PLANNING & TRANSPORTATION DIVISION

TO: PLANNING & TRANSPORTATION COMMISSION
FROM: Steven Turner
Advance Planning Manager
DEPARTMENT: Planning & Community Environment
AGENDA DATE: May 11, 2011
SUBJECT: Stanford University Medical Center Facilities Renewal and Replacement Project: Request by Stanford Hospitals and Clinics, Lucile Packard Children’s Hospital and Stanford University School of Medicine (Applicant) on behalf of the Board of Trustees for the Leland Stanford Junior University for review and recommendation to the City Council regarding amendment to the Comprehensive Plan and Zoning Code; approval of a Development Agreement and Conditional Use Permit; acceptance of Area Plan and other related entitlements to permit the Stanford University Medical Center (SUMC) Facilities Renewal and Replacement Project, including demolition of the existing Stanford Hospital and Clinics (SHC), construction of new hospital buildings, renovation and expansion of the Lucile Packard Children’s Hospital (LPCH), reconstruction of the School of Medicine (SoM) facilities, and construction of new medical office buildings and parking structure, as well as the renovation of the Hoover Pavilion. Environmental Assessment: A Final Environmental Impact Report has been prepared. Zone District: Public Facilities (PF) and Medical Office/Research (MOR).

RECOMMENDATION
Staff recommends that the Planning & Transportation Commission take the following actions, which would then be forwarded to the City Council:

1. California Environmental Quality Act
   A. Recommend certification of the Final Environmental Impact Report;
   B. Recommend adoption of a resolution containing California Environmental Quality Act Findings and a Statement of Overriding Considerations;
2. Land Use
   A. Recommend approval of the resolution adopting changes to the Comprehensive Plan to recognize taller building heights at SUMC, to exclude hospital, clinic and medical school use areas from the citywide and area specific non-residential growth limits, and changes to the Comprehensive Plan Land Use Map;
   B. Recommend adoption of an ordinance amending the municipal code to establish a new “Hospital” zone district and amending the sign code and tree code to be consistent with the Hospital Zone regulations;

3. Entitlements
   A. Recommend adoption of an ordinance approving a thirty-year development agreement between the City of Palo Alto and the Applicants that would grant certain development rights in exchange for certain public benefits'
   B. Recommend adoption of a Record of Land Use Action approving a conditional use permit that would allow specific hospital, medical office, and related uses in the Hospital Zone;

4. Administrative
   A. Recommend adoption of a Resolution annexing an approximate 0.65 acre site from Santa Clara County;
   B. Recommend acceptance of SUMC Area Plan Update, and
   C. Review Architectural Review Board findings and Historic Resources Board comments and forward to City Council.

EXECUTIVE SUMMARY
The Stanford University Medical Center (SUMC) comprises the general area between Sand Hill Road, Vineyard Lane, Quarry Road, Pasteur Drive, and including Welch Road and Blake Wilbur Drive. The area is zoned Medical Office and Medical Research (MOR) and Public Facilities (PF). The applicant is proposing the demolition of the existing Stanford Hospital and Clinics (SHC), construction of new hospital buildings, renovation and expansion of the Lucile Packard Children’s Hospital (LPCH), reconstruction of the School of Medicine (SoM) facilities, and construction of new medical office buildings and parking structure as well as the renovation of the Hoover Pavilion to meet State mandated seismic safety standards (SB 1953) and to address capacity issues, changing patient needs and modernization requirements. The renovation and expansion project, which would be constructed over a 20-year horizon, would result in a net increase of approximately 1.3 million square feet of hospital, clinic, and office space.

This staff report discusses the package of entitlements requested by Applicant and recommends that the Planning and Transportation Commission make the following recommendations to the City Council:
• Certify the Final Environmental Impact Report for the Project and Adopt a Statement of Findings and Statement of Overriding Considerations,
• Adopt Comprehensive Plan Amendments to:
  o Change in land use designations at 701 and 703 Welch Road from the Research/Office Park land use designation to the Major Institution/Special Facilities land use designation;
o Annexation to the City of Palo Alto of a 0.65-acre property within Santa Clara County jurisdiction with a Major Institution/Special Facilities land use designation to be applied to this property;

o Modify the text of Program L-3 to identify the hospital zone as an exception to the 50-foot citywide limit due to the Medical Center’s unique needs, and

o Amend Policy L-8 to clarify that the hospital, clinic and medical school and treatment uses are exempt from the development cap.

• Adopt Zoning Code and Map Amendments to:
  o Create a new “Hospital District”;
  o Rezone 701 and 703 Welch Road from Medical Office Research (MOR) to the new “Hospital District”;
  o Clarify treatment of Protected Trees in Hospital Zone;
  o Clarify treatment of freestanding signs in Hospital Zone; and
  o Pre-zone the site to be annexed to the City to the new “Hospital District”.

• Approve a 30-year Development Agreement that would vest Applicant’s rights to develop the Project in exchange for a robust package of community benefits;

• Forward Architectural Review of the SHC, LPCH, Foundations in Medicine Building 1 (FIM1), Medical Office Building and Parking Structure at the Hoover Pavilion Site, Hoover Pavilion Renovations, Surface Improvements for Welch Road and Durand Way, and SUMC Design Guidelines;

• Approve a Conditional Use Permit that would allow specific hospital, medical office, and related uses in the Hospital Zone as discussed in the FEIR, and

• Acceptance of the SUMC Area Plan Update prepared by the Stanford University in collaboration with the City of Palo Alto.

