake.
- Promotes the preservation of the Chinatown community by providing essential healthcare services to the Chinatown area and community residents, and thereby conserves and protects the existing cultural and economic diversity of the Chinatown neighborhood.
- Respects the architectural context of the surrounding buildings and honors the tradition of the Chinese Hospital and the Chinatown neighborhood.

June 28, 2012

Page 10

- Provides an approximately 890 square foot landscaped and hardscaped open space on Jackson Street that will serve as an exterior community gathering place for respite and relaxation along the uphill walk on Jackson Street.
- Landscapes and makes other hardscape improvements to James Alley to create an appealing public open space for community residents and hospital visitors.
- Creates a variety of features that will pay tribute to the historical relevance of the medical administration building, such as photos, plaques, and explanations of the history of the project site, and preserves the architectural character of Chinatown by providing much needed healthcare services to the Chinatown neighborhood and community residents.
- Increases employment opportunities for neighborhood residents both during and after construction.
- Develops and fosters a rich community environmental that will produce economic growth and stability in Chinatown through the continued provision of important medical care to Chinatown residents.

Based on the above and on behalf of CHA, we respectfully request your approval of the Project.

Best regards,



Rachel B. Horsch

Enclosures

cc: John Rahaim, Department of City Planning
Kelly Amdur, Department of City Planning
Joy Navarrete, Department of City Planning
Rick Crawford, Department of City Planning
Linda Schumacher, Chinese Hospital Association

Attachment: Samples of Support Letters

ATTACHMENT



San Francisco Department of Public Health

Albert Yu, MD, MPH, MBA
Chief Medical Informatics Officer
Community Oriented Primary Care
Director, Chinatown Public Health Center
三藩市華埠公共衛生局
余英強醫學博士

June 15, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear Planning Commissioner President Fong and the Planning Commission:

I am the medical director of the Chinatown Public Health Center (CPHC); and I submit this letter enthusiastically in support of Chinese Hospital's new replacement hospital project. Although CPHC is part of the San Francisco Department of Public Health Community Health Network, many of its patients nevertheless prefer clinical services that are available at Chinese Hospital including, but not limited to, diagnostic and ancillary, inpatient, and urgent care treatment. Specifically, CPHC has close to 7,000 active patients; over 40% of whom have Medicare or Medi-Cal, and often seek care at Chinese Hospital.

The reasons why my patients prefer to use Chinese Hospital services are simple. Chinese Hospital staffs are linguistically and culturally competent, both of which are strong predictors of patient satisfaction and clinical outcome. Chinese Hospital is accessible to local residents; whereas a trip to San Francisco General Hospital would require an hour taking public transportation. Moreover, wait time for an appointment to Chinese Hospital services is typically short and is more often than not, unmatched at San Francisco General Hospital. There is strong scientific evidence to suggest access and convenience eliminate barriers to care and ultimately result in better patient outcome. Lastly, Chinese Hospital is a tremendous community partner and collaborates regularly with CPHC. They include: 1) free ultrasound services to CPHC patients who have chronic Hepatitis B infection, and 2) annual grants to support innovative programs created by the CPHC Nutrition Services and Health Education units (childhood obesity prevention, cancer awareness and outreach, disaster preparedness, tobacco cessation, and Diabetes lay health peer educators training).

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient

1490 Mason Street, San Francisco, CA 94133

Email: Albert.Yu@sfdph.org Phone: (415) 364-7909 Fax: (415) 986-1130

days in Yr2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22-bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. Chinatown Public Health Center, a City agency and I wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,



Albert Yu, MD, MPH, MBA
Chief Medical Informatics Officer
Community Oriented Primary Care
Medical & Center Director
Chinatown Public Health Center



Chinatown Community
Development Center

華協中心

1525 Grant Avenue
San Francisco, CA 94133
TEL 415.984.1450
FAX 415.362.7992
TTY 415.984.9910
www.chinatowncdc.org

May 25, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear Planning Commission President Fong and Commissioners:

The Mission of the Chinatown Community Development Center is to build community and enhance the quality of life for San Francisco residents. We are a place-based community development organization serving primarily the Chinatown neighborhood, and also serve other areas. We play the roles of neighborhood advocates, community organizers, planners, developers, and managers of affordable housing.

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese community who were denied access to medical care. In San Francisco, 30% of the population is Asian, the majority of which are Chinese.

They provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Yr2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working with us on the plans to build a new hospital to better meet the medical needs of the community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We find the EIR to be complete and accurate and strongly support Chinese Hospital's new replacement hospital project.

Sincerely,

Executive Director





"Providing strength, hope and
Empowerment for seniors since 1966"
www.selfhelpelderly.org
www.ivoice.org

San Francisco
407 Sansome Street
San Francisco, CA 94111-3123
Telephone: 415-677-7600
Fax: 415-296-0313

San Mateo
50 East Fifth Avenue
San Mateo, CA 94401-4107
Telephone: 650-342-0822
Fax: 650-342-8935

Santa Clara
1050 Saint Elizabeth Drive
San Jose, CA 95126-4322
Telephone: 408-961-1018
Fax: 408-971-2653

Alameda
2400 MacArthur Boulevard
Oakland, CA 94602-2999
Telephone: 510-336-1952
Fax: 510-336-1967

June 8, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. The Hospital provides medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Yr 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current hospital built in 1979. It will consist of seven (7) stories with a basement level and will remain a 54-bed acute care hospital. The new facility will add a 22-bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner.

Self-Help for the Elderly wholeheartedly supports Chinese Hospital's new replacement hospital project.

Sincerely,

Anni Chung
President and CEO



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,

Kari Lee
Executive Director



American Heart Association | American Stroke Association

Learn and Live.

Greater Bay Area Division

100 Montgomery St, Ste 1650, San Francisco, CA 94104
Phone (415) 433-2273 Fax (415) 228-8402

426 17th St, Ste 300, Oakland, CA 94612
Phone (510) 904-4000 Fax (510) 904-4004

1710 Gilbreth Rd, Burlingame, CA 94010
Phone (650) 259-8700 Fax (650) 259-6890
www.americanheart.org

2011-2012 Board of Directors

San Francisco/ San Mateo/Marin

Chairman of the Board
Laureen Seeger

President
Deepak Srivastava, MD

Warren Browner, MD
Michael Covarrubias
Keith Donnermeyer
Ken A. Fox, MD
Richard A. Francoz, MD
Gordon L. Fung, MD, MPH,
PhD, FACC, FAHA
Chuck Harvey
Robert H. Lustig, MD
John Maa, MD
Bill Pearce
Collin P. Quock, MD
Patricia Sprincin
John Woods

East Bay

Chairman of the Board
Ginger Campbell, RN, PhD

President
Matthew S. DeVane, DO, MBA,
FACC

Wendel Brunner, MD
Kim Burch
Dennis Byas, PhD
Michael Estes, PhD
Barney Fonzi
Dennis Garrison
Junaid Khan, MD
Jeffrey Klingman, MD
Eric Kolstad, PE
Ronald Krauss, MD
Michael Lee, MD
Janice Murphy
Kate Newkumet, MD
Chuck Prosper
Gary Sloan
Mike Thomas
Jon-Cecil Walkes, MD

Senior Vice President
Dawn Borgnis

Executive Director
Jill DiGiacomo

May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,

Donna R. Lew
Senior Director, Health Equity



FARMERS INSURANCE GROUP OF COMPANIES

HARVEY LOUIE INSURANCE AGENCY
Insurance Specialist

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, California 94103

June 01, 2012

Re: Chinese Hospital's New Replacement Hospital Project

Dear Commissioner Fong and members of the Planning Commission,
The Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of the Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of the total hospital patient days in the Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services. The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

AMERICA CAN DEPEND ON FARMERS

838 Grant Avenue, Suite 414, San Francisco, CA 94108
Business: (415)982-4778 • Fax: (415)982-4778

Sincerely,

A handwritten signature in cursive script that reads "Harvey Louie".



美國陽和總會館 YEONG WO BENEVOLENT ASSOCIATION

746 Sacramento St., San Francisco, CA 94108

Tel/Fax: (415) 982-1673

June 1, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,

Handwritten signatures and names:
Hansong, James, Alan, Kenneth, James, Alex, Yung, Horman, Wong, etc.
A circular stamp of the Yeong Wo Benevolent Assn. is visible over the signatures.

* Please see back page for more signatures.

Ala King ————— Patricia Lee

Pamela
Raymond S. Choy

Liokheng Chen

Sonny Hwok
Hawing Lee

Tungshet HW

June 11, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community-supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Yr2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22-bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,



Robert Edmondson
Chief Executive Officer, On Lok



東北醫療中心

June 12, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear Planning Commissioner President Fong and the Planning Commission:

On behalf of North East Medical Services (NEMS), I am writing to express support for Chinese Hospital's Replacement Hospital Project, so that they can continue to provide essential hospital services to the San Francisco community, especially those who are indigent and low income.

NEMS is a non-profit, federally qualified health center that offers comprehensive health care services to a variety of patients, a majority of whom are uninsured or low-income. Chinese Hospital and NEMS work closely together in the San Francisco community to provide a full scope of services to our patient populations. NEMS primarily works with the medically underserved Asian population in San Francisco. Their preferred hospital for services and ER support is often Chinese Hospital, where the staff are more culturally sensitive to their needs. NEMS looks forward to continuing its work with Chinese Hospital as a collaborative partner in strengthening our ability to meet the needs of our uninsured, working poor, Medicare, and Medi-Cal recipients in the community.

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. Chinese Hospital provides medical services to the indigent population with limited English proficiency (42% of the San Francisco Chinese population are monolingual), adults over the age of 65, and San Francisco residents who are low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to



東北醫療中心

accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. NEMS wholeheartedly supports Chinese Hospital's new replacement hospital project.

Sincerely,

A handwritten signature in cursive script that reads "Eddie Chan".

Eddie W. Chan
President & CEO

聖瑪利天主教學校及華人中心
ST. MARY'S SCHOOL AND CHINESE CATHOLIC CENTER

- St. Mary's Chinese Mission
- Holy Family Parish
- St. Mary's School
- St. Mary's Chinese Language School
- Office of Development



June 12, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear President Fong and the Planning Commission:

Chinese Hospital is a vital part of the Chinese community which has served this community for more than 100 years. It was founded in response to the outcry of the Chinese community who were denied access to medical care as well as other human rights.

From the latest census, 30% of the population in San Francisco is Asian of which 20% are of Chinese descent. The hospital provides medical services to the indigent population with limited English proficiency, adults over the age of 65, and San Francisco residents with low income. Chinese hospital provides the highest percentage of care to Medicare and Medi-Cal eligible residents compared to any hospital in the City with the exception of San Francisco General Hospital.

For nearly ten (10) years, Chinese Hospital has been working on plans to build a new hospital to better serve the medical needs of the community and address the seismic requirements established in SB, the Alfred E. Alquist Hospital Seismic Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a much needed 22 bed Skilled Nursing Facility here in Chinatown and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care of our community in a culturally competent manner. As the Pastor of Old St. Mary's Cathedral (founded in 1854) which has served the Chinese community since 1903 and the Director of St. Mary's School and Chinese Catholic Center since 1921, we whole heartedly support Chinese Hospital's new replacement hospital project.

Sincerely yours,

A handwritten signature in black ink that reads "Fr. Daniel E. McCotter, CSP". The signature is written in a cursive, flowing style.