PROJECT DESCRIPTION

1. Stanford Hospitals and Clinics

Stanford Hospital provides both general acute care services and tertiary medical care for patients locally, nationally and internationally. Stanford Clinics contains the group practice of most faculty physicians of Stanford University School of Medicine. SHC is currently licensed by the State of California to operate 613 beds, but is currently operating at a 456 bed level. In order to viably meet current and future demand, its projected need requires an increase of 144 beds. The application materials describe the SHC as follows:

• The new SHC would build approximately 1,100,000 gross square feet of facilities, which will include surgical operating suites, new diagnostic and treatment suites, new emergency department and associated nursing and support space. This space would primarily consist of five, connected towers extending 130-feet to the parapet and 180-feet to the top of the helipad elevator;

• There would be a new addition of 429,000 gross square feet to house clinics, medical offices, and administrative offices on the Main SUMC site;

• The existing D, E and F nursing units would be renovated and reused; as will the remaining 1989 Hospital Modernization Project (HMP) building to house diagnostic and treatment space and other supporting functions such as materials management, clinical laboratory, and physician and administrative offices;

• Demolition of a total of approximately 705,000 square feet of existing facilities on the site
which includes 441,201 gsf of the original medical center complex, commonly referred to as the Stone Building (East Building, West Building, Core Building and Boswell Clinics Building); 223,850 gsf of the existing Core Expansion Building and 40,100 gsf of the 1101 Welch Road structures;

- Replacement of 456 hospital beds; addition of 144 new hospital beds for a total of 600 beds;
- Construction of a new four level above-grade and three level below-grade parking garage containing approximately 970 automobile parking spaces, bicycle parking facilities, and a rooftop landscaped area, including meeting room areas and wellness center;
- Site improvements and landscaping, including the development of a “Medical Center Promenade” connecting various hospital and university uses at the SUMC campus, a medicinal garden, a main entrance with shared spaces for automobiles and pedestrians, and outdoor spaces for café-style seating, and
- At SHC, automobile parking would be available in a new four level above-grade and three level below-grade parking garage at the Welch Road/Pasteur Drive intersection. A total of 970 parking spaces would be provided in this facility. Access would be from Welch Road and Pasteur Drive. The Emergency Department entrance/parking would be along Pasteur Drive side of the new SHC Hospital building.

The new Stanford Hospital has been designed by Rafael Vinoly Architects, based in New York City. Highlights of the new hospital’s architecture and design are included in Attachment I-J. A complete set of plans for the hospital are included in Attachment II-B.11.

In the first phase, construction of the five connected hospital towers, emergency department, and parking structure, renovation of the D, E, and F nursing units, associated demolition and site improvement activities would take place. The clinics building would be constructed later. The Applicant has not requested architectural review approval for the clinics at this time.

2. Lucile Packard Children’s Hospital
The existing LPCH facility requires expansion to serve additional children and families, and to accommodate modern healthcare standards. The expansion of the LPCH is designed to promote family-centered care and create welcoming and safe healing environments by balancing the hybrid needs of clinical research advancements with the specialized needs of pediatric and obstetric patients and their families.

The Applicant proposes to construct a new hospital addition on the properties located at 701 and 703 Welch Road, at the corner of Quarry and Welch Roads. This new addition will become the key entry point to the medical center. The existing LPCH hospital facility would continue to house inpatient beds as well as diagnostic, treatment, clinical, and support services. The LPCH project will include the following components:

- Demolition of approximately 80,000 square feet of the 701 and 703 Welch Road buildings and the existing parking lot north of the Falk building;
- Construction of approximately 521,000 square feet of new surgical operating suites, diagnostic and treatment suites, and associated nursing and support space. This space would be an expansion of the existing children’s hospital and would serve at its main entrance. The building height would extend to 85-feet to the parapet;
• Addition 104 new patients beds to the existing 257 beds currently in use for a total of 361 beds, in addition to surgical operating suites, diagnostic and treatment suites, and associated nursing and support space;
• Construction of a three level below-grade parking garage to be accessed from Welch Road containing approximately 430 automobile parking spaces, and
• Site improvements and landscaping, including retention of mature redwood tree grove at the corner of Welch and Quarry Roads, landscaping and garden spaces specifically designed for various users of the hospital.
Perkins + Will in association with Hammel, Green and Abrahamson, Inc. (HGA) have designed the new addition LPCH. Highlights of the new hospital’s architecture and design are included in Attachment I-J. A complete set of plans for the hospital are included in Attachment II-B.11.

3. Hoover Pavilion Site
The Hoover Pavilion site is an area of approximately 10 acres located at the corner of Palo and Quarry Road between El Camino Real and Arboretum Road. The site includes approximately 84,200 square feet of the existing Hoover Pavilion, 7,400 square feet within the Arboretum Children’s Center, and 13,800 square feet of miscellaneous shops and storage outside of the Hoover Pavilion Building.

Hoover Pavilion was constructed as the Palo Alto Hospital, in operation from 1930 to 1939. The building is T-shaped in plan with a five-story central block, six-story tower, and four-story wings. It is Art Deco in style, which is represented in the ziggurat form, vertical emphasis of window bays, and stylized floral and geometric terra cotta panels and fixtures.

In brief, components of the SUMC Project and the Hoover Pavilion Site development include:

Renovation of the existing Hoover Pavilion
• Retention of the 84,000 square foot Hoover Pavilion building, to be used for SHC clinic-related uses, as it is used currently. Interior renovations and reconfiguration for medical office uses. Healthcare providers who currently lease space at 701, 703 and 1101 Welch Road would be offered leases in the Hoover Pavilion;
• Demolition of approximately 13,800 square feet of industrial shops and storage to accommodate the construction under the SUMC Project;
• Removal of existing mechanical penthouses and construction of new mechanical penthouses on the roof of the south wing, east wing, and fifth floor of the tower at the north façade;
• Repair of exterior concrete walls;
• Alterations to main (north) façade entrance bay;
• Window repair and replacement, removal of window air conditioning units;
• New exterior stairway on the south façade of the south wing;
• Structural, mechanical, plumbing, and electrical upgrades;
• Site improvements and landscaping, and
• Retention of the existing 7,375 sf Arboretum Child Care Center.

Adjacent New Construction
• Construction of a new 60,000 square foot Medical Office Building (MOB) northwest of the Hoover Pavilion;
• Construction of a new 55-foot high Parking Garage west of the Hoover Pavilion with 1,085 parking capacity that has six above-grade levels and three below-grade levels, and
• Site improvements and landscaping that would connect the medical office building, parking garage and Hoover Pavilion.

WRNS Studio, LLP and Bellinger Foster Steinmetz Landscape Architects have designed the new MOB and parking structure and its landscaping respectively. Highlights of the new hospital’s architecture and design are included in Attachment I-J. A complete set of plans for the Hoover renovations, the MOB, and parking structure are included in Attachment II-B.11.

4. School of Medicine
The site for the SoM replacement facilities is generally the site of the existing facilities to be replaced. The four buildings occupied by SoM within the City’s boundaries are designated as Edwards, Lane, Alway and Grant. The site includes these four buildings as well as an existing landscape area currently developed as a forecourt/garden immediately north of the Center for Clinical Sciences Research (CCSR) building. The site abuts the boundary between the City of Palo Alto and Santa Clara County campus lands.

According to the applicant, these buildings no longer serve the medical center’s clinical and translational research needs and must be replaced. Currently, the buildings house the primary faculty offices, research laboratories and administrative support for 13 of the School’s 28 academic departments, including the departments of Medicine, Neurology, Neurosurgery, Obstetrics & Gynecology, Orthopedic Surgery, and Pediatrics. In addition, the applicant has stated that upgrading the existing buildings to accommodate changes to the building requirements for occupancy separation, exiting, mechanical systems, circulation, laboratory support, and Americans with Disabilities Act requirements could only be accomplished at great cost and would result in inefficiencies in the use of space. As per the application materials, construction of the SoM would include the following components:
• Demolition of approximately 415,000 square feet of the existing School of Medicine, including buildings Edward, Lane, Always, and Grant;
• Construction of approximately 415,000 square feet within three Foundations in Medicine Buildings (FIM1, FIM2 and FIM3), and
• Site improvements and landscaping.

FIM1 would be the first SoM building to be constructed as part of this project. The architect for the School of Medicine building is Zimmer Gunsul Frasca Architects and Tom Leader Studio is the landscape architect. FIM1 is proposed to be a four story building with a basement, located at the southwest corner of the SUMC project site, adjacent to Pasteur Drive, Governor’s Avenue, and the CCSR. The gross floor area would be approximately 168,000 square feet. Building heights would be approximately 68’ to the top of the building parapet and approximately 80’ to the top of the mechanical penthouse screen.

In the first phase, construction only FIM1 would be built. FIMs 2 and 3 would be constructed later. The Applicant has not requested architectural review approval for FIMs 2 and 3 at this time. Highlights of the new hospital’s architecture and design are included in Attachment I-J. A complete set of plans for FIM1 are included in Attachment II-B.11.
5. **Surface Improvements for Welch Road**
The Applicant has proposed surface improvements for Welch Road and Durand Way in order to accommodate the new SUMC Project. These improvements include the following components:

- Welch Road would be widened from two to three lanes to provide a dedicated left-turn lane in both directions, and it would continue to serve vehicle circulation within the SUMC, connecting Quarry Road to Pasteur Drive and to Campus Drive.
- Durand Way, a four-lane connector road, would be constructed between Sand Hill Road and Welch Road to provide additional Medical Center access from Sand Hill Road (at the current signal). No demolition of existing structures would be necessary to construct Durand Way. This connector road would extend into the Advanced Medicine Center.
- A new driveway would be constructed with ingress and egress from Welch Road serving the SHC Emergency Department. A second new driveway would be provided for public access to the ED, along with a small area for patient drop-off;
- Two new driveways would be installed to the east and to the south of the proposed new LPCH Hospital addition; these driveways would provide drop off access and access to the new LPCH loading area.
- Signalized intersections at the vicinity of LPCH and Durand Way would improve traffic flow and safety for pedestrians; and
- Coordinated landscaping along the length of Welch road, including sidewalks, street trees and ground level plantings; landscaped roadway islands would also be installed.

A complete set of plans for the Welch Road improvements are included in Attachment II-B.11.

6. **Design Guidelines**
The Medical Center Design Guidelines provide a basis from which to better understand the architectural implications of new projects within the four districts that make up the medical center. The SUMC Design Guidelines document serves the following functions:

- A document that provides illustration of the variety of architectural expressions that would be allowed for development of the SUMC project while promoting a cohesive campus environment, with enhanced connections to Stanford University. It is a document to be used to evaluate future development at the SUMC sites;
- The Design Guidelines provides a basis from which to understand the architectural implications and connections between the different projects within the medical center. They express the similarities and differences of the new project components and how they contribute to a cohesive identity, and
- The Design Guidelines includes sections on: Site Design (Site Design, Main Circulation, Parking, Public Access Streets, Open Spaces, and Pathways), Building Design (Visual Hierarchy, Density Pattern and Context, Massing and Building Composition, Material Palette, and Entry Expression), and Connective Elements (Paving, Planting, Lighting, Signage, and Shared Amenities). In addition, there is an Appendix that describes the approach to preservation at Hoover Pavilion and the future SHC Clinics.