Fr. Daniel E. McCotter, CSP
Pastor, Old St. Mary's Cathedral
Pastor, Holy Family Chinese Mission
Director, St. Mary's School and Chinese Catholic Center



CHINESE CHAMBER OF COMMERCE

730 Sacramento Street, San Francisco, CA 94108

(415) 982-3000
Fax: (415) 982-4720

May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,

KENNY TSE
PRESIDENT
SUPERVISORY BOARD

中山隆都
同善堂

TUNG SEN BENEVOLENT ASSOCIATION

1129 STOCKTON STREET
SAN FRANCISCO, CA 94133-4906
U.S.A.

Telephone: 1-(415) 397-2834 Fax: 1-(415) 397-2889

June 1, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,

Man Lung Lau 劉文光, Vice President

Office manager Sam Lau

Fiona Li 陳國玲, English Secretary

Hop Wo Benevolent Association
913 Stockton Street
San Francisco CA 94108
May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,



C.C. Yu
President, Hop Wo Benevolent Association

駐美台山寧陽總會館
**HOY - SUN NING YUNG BENEVOLENT ASSOCIATION
IN AMERICA**

41 WAVERLY PLACE
SAN FRANCISCO, CALIFORNIA 94108 U.S.A.
TEL: (415) 288-0605, 288-0603 FAX: (415) 982-3808

May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

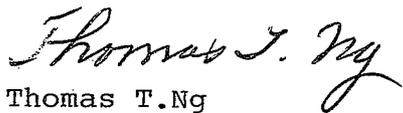
Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,



Thomas T. Ng
President

駐美中華總會館

CHINESE CONSOLIDATED BENEVOLENT ASSOCIATION

"Chinese Six Companies"

The Official Representative Association of Chinese in America

843 STOCKTON STREET • SAN FRANCISCO, CALIFORNIA 94108

TEL: (415) 982-6000 • FAX: (415) 982-6010

May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

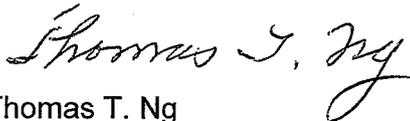
Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,



Thomas T. Ng
Presiding President



City and County of San Francisco
Department of Public Health
Community Behavioral Health Services
Child, Youth and Family System of Care

Chinatown Child Development Center
720 Sacramento Street
San Francisco, CA 94108
Phone (415) 392-4453
Fax (415) 433-0953

June 11, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community-supported, non-profit, health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, over 30% of the population are Asians of which, 20% are of Chinese descent. It provides medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal-eligible San Francisco residents (93% share of total hospital patient days in Yr 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54-bed acute care hospital. The new facility will add a 22-bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites, and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. As an agency that provides behavioral health services to a largely Chinese population in San Francisco, we wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,

A handwritten signature in black ink that reads "Nancy Lim-Yee".

Nancy Lim-Yee, LCSW
Program Director

June 12, 2012

BOARD OF DIRECTORS

2012

Executive Committee

Dexter Louie, MD, JD, MPA
Chairperson

Rea Pañares, MHS
Vice Chairperson

Kathy Lim Ko
President/CEO

Debra Nakatomi
Treasurer

Joyce O'Brien, MPH
Secretary

Butch de Castro, PhD, MSN/MPH,
RN

Bill Imada

Gail Mukaihata Hannemann

Victor Kaiwi Pang

Niyantá Spelman

Gayle Tang, MSN, RN

Lori Villarosa

Headquarters:

450 Sutter Street
Suite 600
San Francisco CA 94108
Main 415-954-9988
Fax 415-954-9999
www.apiahf.org

Washington D.C. Office:

1828 L Street N.W.
Suite 802
Washington, D.C. 20036
Main 202-466-7772
Fax 202-466-6444

*National Advocates for
Asian American,
Native Hawaiian &
Pacific Islander Health*

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear Planning Commissioner President Fong and the Planning Commission:

I am writing in support of the Chinese Hospital Replacement Hospital Project. Chinese Hospital plays a valuable role in the community and it is imperative that the facility be seismically safe in order to continue their mission.

As a national organization committed to improving the health of Asian Americans, Native Hawaiians, and Pacific Islanders for over 25 years, the Asian & Pacific Islander American Health Forum (APIAHF) is very familiar with Chinese Hospital which is recognized as a leading provider of culturally competent health care services. APIAHF was incubated in the work of Chinese Hospital and over the years has closely partnered with them to improve the health and health care of our community.

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. Chinese Hospital provides medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. In addition, they provide the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Yr2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,



Kathy Lim Ko
President & CEO

University of California
San Francisco



Department of Ophthalmology

Shan C. Lin, M.D.

Professor
Glaucoma Service
Department of Ophthalmology

Director
Glaucoma Service
Department of Ophthalmology
San Francisco General Hospital
& Trauma Center

Academic
Koret Vision Research Center
10 Koret Way
San Francisco, CA 94143-0730
tel: 415/514-0952
fax: 415/476-0336
email: LinS@vision.ucsf.edu

Clinic
Beckman Vision Center
533 Parnassus Avenue, U559
or 8 Koret Way
San Francisco, CA 94143
tel: 415/514-6920
fax: 415/514-6925
<http://www.ucsfeye.net>

June 11, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear Planning Commissioner President Fong and the Planning Commission:
Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Yr2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,

A handwritten signature in black ink, appearing to read 'Shan Lin'.

Shan Lin, MD



CHINESE HOSPITAL MEDICAL STAFF

845 Jackson Street • San Francisco, CA 94133-4899
Tel: (415) 677-2483 • Fax: (415) 677-2439

May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

RE: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

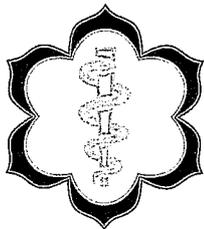
Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,


James Yan, DO
Chief of Staff



NCAPIP
National Council of Asian
Pacific Islander Physicians

NATIONAL COUNCIL OF ASIAN PACIFIC ISLANDER PHYSICIANS

June 10, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

PRESIDENT/CEO
Ho Luong Tran, M.D., M.P.H.

CHAIR
Dexter Louie, M.D., J.D., M.P.A.

VICE CHAIR
Wilson Ko, M.D.

VICE CHAIR
Karen Kim, M.D., M.P.H.

VICE CHAIR
Winston Wong, M.D., M.S.

TREASURER
Edward A. Chow, M.D.

SECRETARY
Jhemon Lee, M.D.

Arthur Chen, M.D.

David T.W. Chiu, M.D.

Son T. Do, M.D.

Gordon Fung, M.D., M.P.H., Ph.D.

Chandak Ghosh, M.D., M.P.H.

Martina Kamaka, M.D.

Juhaila Khan, M.D., Ph.D., M.P.H.

Arvind K. Goyal, M.D., M.P.H.

Kenneth P. Moritsugu, M.D.,
M.P.H.

L. Eric Leung, M.D.

George W. Ma, M.D.

Raynald Samoa, M.D.

Daisy Saw, M.D.

Susan Wu, M.D.

Albert Yu, M.D., M.P.H., M.B.A.

Nanci Yuan, M.D.

Dear Planning Commissioner President Fong and the Planning Commission:

On behalf of the National Council of Asian Pacific Islander Physicians (NCAPIP) Board of *Directors* and membership, we are writing to support Chinese Hospital's new replacement hospital project, consisting of building a 54 bed acute care hospital of seven (7) stories and a basement level. The new facility will add a 22 bed Skilled Nursing Facility, accommodation for private patient rooms, and larger surgical suites, all fit to enhance patient care services and most importantly, patients' access to life saving treatments.

NCAPIP is a national policy organization that represents physicians committed to the advancement of the health and well-being of Asian American, Native Hawaiian and Pacific Islander (AANHPI) communities. The 24 board members and 20 advisory members are recognized leaders of national, state and local physician organizations and medical groups.¹ They are primary care (general internists, family physicians, and pediatricians) and specialty physicians and include diverse Asian ethnic backgrounds, Native Hawaiians and Pacific Islanders, practicing in a variety of settings, including solo and small group physician practices, multi-specialty medical groups, community health centers, public health departments, private and public hospitals, integrated health delivery systems, and academic health centers.

Under the Affordable Care Act (ACA), uninsured and underinsured AANHPIs will benefit from the expansion in Medicaid coverage and the availability of affordable coverage through state health insurance exchanges (HIE). It is estimated that up to 19 percent of AANHPIs will be eligible for Medicaid beginning in 2014 and it is most critical that Chinese Hospital is ready to serve the health care needs of the community in a culturally and linguistically competent manner.

In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. Chinese Hospital provides medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. They are one of the

¹ These physician organizations include the National Physicians Alliance, California Medical Association, California Medical Association Foundation, Illinois State Medical Society, California Society of Internal Medicine, California Physicians Alliance, Federation of Chinese American and Chinese Canadian Medical Societies, Chinese American Medical Society, Vietnamese American Medical Society, Network of Ethnic Physician Organizations, Chinese Community Health Care Association, Chinese American Independent Physician Association, Chicago Medical Society, Los Angeles County Medical Association, San Francisco Medical Society, and Alameda Contra Costa County Medical Association,

highest care providers to Medicare and Medi-Cal eligible San Francisco residents compared to other hospitals in the city.

The new Chinese hospital will be a replacement facility to the current one (built in 1979) to better meet the medical needs of the community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. Also, it will preserve its legacy to serve the health care needs of the community in a culturally and linguistically competent manner. NCAPIP wholeheartedly supports Chinese Hospital's new replacement hospital project.

Sincerely,



Ho Luong Tran, M.D., M. P. H.
President and CEO



Dexter Louie, M.D., J.D.
Chairman of the Board of Directors

Dong Lin, MD
950 Stockton Street, Suite 207
San Francisco, CA 94108

June 19, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

RE: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,



Dong Lin, MD
Medical Staff Member



Motivating Youth to Succeed
啟導青年 邁步向前

June 12, 2012

Main Office & Computer Clubhouse
1038 Post Street
San Francisco, CA 94109
Tel: 415-775-2636
Fax: 415-775-1345

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Bayview Branch Office
4438 Third Street
San Francisco, CA 94124
Tel: 415-550-1151
Fax: 415-775-1345

Dear Planning Commissioner President Fong and the Planning Commission:

Richmond Branch Office
319 Sixth Avenue
Suite 201
San Francisco, CA 94118
Tel: 415-752-9675
Fax: 415-752-9033

On behalf of Community Youth Center, I am writing to support Chinese Hospital's new replacement hospital project. Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Yr2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

Website: www.cycsf.org
Email: cyc@cycsf.org

Board of Directors
Jaymy W. Mak, Esq., Chair
Joseph L. Subbiundo, Vice Chair
Hanna Leung, Esq., Secretary
May Ann Wong, Treasurer

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

Anthony Kan
Benjamin C.K. Lau, M.D.
Nelson C. Lum
Victoria Lyuber
Mary Tsui

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Executive Director
Sarah Wan, M.S.W.

Respectfully submitted,

A United Way Agency

Sarah Wan
Executive Director



660 California Street • San Francisco, California 94108,2501

(415) 288,3800 • Fax (415) 288,3838

June 12, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear President Fong and the Planning Commission:

Chinese Hospital is a vital part of the Chinese community which has served this community for more than 100 years. It was founded in response to the outcry of the Chinese community who were denied access to medical care as well as other human rights.

From the latest census, 30% of the population in San Francisco is Asian of which 20% are of Chinese descent. The hospital provides medical services to the indigent population with limited English proficiency, adults over the age of 65, and San Francisco residents with low income. Chinese hospital provides the highest percentage of care to Medicare and Medi-Cal eligible residents compared to any hospital in the City with the exception of San Francisco General Hospital.

For nearly ten (10) years, Chinese Hospital has been working on plans to build a new hospital to better serve the medical needs of the community and address the seismic requirements established in SB, the Alfred E. Alquist Hospital Seismic Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a much needed 22 bed Skilled Nursing Facility here in Chinatown and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care of our community in a culturally competent manner. As the Pastor of Old St. Mary's Cathedral (founded in 1854) which has served the Chinese community since 1903 and the Director of St. Mary's School and Chinese Catholic Center since 1921, we whole heartedly support Chinese Hospital's new replacement hospital project.

Sincerely yours,

Fr. Daniel E. McCotter, CSP
Pastor, Old St. Mary's Cathedral
Pastor, Holy Family Chinese Mission
Director, St. Mary's School and Chinese Catholic Center

sidney chan

certified public accountant

71 saint germain avenue, san francisco, ca 94114

phone: (415) 433-0988

fax: (415) 665-8832

e-mail: syccpa@yahoo.com

June 7, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

Dear Commissioners:

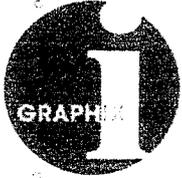
The Chinese Hospital, which was founded over 100 years ago, is important to the health and well-being of all the Chinese community. It provides medical services to a high percentage of the non-English speaking Chinese population in Chinatown.