To that end, the Medical Center Design Guidelines seek to provide consistent and equal representation of all the proposed SUMC projects.

WRNS Studio LLP has prepared the design guidelines for the SUMC. The Design Guideline document is included in Attachment II-B.11.
ENTITLEMENT DESCRIPTION

Environmental Impact Report and Statement of Overriding Considerations
A Draft EIR, pursuant to the California Environmental Quality Act (CEQA), was prepared by the City of Palo Alto to disclose the potential environmental effects of the SUMC Project. The Draft EIR includes a description of the SUMC Project, an assessment of its potential effects, a description of possible mitigation measures to reduce significant effects that were identified in the Draft EIR, and a consideration of alternatives that could address potential impacts.

An extended 69-day public review period for the Draft EIR began on May 20, 2010 (CEQA typically requires a 45-day review period). During the public review period, the document was reviewed by various State, regional, and local agencies, as well as by interested organizations and individuals. Comment letters on the Draft EIR were received from 10 public agencies, three City Council members, three private organizations and 34 private individuals. The public review period also included six Planning and Transportation Commission (Commission) hearings, five City Council hearings, one Architectural Review Board (ARB) hearing, and one Historic Resources Board (HRB) hearing, for a total of 13 public hearings. The Commission and City Council hearings were open to the public and comments during the hearings were received from members of the public, commissioners, City Council members, and members of the ARB and HRB. The public review period ended on July 27, 2010. There were over 1,000 individual comments on the Draft EIR.

Response to Comments
At the conclusion of the public review period, City staff began the process of responding to the comments. The result of the process was the preparation of a Response to Comments document. It contains the public comments received on the Draft EIR, written responses to those comments, and changes made to the Draft EIR in response to the comments. This document was completed in February 2011. Details regarding the Final EIR Responses to Comments can be found in the Staff Report for the Planning and Transportation Commission meeting held on March 9 and 23, 2011 (Attachment II –A.1).

The Staff-Initiated Changes and Master Responses presented below are included in the Final EIR Responses to Comments document and address the following topics:

Staff-Initiated Changes
- Staff-Initiated Change 1: Quantified SUMC Project Transit Analysis
- Staff-Initiated Change 2: Changes to Intersection Impact Conclusions
- Staff-Initiated Change 3: Changes to Analysis of Cumulative Health Risk from Toxic Air Contaminants
- Staff-Initiated Change 4: Changes to Calculation of Greenhouse Gas Emissions and Climate Change Analysis of the SUMC Project and its Alternatives
- Staff-Initiated Change 5: Impacts of the Proposed Hoover Pavilion Renovation and Site Development on the Hoover Pavilion’s Potential Status as a Historic Resource
- Staff-Initiated Change 6: Changes to Protected Tree Numbers and Mitigation Measures Under the SUMC Project and the Tree Preservation Alternative
• Staff-Initiated Change 7: Changes to Table 3.13-8, SUMC Project 2025 Indirect Housing Demand by County/City Based on Existing SUMC Employee Zip Code Distribution
• Staff-Initiated Change 8: Changes to Trip Generation and Level of Service Analysis of Alternatives to the SUMC Project

Master Responses
• Master Response 1: Viability of the Caltrain GO Pass Mitigation Measure and Alternative Mitigation Measures to the GO Pass
• Master Response 2: Other Traffic Mitigation Measures
• Master Response 3: Background Growth and Cumulative Traffic Impacts
• Master Response 4: Construction Traffic
• Master Response 5: Connection of Pasteur Drive and Roth Way
• Master Response 6: Cost of Transportation-Related Mitigation Measures and Fair Share Calculations
• Master Response 7: Impact on City’s Jobs to Employed Residents Ratio and Mitigation Regarding Affordable Housing
• Master Response 8: Range of Alternatives Analyzed and Consideration of Alternatives in the SUMC Project Approval Process
• Master Response 9: Merits of the SUMC Project and Alternatives
• Master Response 10: Response to Comments Not Applicable to CEQA and Not Applicable to SUMC Project
• Master Response 11: City Process for Reviewing and Deciding on SUMC Project
• Master Response 12: Development Agreement

A summary of the Staff Initiated Changes and Master Responses are contained in Attachment II-A.

Together, the previously released Draft EIR (May 2010) and the Responses to Comments document (Volumes I and II, February 2011) constitute the Final EIR. The responses and revisions in the Final EIR substantiate and confirm or correct the analyses contained in the Draft EIR. It should be noted that no new significant environmental impacts and no substantial increase in the severity of an earlier identified impact have resulted from responding to comments.

Resolution Certifying Final EIR and Approving Mitigation Monitoring and Reporting Program
A resolution certifying the adequacy of the Final EIR and adopting the Mitigation Monitoring and Reporting Program (MMRP) is included for review as Attachment I-A. The CEQA Resolution summarizes the findings of the Final EIR and makes the necessary statutory findings required to certify the Final EIR. The MMRP contains a comprehensive list of mitigation measures for the project and designates the agency responsible for monitoring compliance. References to the MMRP are incorporated into the Project Conditions of Approval as well as the Development Agreement to ensure their enforceability. As the project involves certain impacts that cannot be mitigated, a Statement of Overriding Considerations (SOC) must be adopted by the City Council before it can approve the Project. A SOC represents the City Council’s views on the ultimate balancing of the merits of approving the Project despite the significant and
unavoidable environmental impacts identified in the FEIR. A discussion of the SOC is provided below in the Environmental Review section, below.

**Comprehensive Plan Amendment**
The Applicant is seeking amendments to the City’s Comprehensive Plan. These amendments would result in changes to the Comprehensive Plan Land Use Map and modify language to specific policies and programs that directly relate to the Project. These changes would only affect sites within the Project area.

The Applicant has requested the following changes in land use designations at several locations within the Project site:
- Change in land use designations at 701 and 703 Welch Road from the Research/Office Park and use designation to the Major Institution/Special Facilities land use designation.
- Annexation to Palo Alto of a 0.65-acre property within Santa Clara County jurisdiction with a Major Institution/Special Facilities land use designation to be applied to this property.

In addition, the Applicant has proposed changing the text associated with Program L-3 of the Comprehensive Plan. Program L-3 states that the City will maintain and periodically review height and density limits to discourage single uses that are inappropriate in size and scale to the surrounding uses. The discussion following Program L-3 refers to the City’s historic 50-foot height limit. As proposed, some portions of the SUMC Project would exceed the current limit by approximately 80 feet. Accordingly, the Applicant requests the applicable Comprehensive Plan language be modified to identify the hospital zone as an exception to the 50-foot citywide limit due to the Medical Center’s unique needs.

City staff has proposed an additional change to the Comprehensive Plan to clarify Policy L-8. Policy L-8 directs the City to maintain a limit of 3,257,900 square feet of new nonresidential development within nine planning areas evaluated in a 1989 Citywide Land Use and Transportation Study. On a citywide basis, there is 1,944,090 square feet of development potential remaining under the Comprehensive Plan policy. The Comprehensive Plan also divides the City into nine distinct areas for transportation monitoring and the SUMC Project is located in Planning Area 9. Under a strict reading of the Comprehensive Plan each planning area also has development caps. At the time the Comprehensive Plan, most public facilities and institutional uses were exempt from the area specific cap; however, due to an apparent oversight it appears that the SUMC uses were not exempted. Accordingly, City staff has suggested a modification of the text of this policy to specify that neither the citywide nor the Planning Area 9 cap is meant to apply to hospital, clinic and medical school uses.

A discussion of these requested amendments is provided below in the Policy Impacts section. The Comprehensive Plan amendment resolution is provided in Attachment I-B.

**Hospital District Zoning Ordinance**
The Applicant has requested an ordinance that would establish a new zoning district for the Project area. The new zone district would be designated as “Hospital District” (HD). The purpose of the HD district would be to accommodate medical and educational uses including the SHC and LPCH, medical, office, research, clinic and administrative facilities at the Hoover Pavilion site, and SoM buildings in a manner that balances the needs of hospital clinic, medical
offices and research uses with the need to minimize impacts to surrounding areas and neighborhoods.

The HD would allow, by right or through the issuance of a conditional use permit, land uses related to the functions and operations of SUMC. Most health care services, including hospitals, medical offices, and medical research would require a conditional use permit. Educational uses, such as private universities and activities related to the Stanford University SoM, would also require a conditional use permit. As part of the entitlement process, the City has prepared a conditional use permit for Commission and City Council review, which is provided in Attachment I-E.

The HD would also include the following Development Standards:

- The maximum FAR for the area for the Main SUMC Site would be 1.5 to 1. FAR would be calculated based on the total contiguous area within this zone, rather than on a parcel by parcel basis. The maximum FAR for the Hoover Pavilion Site would be 0.5 to 1. Rooftop, basement, interstitial space, and interior areas used to enclose mechanical equipment would be excluded from floor area calculations;
- The maximum site coverage for the inboard Welch Road area would be 40 percent of the site area. The maximum site coverage for the Hoover Pavilion Site would remain at 30 percent. Parking facilities would not be counted in determining site coverage. Site coverage would be calculated based on the total contiguous area within this zone, rather than on a parcel by parcel basis;
- The maximum height on the Main SUMC Site would be 130 feet and the maximum height on the Hoover Pavilion Site would be 60 feet (for new structures). Helicopter pads on top of buildings would be excluded from height calculations;
- No yard adjoining a street would be less than 10 feet, measured from the curb to the base of the buildings and not including any awnings or other projections. This setback requirement would not apply to below-grade parking facilities or portions of buildings that bridge a street;
- No standards would be specified for the site area, including width or depth;
- Regulations governing accessory facilities and uses, and the application of site development regulations in specific instances would be established by Chapter 18.42;
- Parking requirements would be performance-based, as established during review of project design. Parking would be provided to meet projected needs, with consideration given to the potential for reduced parking demand due to the proximity of the PAITS, and
- Tree preservation would be based on regulations specifically proposed for the HD. In the HD, specific trees would be categorized into two groups based upon their “Biological” and “Aesthetic” values. Group 1 trees, possessing both Biological and Aesthetic values, could not be removed (with exception of diseased or dead trees). Group 2 trees, possessing only “Biological” values (consistent with the existing definition of a Protected tree) could only be removed after issuance of a Tree Removal Permit and replaced according to specific ratios.