The hospital, for over 10 years, has been working on a plan to erect a new facility to meet the growing need of the community. The new facility will greatly expand the bed capacity of the existing hospital.

Please be assured that the new facility will not only preserve the legacy of the Chinese Hospital, but also improve the services to the community. I fully support the Chinese Hospital's new replacement hospital project. Your vote in support of the project will be greatly appreciated.

Very sincerely,





GRAPHIX
SAN FRANCISCO, CA 94103

May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,

Wade Lai
President





Your Community Physicians

Chinese Community Health Care Association

445 Grant Ave., Suite 300, San Francisco, CA 94108

Tel: (415) 216-0088 Fax: (415) 955-8811

www.cchca.com

May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,


Gustin Ho, M.D.
President

May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

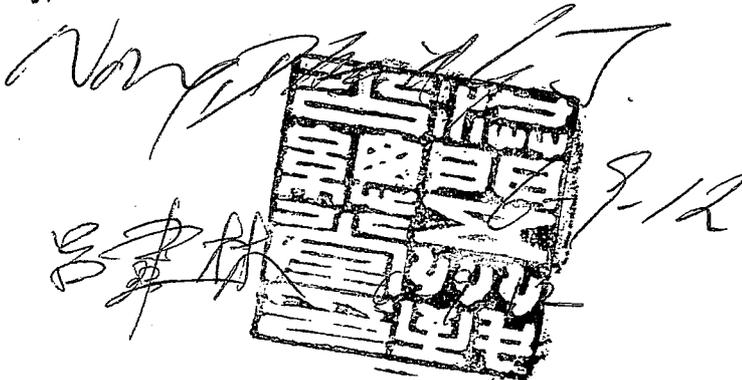
Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,

The block contains a handwritten signature in black ink, which appears to be 'Wong'. Below the signature is a square official stamp with Chinese characters. To the right of the stamp, the date '7-12' is handwritten.

Raymond K. Y. Li MD
950 Stockton Street, Ste 205
San Francisco, CA 94108
Tel: 415-989-1453 / Fax: 415-989-2301

May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

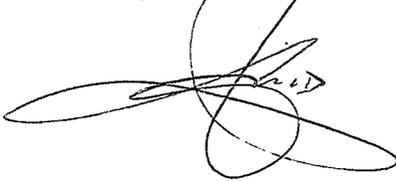
Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,

A handwritten signature in black ink, appearing to read 'Raymond K. Y. Li MD', written over a large, stylized, circular scribble.



JACK LEE FONG INSURANCE AGENCY, INC.

577 Columbus Avenue, San Francisco, CA 94133-2894

PHONE: (415) 956-3990

FAX: (415) 362-6812

LICENSE: #0747521

EMAIL: JLFongIns@gmail.com

June 1, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear Commissioner President Rodney Fong and the Planning Commission,

The Chinese Hospital has provided valuable health care services to the Chinese Community for over 100 years. Chinese Hospital is a community supported non-profit health care provider that was originally founded to provide care to the Chinese community that did not have access to medical care. Providing bilingual services to the patients fosters better overall communication and builds trust between the medical staff and the patient. This is important because San Francisco has a population of 30% Asians, of which 20% are of Chinese descent. Medical services are provided to the indigent population with limited English proficiency, seniors over age 65, and low-income San Francisco residents. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents compared to any hospital in the City, with the exception of the San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

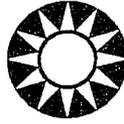
The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project. I urge you to lend that same support to the Chinese Hospital. Thank you very much.

Sincerely,

Jack Lee Fong
JLF:jcf

Member of SF Chinese Hospital Board of Trustees

COPY



部支總國美駐黨民國國中
KUOMINGTANG OF CHINA

傳真 Fax:
(415) 982 - 3025

HEADQUARTERS IN AMERICA
838 Stockton Street
San Francisco, CA 94108 U. S. A.

電話 Tel:
(415) 982 - 6218

May 31, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely,



CHINESE NEWCOMERS
Service Center
新僑服務中心

June 12, 2012 San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

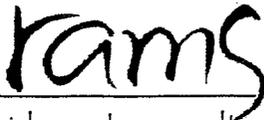
Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Yr2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

Sincerely
Carlos Serrano-Quan, M.S.W.
Executive Director
Chinese Newcomers Service Center
777 Stockton Street #104
San Francisco, CA 94108



richmond area multi-services, inc.

June 10, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, over 30% of the population is Asian Americans of which approximately 20% are of Chinese descent. They provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Yr2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54 bed acute care hospital. The new facility will add a 22 bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites and enhanced patient care services.

Founded in 1974, RAMS, Inc. is a private, non-profit community mental health agency that is committed to advocating for and providing community-based, culturally-competent, and consumer-guided comprehensive services, with an emphasis on serving Asian & Pacific Islander Americans. As a highly reputable community-based comprehensive mental health agency, RAMS provides services mostly to the indigent population, serving about 18,000 people in over 30 languages, at over 80 sites citywide, and collaborates with several other highly regarded institutions such as State Department of Rehabilitation, San Francisco State University, and CCHP & Chinese Hospital. Another unique feature of RAMS is the great cultural and clinical diversity of our client population.

The new hospital will preserve Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. I am writing to express our strong support of Chinese Hospital's new replacement hospital project. If I can provide any further information about our support please feel free to contact me by phone or through email at kqbassiri@ramsinc.org.

Sincerely,

Kavoos Ghane Bassiri, LMFT, CGP
President & CEO, RAMS, Inc.

3626 balboa street san francisco, california 94121 (415) 668-5955

a non-profit corporation

June 12, 2012

San Francisco Planning Commission
1650 Mission Street, Suite 400
San Francisco, CA 94103

Dear Commissioner President Fong and the Planning Commission Members:

I am writing in support of the replacement of San Francisco's Chinese Hospital. Chinese Hospital has been working on plans to build a new hospital for over ten years to better meet the medical needs of the community and address the seismic requirements established by SB 1953. This will be a replacement facility to the current Chinese Hospital and the rebuilding will accommodate enhanced patient care services to the community. As 30% of the population in San Francisco is Asians, of which 20% are of Chinese descent, Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents as compared to any hospital in the City with the exception of San Francisco General Hospital.

The new hospital will preserve the Chinese Hospital's legacy to serve the health care needs of the community in a culturally competent manner. I wholeheartedly support the replacement of the Chinese Hospital.

Sincerely,

Jeff Mori
Executive Director

Asian American Recovery Services, Inc.



美洲同源總會
CHINESE AMERICAN CITIZENS ALLIANCE
~ NATIONAL ~

1044 Stockton Street, San Francisco, California 94108 • Telephone/FAX (415) 829-9332

GRAND LODGE
ESTABLISHED 1895

2011-2013

Grand President
Carolyn Hong Chan

Grand Executive

Vice President

Davace Chin

Grand Vice President

Planning

Winston K. Wu

Grand Vice President

Membership

John Y. Wong

Grand Vice President

Communications

Helen Ying

Grand Secretary

Rusty Chan

Grand Assistant Secretary

Faye Woo Lee

Grand Treasurer

Melanie Chan

Grand Auditors

Joanna Tom

William Mei

Grand Marshal

Dr. James B. Wong

Grand Sentinel

Joan Sung

Grand Executives

Albert Fong

Edward Yu

Dr. Ira S. Katz

Felicia Yu

Mike Fong

Robert Gin

Susan Dickson

Thomas Lee

Rudy Yee

Warren Seeto

Jack Joe

Betty Yeow

Regional Grand Executives

Virginia C. Gee

Edmond J. Gor

Betty Jean Lee

Dr. Toon Lee

T. Steven Lee

John Moy

Past Grand Presidents

Wilbur K. Woo

Nowland C. Hong

Harold Y. G. Fong

Harry W. Low

Nancy A. Gee

Saykin Foo

Dr. Munson A. Kwok

Special Assistants

Alice Tom

Alex Chan

Suellen Cheng

Richard Fong

Ted Gong

Paul Hu

George Leung

Gordon Quan

Gino Wang

Philip Young

June 6, 2012

San Francisco Planning Department
1650 Mission Street, Suite 400
San Francisco, CA 94103

Re: Chinese Hospital's New Replacement Hospital Project

Dear Planning Commissioner President Fong and the Planning Commission:

Chinese Hospital is a community supported, non-profit health care provider, founded more than 100 years ago in response to the outcry of the Chinese Community who were denied access to medical care. In San Francisco, 30% of the population are Asians of which, 20% are of Chinese descent. We provide medical services to the indigent population with limited English proficiency (42% of Chinese population are monolingual), adults over the age of 65, and San Francisco residents with low income. Chinese Hospital provides the highest percentage of care to Medicare and Medi-Cal eligible San Francisco residents (93% share of total hospital patient days in Year 2011) compared to any hospital in the City, with the exception of San Francisco General Hospital.

For nearly 10 years, Chinese Hospital has been working on the plans to build a new hospital to better meet the medical needs of the Community and address the seismic requirements established in SB 1953, the Alfred E. Alquist Hospital Seismic Safety Act of 1983. The new hospital will be a replacement facility to the current 1979 hospital. It will consist of seven (7) stories with a basement level and will remain a 54-bed acute care hospital. The new facility will add a 22-bed Skilled Nursing Facility and space to accommodate private patient rooms, larger surgical suites, and enhanced patient care services.

The new hospital will preserve Chinese Hospital's legacy of serving the health care needs of the community in a culturally competent manner. We wholeheartedly support Chinese Hospital's new replacement hospital project.