Other section of the City of Palo Alto Municipal Code (PAMC) would also be amended to modify specific requirements and for consistency with the HD, including:

- PAMC Title 8.10 (Tree Preservation) would be amended to recognize the HD and to refer to the specific requirements of the HD for tree preservation and removal requirements;
• PAMC Title 16.20 (Signs) would be amended to allow Freestanding sign taller than five-feet and Directory and Directional sign to extend up to twelve-feet in height and not to exceed thirty square feet in area;
• PAMC Title 18.08.010 (Designation of General Districts) would be amended to include the HD and the chapter number in the table of districts, and
• PAMC Title 18.08.080 (Zoning Map and District Boundaries) would be amended to include the HD on the zoning map.
The HD Ordinance is provided in Attachment I-C.

Development Agreement
The California Planning and Zoning Law authorizes cities to enter into “development agreements” which grant certain rights to developers, typically in exchange for other benefits which cities otherwise do not have the police power to require. The scope of a development agreement is prescribed by State law (Government Code section 65864-65869.5.). A development agreement has the effect of immediately vesting a developer’s right to proceed under existing zoning and other local laws, without having to worry about later changes in those zoning requirements imposing expensive new requirements or preventing the project from proceeding. Development agreements are also generally needed for bond financing. The Government Code imposes various requirements on development agreements, including a requirement that each development agreement specify its duration. Additional background information on development agreements is contained in the January 31, 2011 City Council Staff Report (Attachment II-C.1).

The Development Agreement for Commission and Council consideration is contained in Attachment I-D. An overview of the negotiation process, terms, and fiscal issues are contained in the Discussion section, below.

Annexation
In order to construct the new SoM Foundations in Medicine (FIM) buildings, a 0.65 acre portion of land immediately adjacent to Governor Lane and Pasteur Drive would need to be annexed from Santa Clara County to the City of Palo Alto. Prior to annexation, the site would first need to be pre-zoned to be consistent with the Main SUMC campus. If the City of Palo Alto supports the annexation, the process with Santa Clara County and the Local Agency Formation Commission (LAFCO) is a ministerial process. Annexation documents are contained in Attachment I-G.

Conditional Use Permit
As proposed in the HD ordinance, specific land uses at the SUMC would require a Conditional Use Permit (CUP). Staff has prepared a draft Record of Land Use Action (RLUA) for issuance of a CUP.
Under the proposed Hospital Zone, the major components of the Project would require Conditional Use Permits. As part of the Development Agreement negotiations, the City is processing the entire project under an umbrella CUP with more lenient vesting procedures than provided by the existing CUP process. In the event the Development Agreement is not approved, the Applicant has agreed to re-apply for separate CUPs for each major Project component.
Approval of a CUP requires the following findings under PAMC Section 18.76.010(c):
   a. Not be detrimental or injurious to property or improvements in the vicinity, and will
      not be detrimental to the public health, safety, general welfare, or convenience;
   b. Be located and conducted in a manner in accord with the Palo Alto Comprehensive
      Plan and the purposes of this title (Zoning).

The draft RLUA is contained in Attachment I-E.

Architectural Review
The Applicant’s entitlement request includes Architectural Review for the following project
components, as described earlier in the Project Description section:
1. Stanford Hospital and Clinics Main Hospital
2. Lucile Packard Children’s Hospital
3. Hoover Pavilion Renovations
4. Hoover Pavilion Site Development
5. School of Medicine, Foundations in Medicine Building 1
5. Welch Road Improvements
6. Design Guidelines

The items listed above represent the extent of the applicant’s request for Architectural Review.
The request for architectural review does not include the SHC clinics buildings (approximately
429,000 square feet) and Foundations in Medicine Buildings 2 and 3 (approximately 116,000
and 131,000 square feet, respectively). However, the overall Project as analyzed in the FEIR and
the applicant’s request for entitlements include the floor area for the SHC clinics and School of
Medicine buildings. The SHC clinics and School of Medicine buildings would require
Architectural Review prior to submittal for building permits.

Bruce Fukuji, the City’s Urban Design Peer Reviewer, has been involved in the architectural
review process for each component over the past three years. His peer review comments have
allowed the ARB to more easily focus on the important elements of design.

All of the Architectural Review staff reports, minutes of the meetings, Bruce Fukuji’s peer
review memos, and project plans are contained in Attachment II-B.

DISCUSSION

Development Agreement
Development agreements are mutually agreeable contracts and thus the parties have broad
latitude on negotiating terms. At a minimum, however, State law requires a Development
Agreement to specify the duration of the agreement, the permitted uses of the property, the
density or intensity of use, the maximum height and size of proposed buildings, and provisions
for reservation or dedication of land for public purposes. In addition, it is typical for a
development agreement to include a package of community benefits in exchange for the vested
rights conferred.

Based on preliminary input from the Council and the public, City staff proposed four major
guiding principles governing negotiation of specific deal terms:
1. **Minimize fiscal impacts to the City.** Ensure that the project does not have a negative fiscal impact on the City through focusing, among other things, on revenue guarantees and robust analysis of long term project expenses.

2. **Require project mitigation.** Ensure that zoning ordinance and Conditions of Approval adequately address all project mitigations. Ensure that the General Fund is not unfairly burdened with long term impacts of project.

3. **Preserve community health care.** Ensure that local benefits of hospital and clinics will be retained, while transitioning towards greater world class hospital status.

4. **Enhance City infrastructure.** Recognize mutual interest in preserving high standard of economic and community vitality. Partner with Stanford to fund the long-term infrastructure needs of the community (capital programs, housing, transportation, and broadband).

Over the past two years, City staff has been meeting with the Applicant to negotiate the terms of the Development Agreement. An important component of the negotiations has been the fiscal analysis reports prepared by the City’s consultant, Applied Development Economics (ADE) and Stanford’s consultant, CBRE. The City recently completed a comparative analysis of the annualized projection of fiscal impacts, based upon a revised CBRE report submitted at the beginning of the year.

On January 12, 2011, Stanford’s consultant CBRE informed the City that there had been a slight shifting of the SUMC Project phasing that could impact the fiscal analysis. City staff requested its fiscal consultant ADE to update its fiscal analysis to account for the updated project phasing and also to run the fiscal analysis through the life of the project (51 years), rather than the previous 31 years used by CBRE. The 51 year period better aligns with the project conditions imposed through the Development Agreement. An updated version of ADE’s Fiscal Report is included as Attachment II-D. ADE’s updated analysis projects a cumulative project related deficit for the City of $8.46 million in constant dollars over 51 years and CBRE’s extrapolated projection shows a surplus of approximately $6.5 million in constant dollars. Both projections assume that all projected revenues are realized (April 20, 2011 Policy & Services Committee Staff Report, Attachment II-C.3, Table 1).

Throughout the negotiating period, staff has updated the City Council on the progress of the negotiations. The pace of negotiations increased at the end of 2010 and the beginning of 2011. Although significant progress was made during the negotiation period, there were remaining items that had not been resolved, including a cost neutrality agreement as directed by City Council and identification of a reliable revenue stream before hospital employment is added and expenses incurred. Staff presented updates to the Council on January 31, March 15 (Finance Committee) and April 20, 2011 (Policy & Services Committee). Staff reports for these meetings are contained in Attachments II-C.2 and II-C.3. Immediately prior to the April 20 Policy & Services Committee meeting, the SUMC negotiating team presented an offer to the City to address the unresolved items.

**Summary of Terms of Agreement**

A Draft Development Agreement is included as Attachment I-D. Subject to approval by the Council; the respective negotiating teams have reached agreement on all of the principle terms of the agreement as well as the major scope of the community benefit package. Below is a summary outline of the key terms of the agreement as well as the proposed community benefits. A more
detailed discussion of these terms is contained in the April 20, 2011 Policy & Services staff report (Attachment II-C.3):

1. Duration of Agreement (Section 18(a)): The basic term of the Agreement is 30 years; however, there are certain obligations that are longer. These longer provisions include the indemnity provision and maintenance of the TDM program. A thirty year term exceeds the terms of other City Development Agreements, but given the scope and nature of this project, staff believes the extended term is warranted.

2. Permitted and Conditionally Permitted Uses (Section 6(b)): The permitted uses of the Property will be set forth in the Hospital District zoning ordinance (Attachment I-C). In general, hospital, clinic and school of medicine uses will be permitted subject to a conditional use permit.

3. Maximum height and density (Section 6(c)): The height and density of the buildings will be set forth in the Hospital District zoning ordinance. In general, the Hospital District will contain a 130 feet height limit, 40% site coverage and a maximum Floor Area Ratio of 1.5 to 1.0.

4. Reservation of Easements (Section 6(n)): With the exception of easements for City owned public utilities, the City will not require any easements for park or open space or other public facilities.

5. Payment of Fees (Section 8(b)): Applicants will pay all processing and permit fees in accordance with the rates in effect at the time the fee is due. With respect to existing Development Impact Fees (i.e. housing, transportation and community facilities), the proposed agreement has an incentive for pre-payment by providing that all fees paid prior to December 31, 2011, would be subject to the rates in effect at the time the agreement is signed. All impact fees paid between December 31, 2011 and December 31, 2019 would be subject to a CPI adjustment. Finally all fees paid after December 31, 2019 would be at the rates in effect at the time of payment, thus providing a disincentive for deferring payment of impact fees. The project would be exempt from new Development Impact fees until 2019.

6. Indemnity (Section 9): The SUMC Parties will indemnify the City in the event that a legal action is brought by a third party to set aside any of the project approval. In addition, the SUMC will pay for the City’s reasonable costs of defending such an action.

7. Periodic Review (Section 12): The SUMC Parties will file an Annual Report describing their progress on the Project and demonstrating compliance with the Development Agreement. In addition, the City shall submit a supplement to the Annual Report containing an accounting of all funds received under the Development Agreement. The Planning Department will be the lead on this task with Administrative Services assisting in validating information.

Summary of Community Benefits and Project Mitigations

**Health Care and Patient Services Benefit**

1. Health Care Services: Payment of $3,000,000 paid out over ten years to be used to assist residents of Palo Alto who have self-payment responsibilities beyond their financial means, to pay healthcare services. These funds shall be above and beyond SUMC’s existing charity care program and in addition to the federal Health Care program. The payment of this fund will be deferred in order to address the Cost Neutrality Agreement (see Fiscal section below).
2. Community Health Programs: One-time payment of $4,000,000 to be used for community based health and wellness programs. The agreement specifically authorizes the City to use a portion of this payment as seed money for Project Safety Net. This will be paid 45 days after the effective date of the Development Agreement.