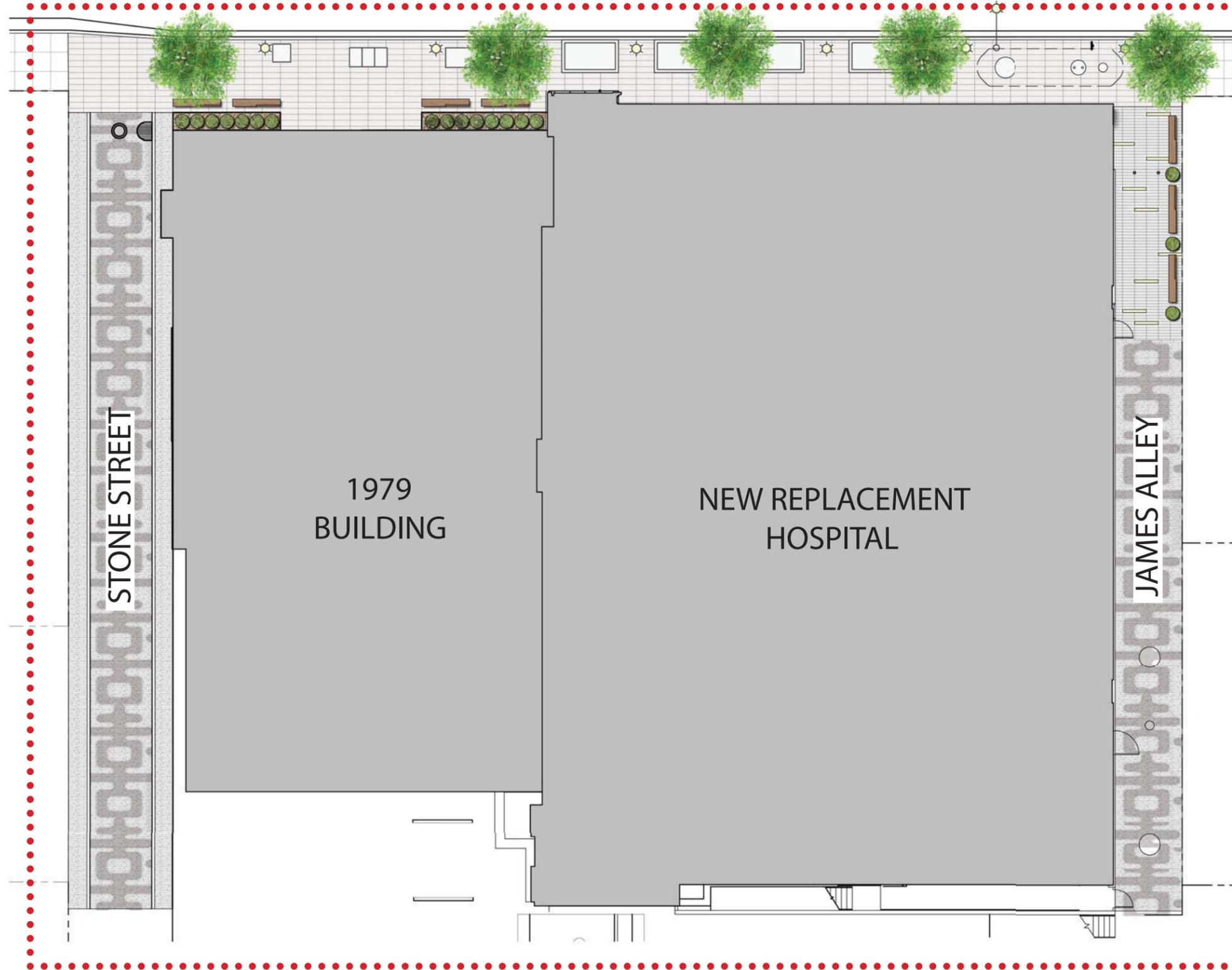
Sincerely,

Carolyn Hong Chan
Grand President





JACKSON STREET



STONE STREET

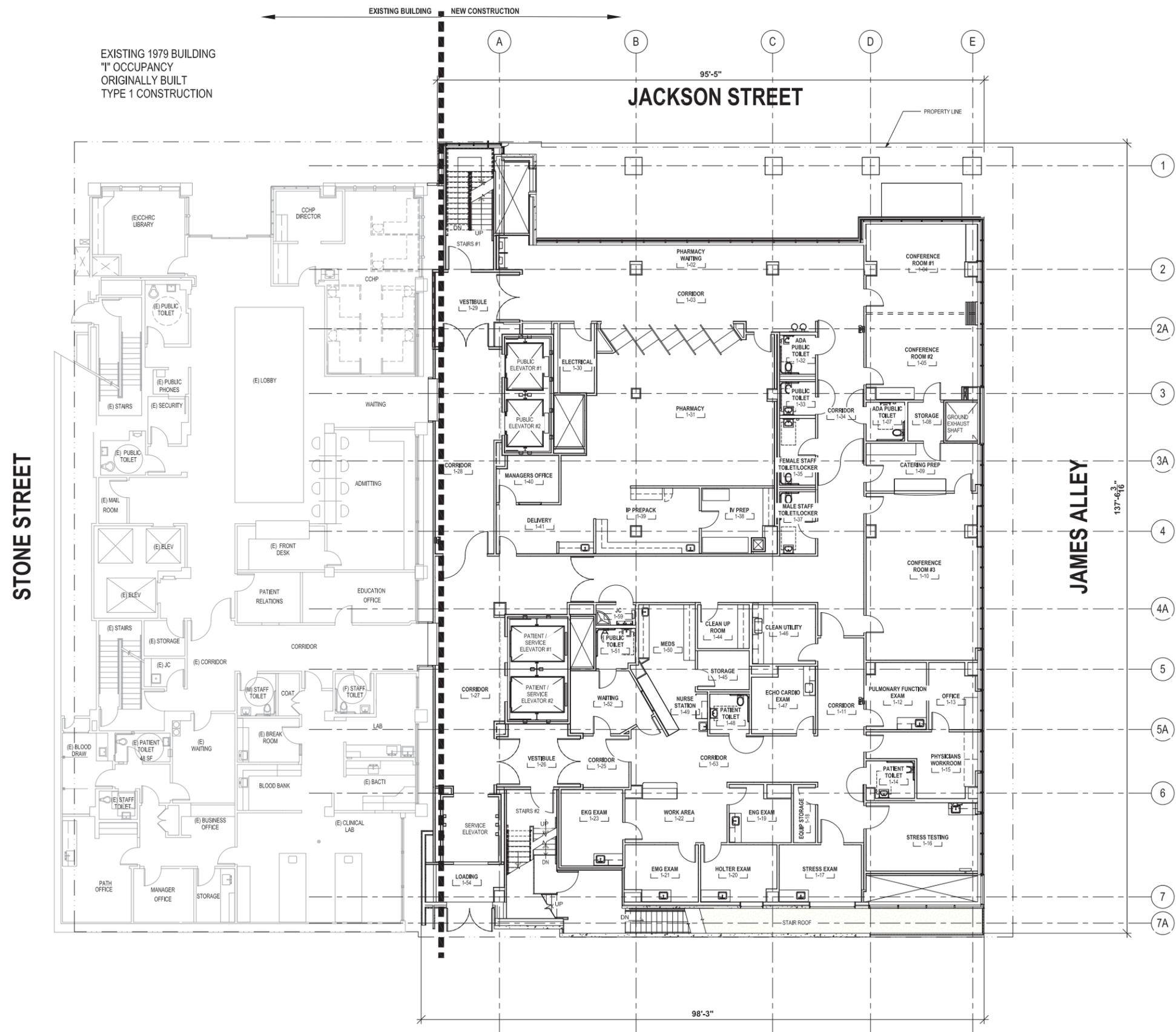
1979
BUILDING

NEW REPLACEMENT
HOSPITAL

JAMES ALLEY







EXISTING 1979 BUILDING
 "I" OCCUPANCY
 ORIGINALLY BUILT
 TYPE 1 CONSTRUCTION

JACKSON STREET

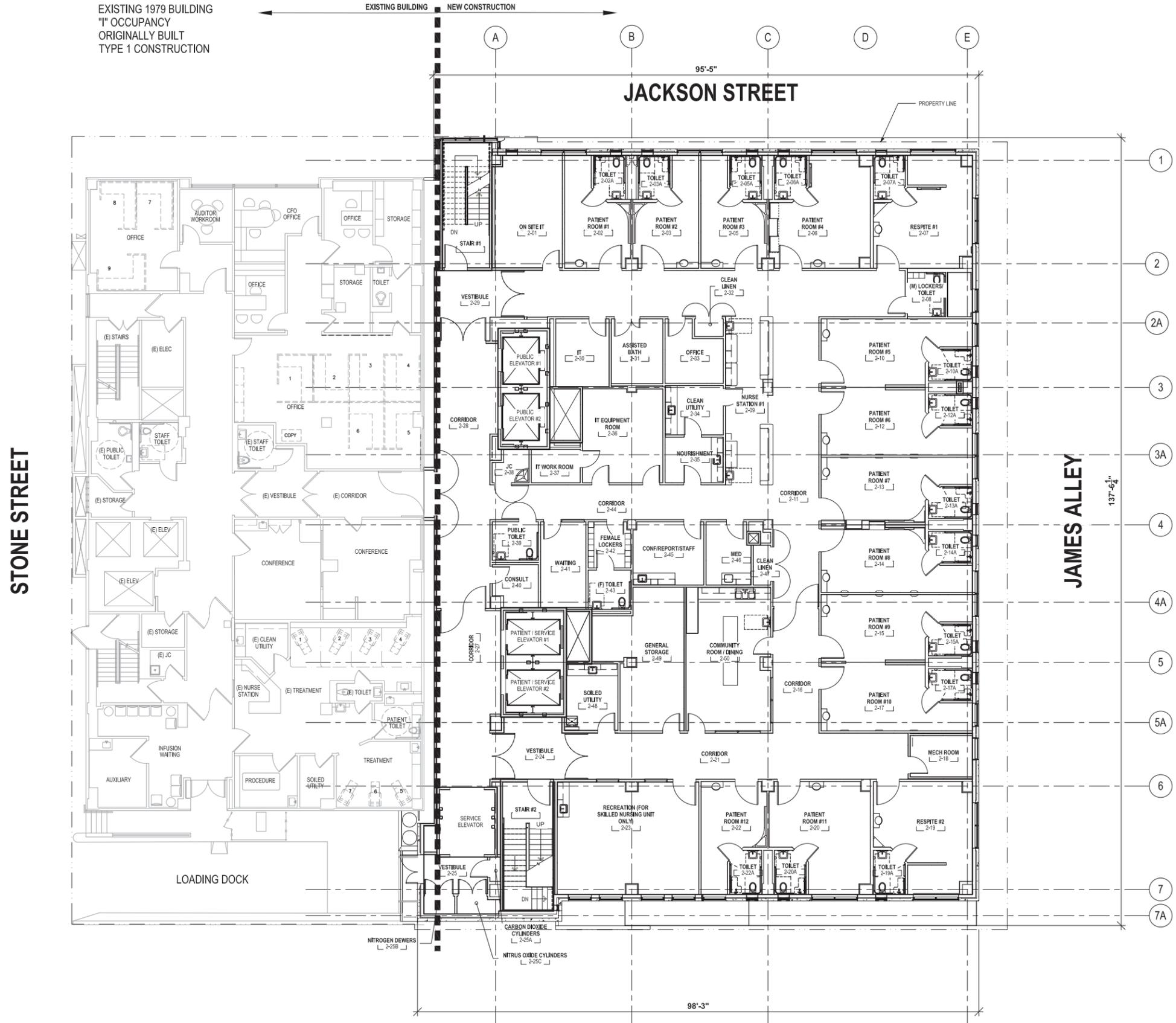
STONE STREET

JAMES ALLEY

FIRST FLOOR PLAN



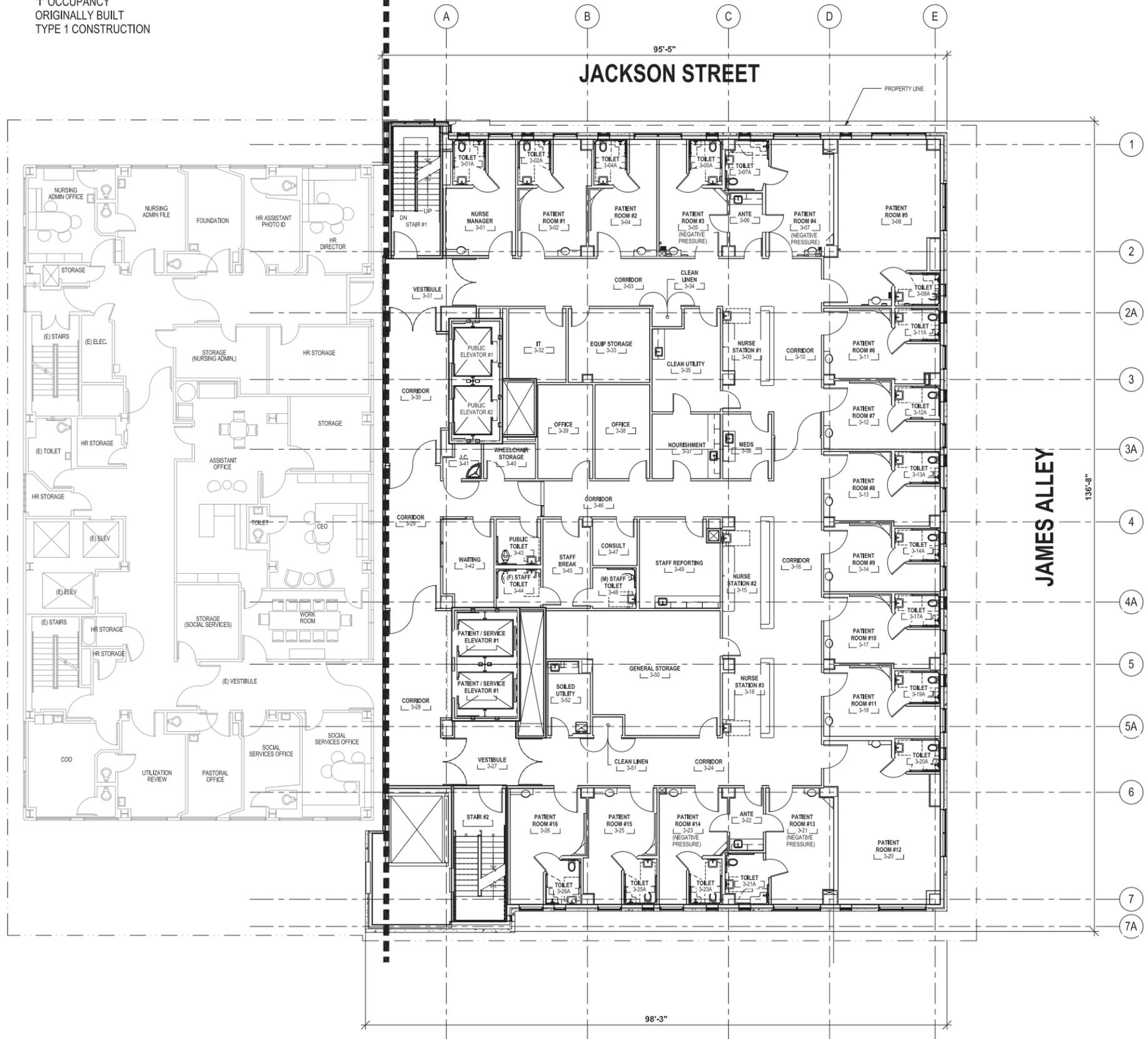
EXISTING 1979 BUILDING
 "I" OCCUPANCY
 ORIGINALLY BUILT
 TYPE 1 CONSTRUCTION



EXISTING 1979 BUILDING
 "I" OCCUPANCY
 ORIGINALLY BUILT
 TYPE 1 CONSTRUCTION

EXISTING BUILDING NEW CONSTRUCTION

STONE STREET



THIRD FLOOR PLAN



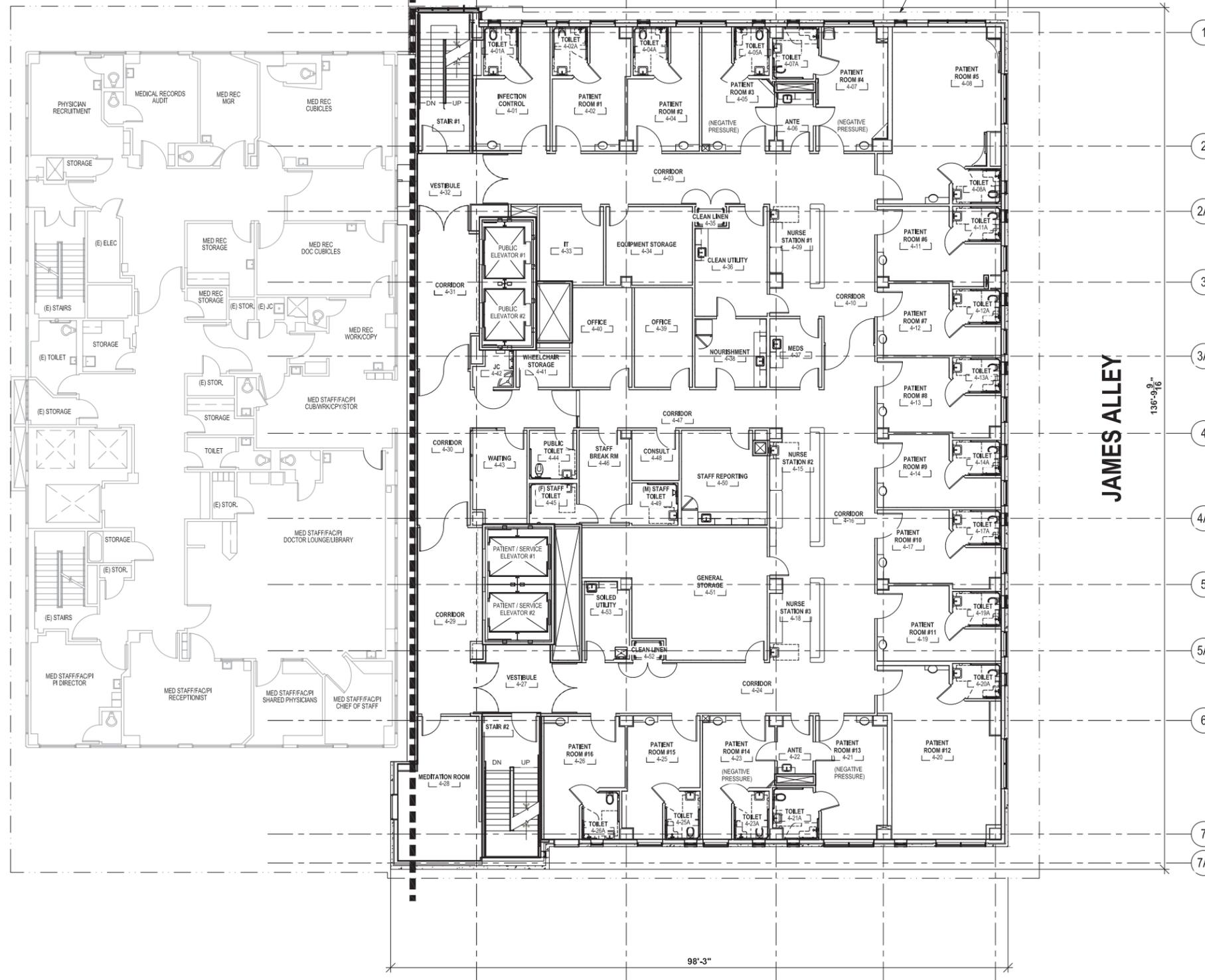
EXISTING 1979 BUILDING
 "I" OCCUPANCY
 ORIGINALLY BUILT
 TYPE 1 CONSTRUCTION

EXISTING BUILDING NEW CONSTRUCTION

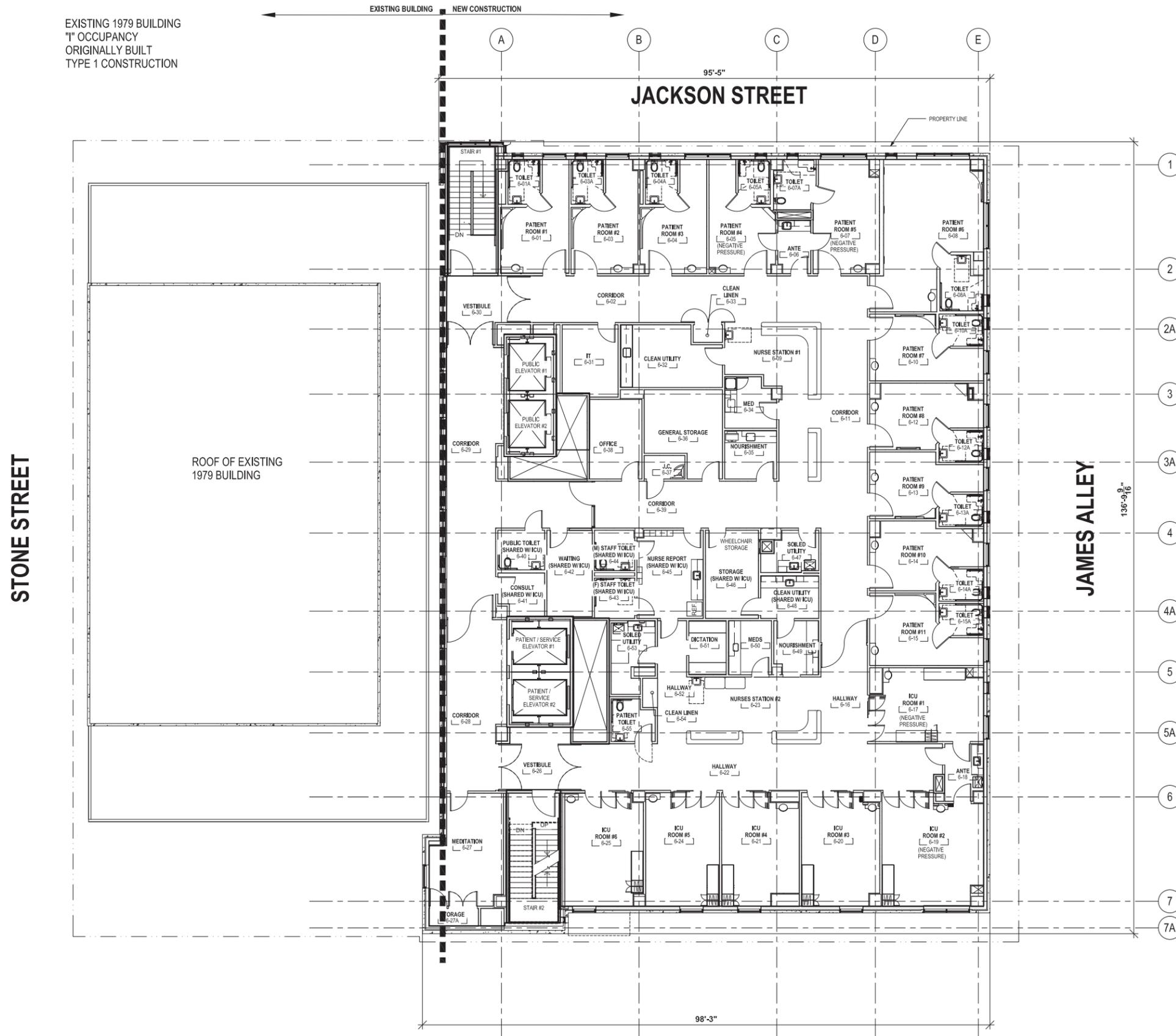
STONE STREET

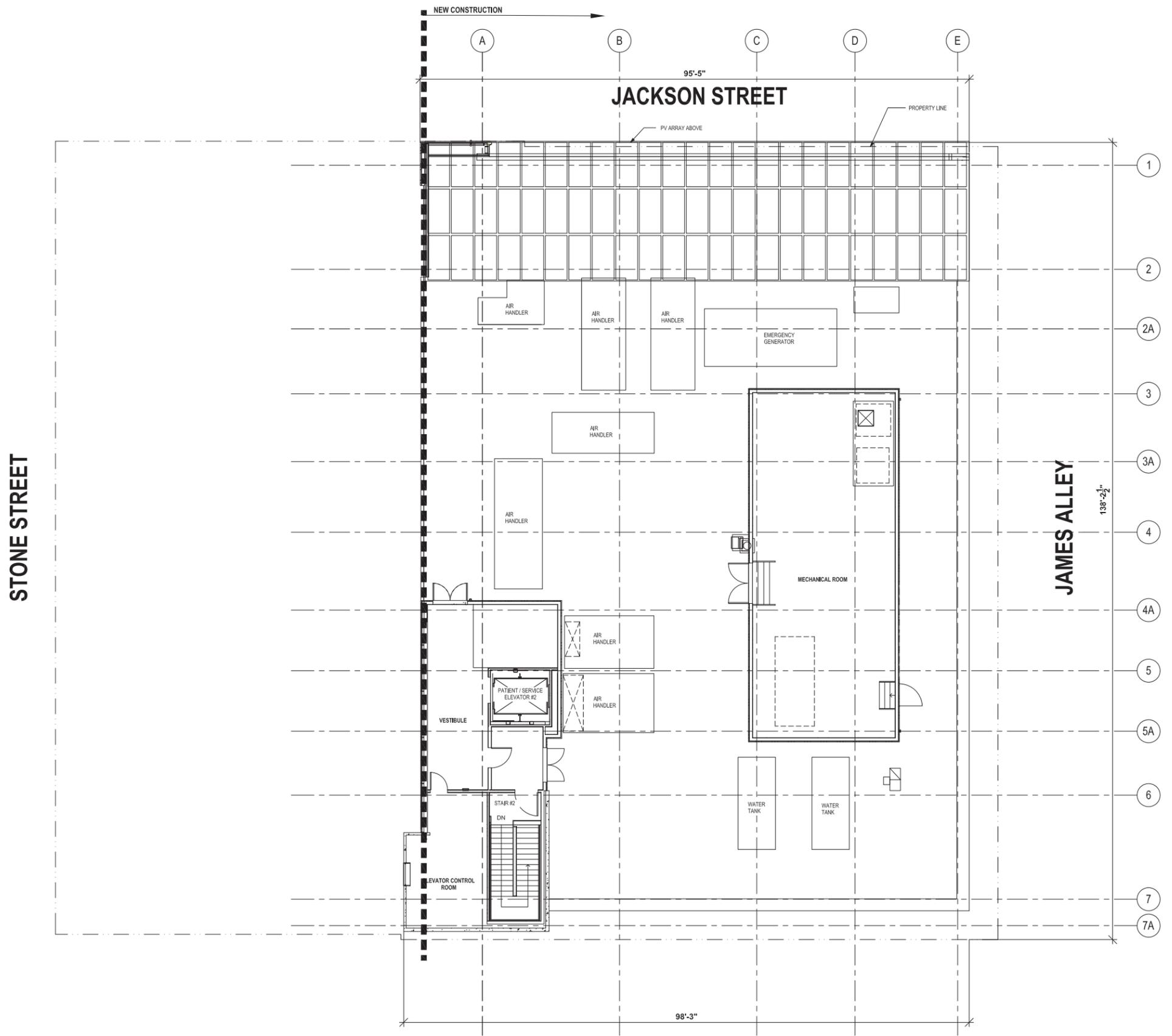
JACKSON STREET

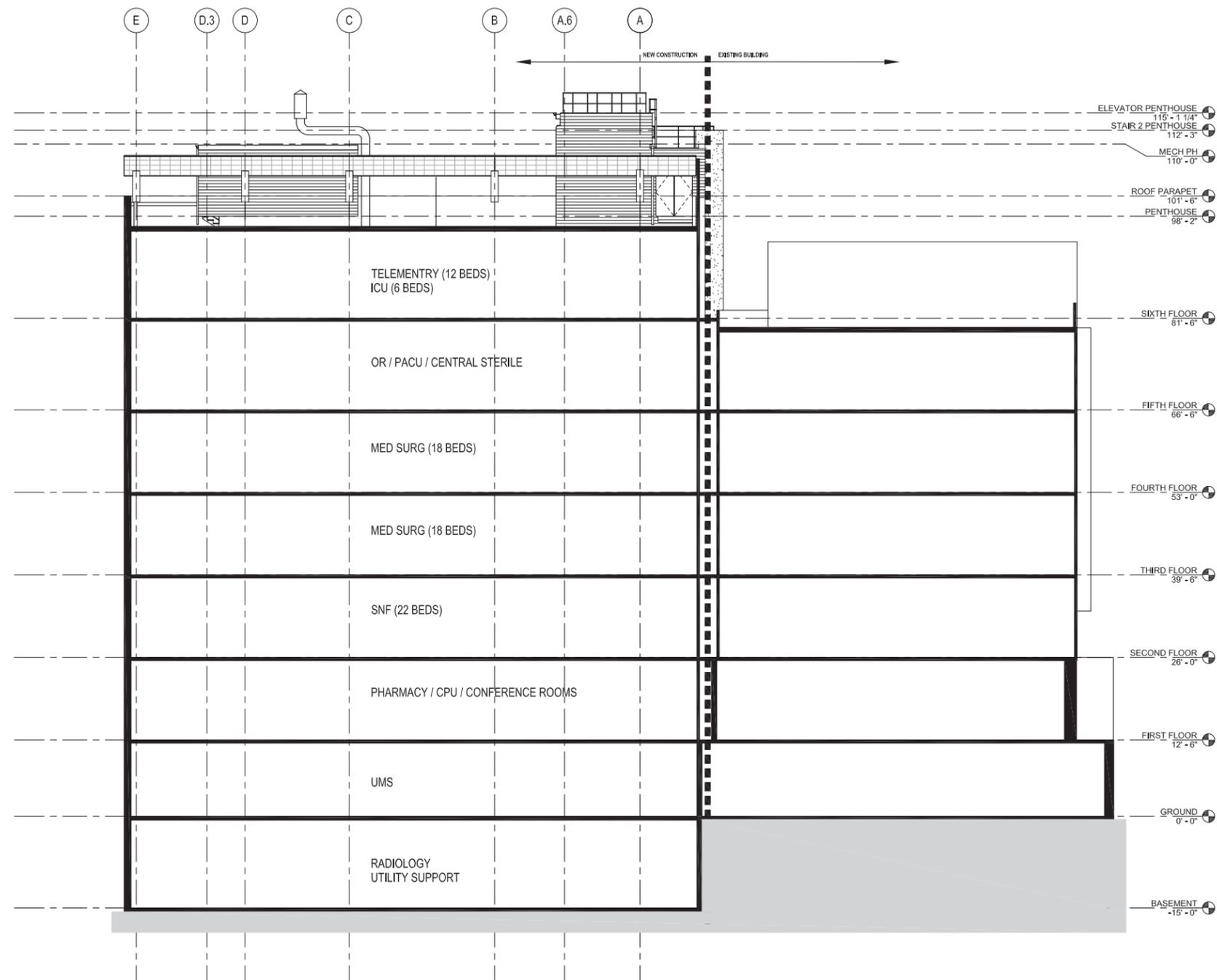
JAMES ALLEY

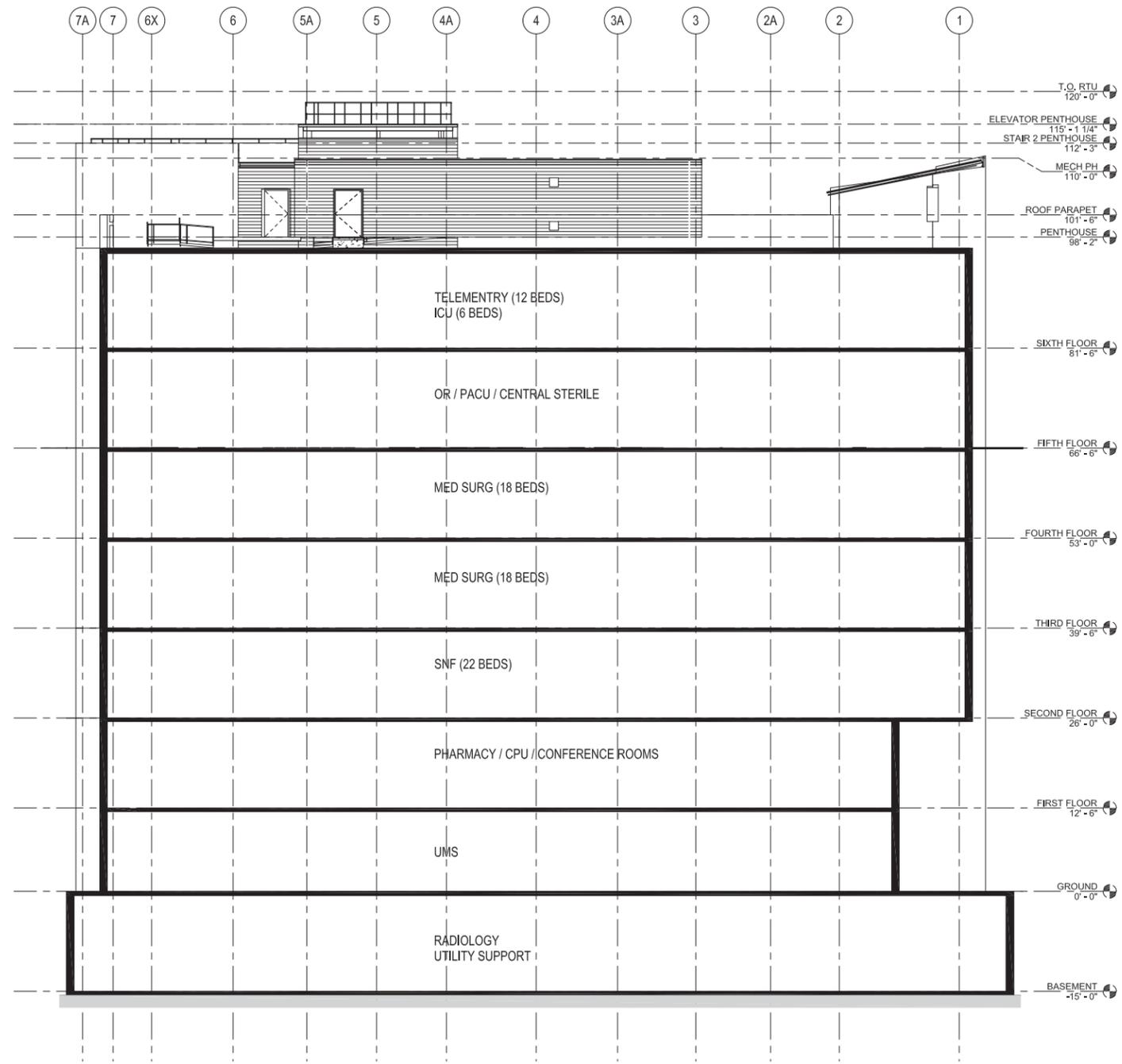


EXISTING 1979 BUILDING
 "I" OCCUPANCY
 ORIGINALLY BUILT
 TYPE 1 CONSTRUCTION



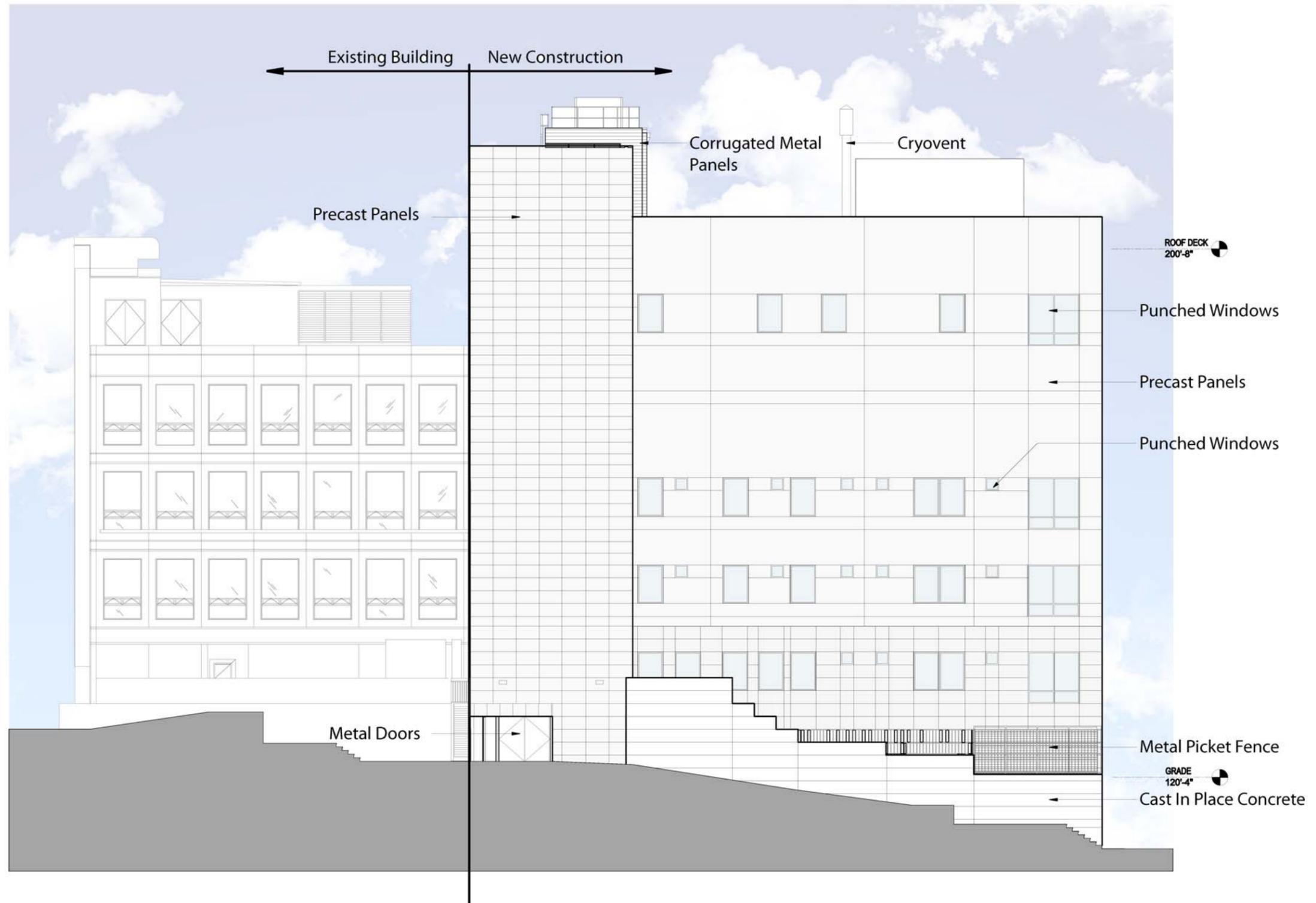


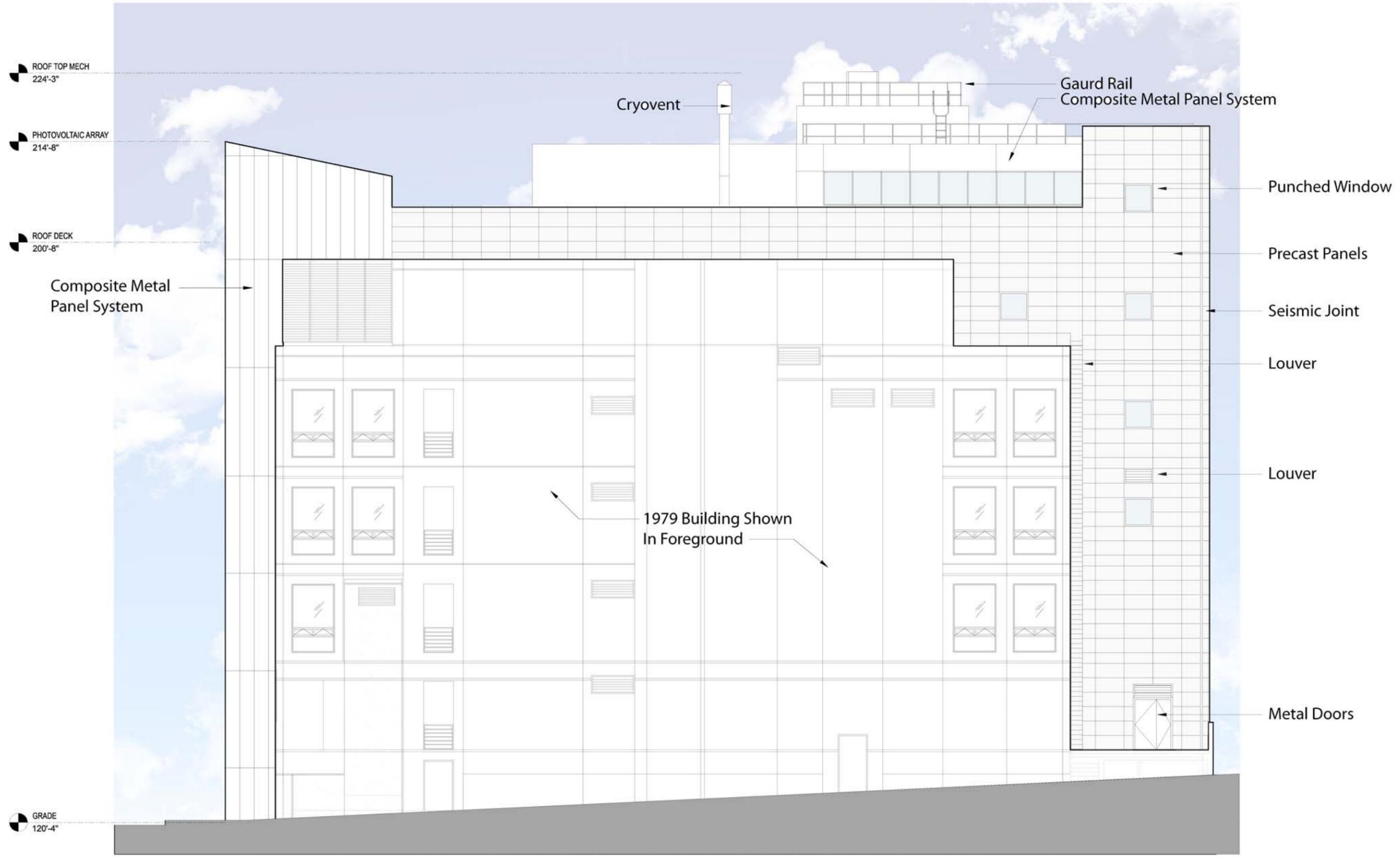




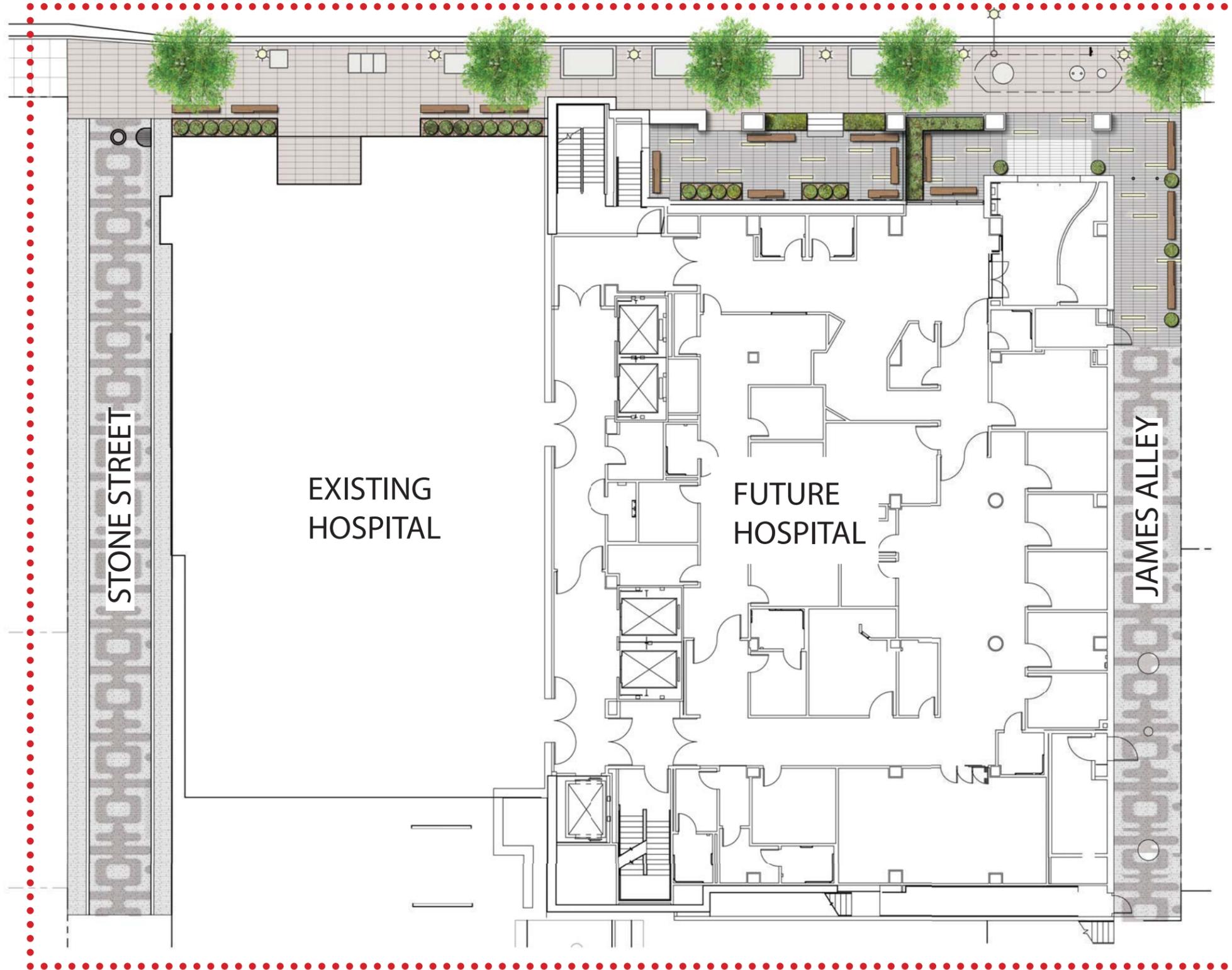








JACKSON STREET



JACKSON STREET

Wooden Benches

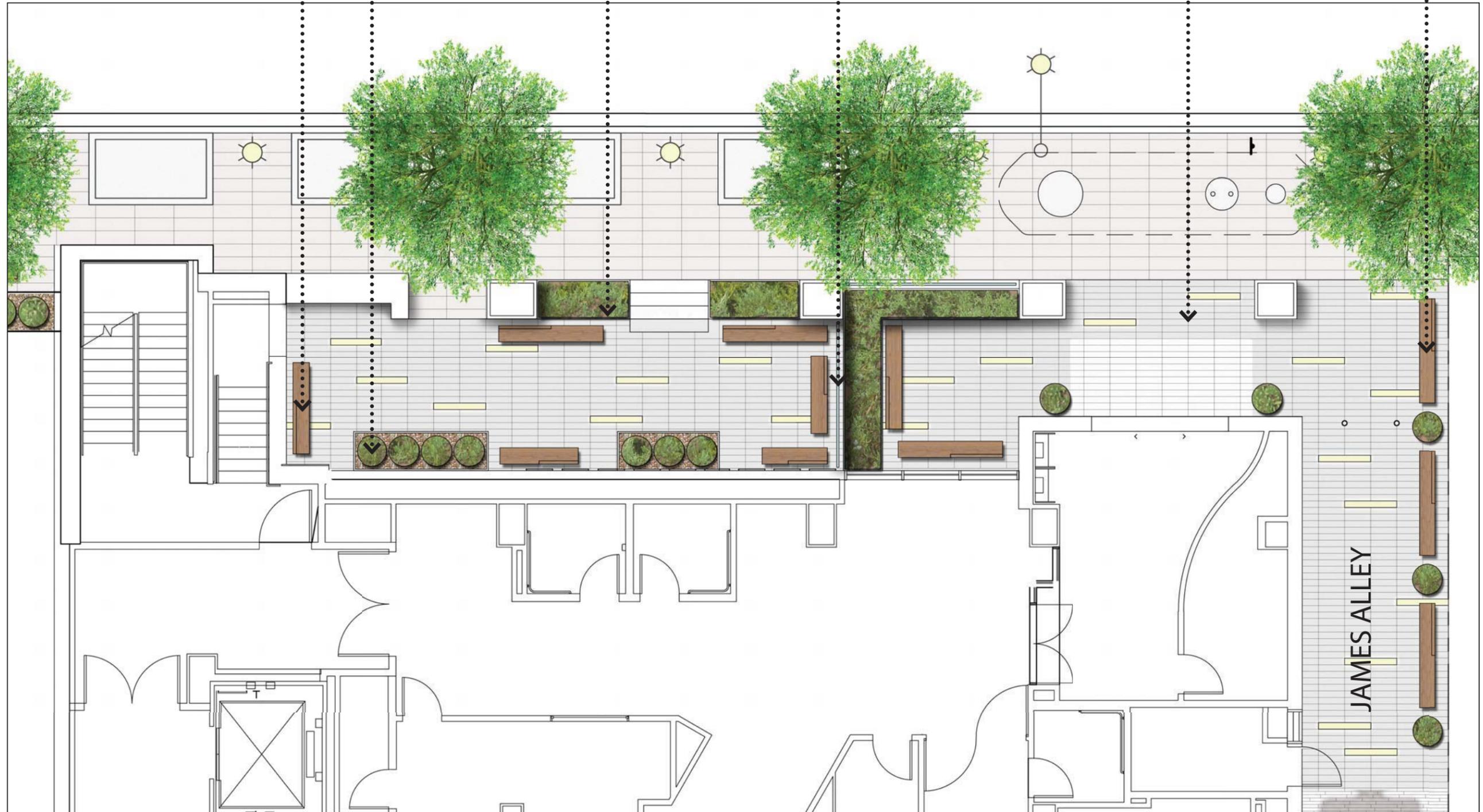
.....Potted Plants

..... Metal Planter

..... Glass Railing

Concrete Pavers

Movable Benches





Movable
Benches

Glass
Railing

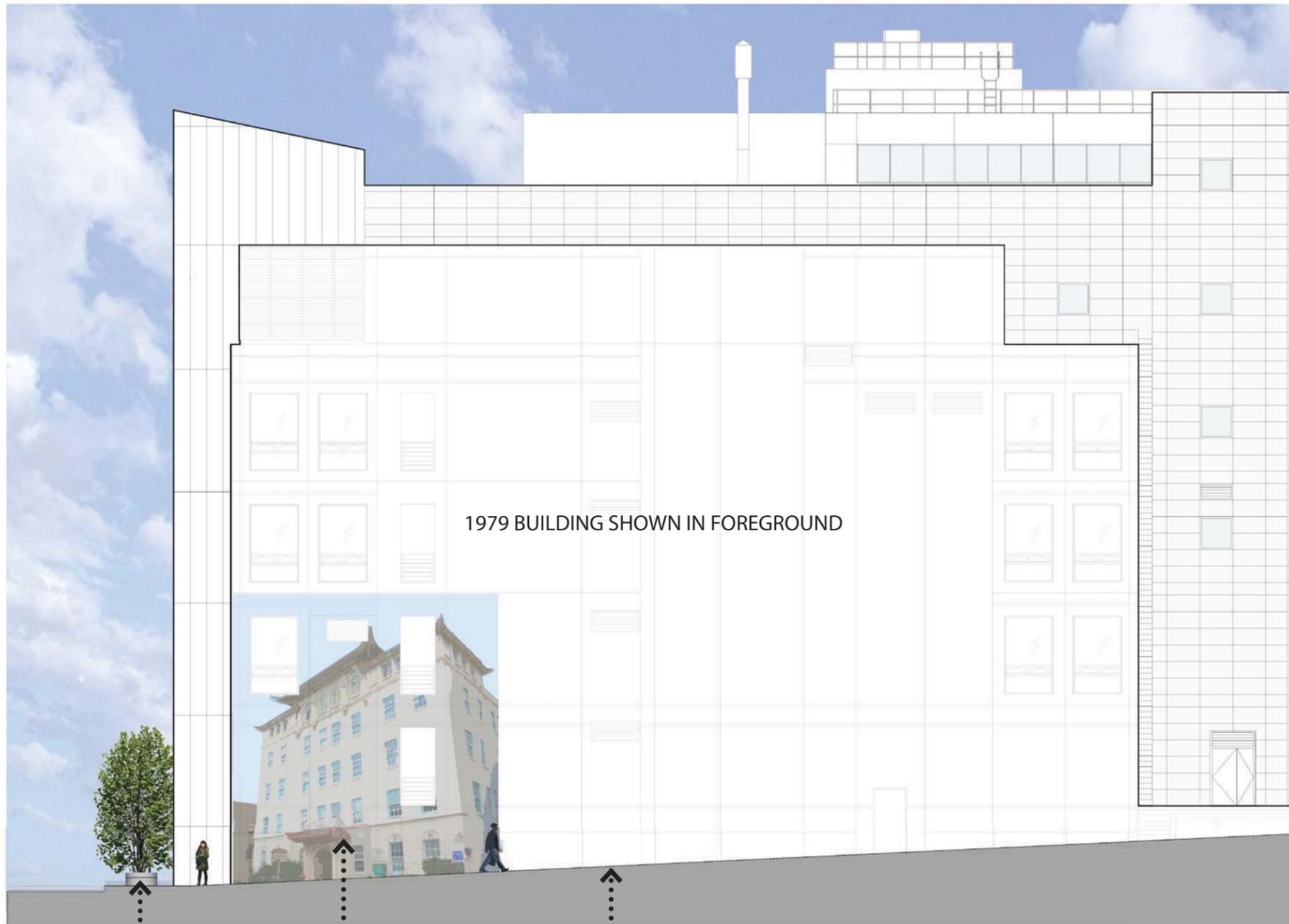
Metal...
Planter

...Concrete
Stairs

.....Planter
Pots

...Proposed Tree/
Tree Planter

.....Propose Street
Light



1979 BUILDING SHOWN IN FOREGROUND

Proposed Tree/.....
Tree Planter

.....Mural

.....Scored Concrete Paving
Alternate- Concrete Pavers



Concrete.....
Pavers

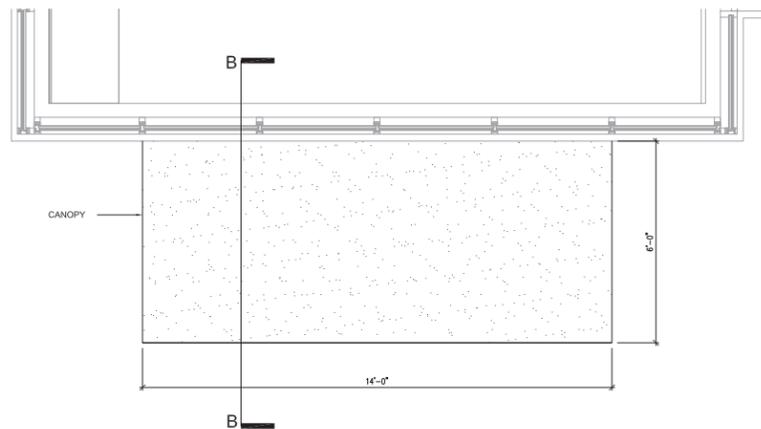
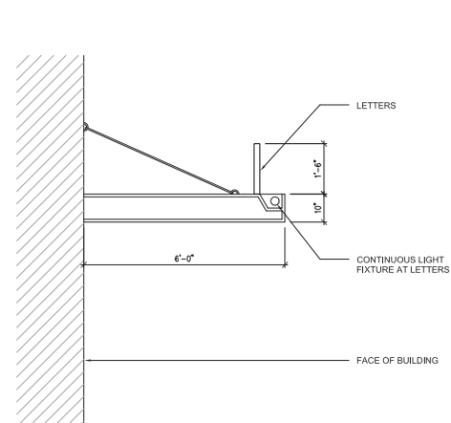
.....Planter
Pots

.....Proposed Street
Lights



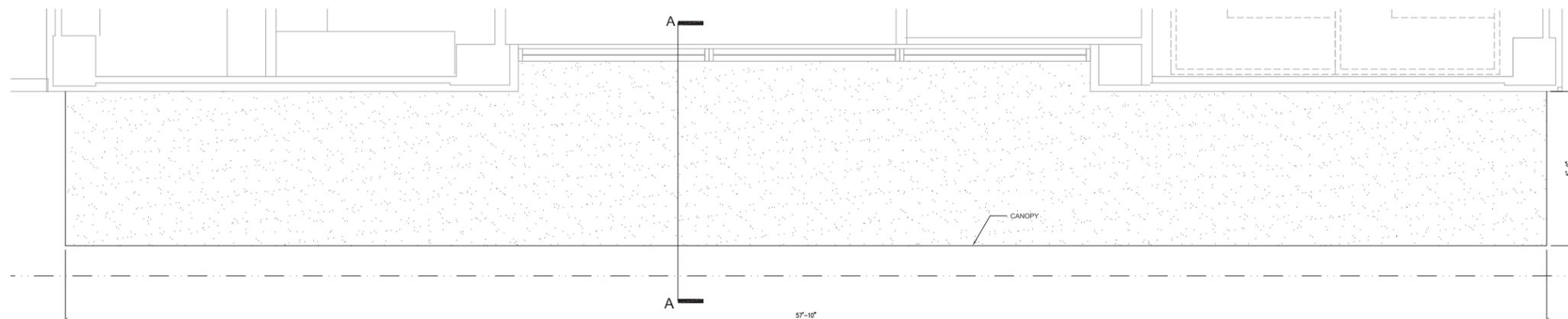
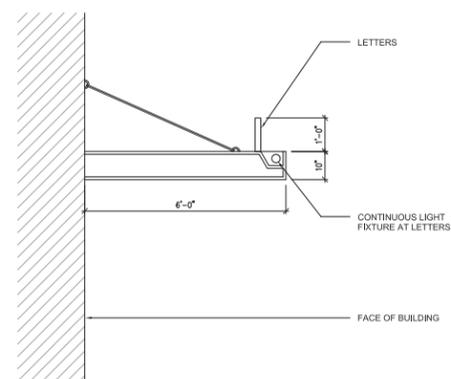


3 NORTH ELEVATION
3/16" = 1'-0"



2 SECTION B-B
1/2" = 1'-0"

5 PLAN
1/2" = 1'-0"



1 SECTION A-A
1/2" = 1'-0"

4 PLAN
1/2" = 1'-0"









Chinese Hospital



MAB—835 Jackson



Hospital—845 Jackson Street

SW View of Jackson Street From Stockton Street



SE View of Jackson Street From Powell Street



NW View of Jackson Street From Stockton



NL Jackson Street between Powell & Stockton Streets

Powell Street



890 Jackson Street

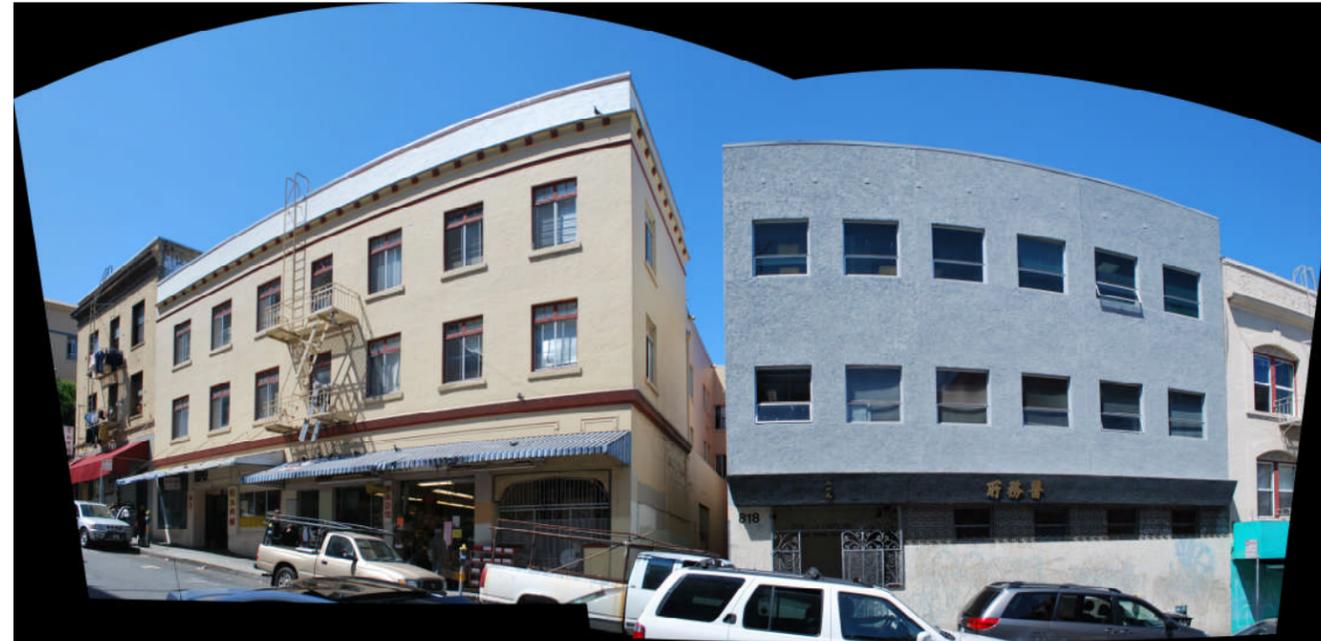


864-872 Jackson Street

848-852 Jackson Street



846 Jackson Street



826-838 Jackson Street

814-820 Jackson St



1101-1105 Stockton Street

Stockton Street

SL Jackson Street between Stockton & Powell Streets

Stockton Street



801-803 Jackson Street



821 Jackson Street



Chinese Hospital MAB
835 Jackson Street



Chinese Hospital
845 Jackson St



855 Jackson Street



1164-1170 Powell Street

Powell St