Reduced Vehicle Trips
1. Stanford Hospitals will provide Go Passes to its hospital employees. Their estimated cost of this mitigation is $90,907,500 over 51 years. The parties have mutually worked out a TDM program that will provide for alternate TDM measures and/or penalties in the event an aggressive 35.1% alternative mode share is not achieved or Caltrain service is eliminated as a result of ongoing financial difficulties. At the City’s request, Stanford has agreed to begin funding the Go Pass program in 2015, well before project buildup.
2. To address the enhanced Go Pass program, SUMC will purchase and operate four new Marguerite shuttles to support service to and from the train station. The capital and operational cost over 51 years is $24,950,000.
3. Stanford will provide a permanent TDM Coordinator at the Hospitals in an amount of $5,100,000 over 51 years.
4. The Hospitals will contribute to AC Transit to address potential capacity issues caused by the project and will lease parking spaces at Ardenwood Park and Ride to encourage employees of the hospital to use AC Transit and other transit options. The total cost of these additional transit measures are $5,095,000.

Linkages
Stanford will fund various City improvements to enhance the pedestrian and bicycle connections, including enhanced pedestrian and bicycle connection for the Intermodal Transit Center to El Camino Real and Quarry; improvements to the ROW to enhance pedestrian and bicycle connection from west side of El Camino to Welch Road along Quarry Road, and improvements to enhance the pedestrian connection between the Medical Center and the Stanford Shopping Center in the area of the Barn. The total cost of these linkages is $3,350,000.

Infrastructure Capital Fund
Stanford will provide $23,060,490, of which approximately $2,000,000 represents the housing fee required for the clinics and the balance to be used by the City for other sustainable neighborhood and community development and affordable housing programs. This fund could be used for a wide variety of important infrastructure projects. This payment will be made in three equal installments timed to the construction phases.

Climate Change/Sustainable Communities
Stanford will make a contribution of $12,000,000 paid in three equal installments for use in projects and programs for a sustainable community also timed to the construction phases.

Fiscal issues
Immediately prior to the April 20, 2011 Policy and Services Committee meeting, SUMC presented City staff with a proposal to resolve the issues of cost neutrality, which had been highlighted as an area of disagreement between the City and SUMC. The April 20 staff report does not contain an analysis of the proposal, but it was discussed with the committee at the
meeting.

The fiscal benefits to be provided by SUMC include the following:
1. Stanford will provide a payment of $2.42 million to address the projected deficit of the project as analyzed by ADE. The deficit is a result of the gap between City revenues and expenditures generated by the project over time and represents the present value of the projected deficit as calculated by the City's economic consultant.
2. In addition Stanford will obtain a Use Tax Direct Payment Permit which will result in $750,000 over the life of the project.
3. Stanford will guarantee that the City will receive no less than $8.1 million in Construction Use Tax Revenue (CUTR) as a proxy for potential revenue leakage. In order to provide assurance of this guarantee, Stanford would use the funds originally dedicated for In/Outpatient services for low income residents, in the amount of $3 million, to be set aside by SUMC, increased at 4.5% per year through 2025, for a total of $5.6 million at 2025. In 2025, after the CUTR revenues have been reconciled, SUMC would use the $5.6 million to cover any shortfall of CUTR between what was received at the $8.1 million guarantee. The remaining balance of the $5.6 million would be used by the SUMC parties to support the original purpose of the fund, except that implementation would start in 2025.

The City negotiating team led by the City Manager believes that community benefit package is fair and reasonable and that the cost neutrality agreement mitigates any potential operating deficit resulting from the Project's property tax exempt status.

Note that the City and Stanford differ in their valuation of the total benefit package in that Stanford characterizes some of the required mitigations as community benefits. While they are, in fact, mitigations, City staff recognizes that the bulk of the mitigations also have an overall community benefit. Likewise many of the community benefits enhance the overall project. In total, City staff has valued the total community benefit package to be approximately $43,646,512 and Stanford has valued it to be $174,769,500. See Attachment I-D.

Conditional Use Permit
As described above, a conditional use permit would be required for many of the medical-related uses in the new HD district. Staff has prepared a draft Record of Land Use Action (Attachment I-E) for a Conditional Use Permit that would allow medical-related and other uses at SUMC, subject to conditions of approval.

Architectural Review Board Recommendation
Over the course of the past four years, each of the SUMC Project components has been reviewed by the Architectural Review Board (ARB) through a series of study sessions, preliminary reviews, and final ARB reviews. The following is a list of all ARB meetings for each component of the SUMC Project.
<table>
<thead>
<tr>
<th>Project Component</th>
<th>Date</th>
<th>Meeting Type</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Project Introduction</td>
<td>December 20, 2007</td>
<td>Study Session</td>
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<td>May 20, 2010</td>
<td>Study Session</td>
<td>Fly-Through Video Presentation &amp; Photomontages</td>
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<td>SUMC Design Guidelines</td>
<td>January 17, 2008</td>
<td>Study Session</td>
<td>SSC &amp; SUMC Guidelines</td>
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<td>April 3, 2008</td>
<td>Study Session</td>
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<td>June 12, 2008</td>
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<td>July 3, 2008</td>
<td>Joint Study Session</td>
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<td></td>
<td>August 5, 2010</td>
<td>Preliminary Review</td>
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<td>March 24, 2011</td>
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<td>Final Review</td>
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<tr>
<td>New Stanford Hospital (SHC)</td>
<td>June 19, 2008</td>
<td>Study Session</td>
<td>Joint Session for SHC &amp; LPCH</td>
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<td>October 20, 2008</td>
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<td>Final Review</td>
<td></td>
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<tr>
<td>Lucile Packard Children's Hospital (LPCH)</td>
<td>August 21, 2008</td>
<td>Study Session</td>
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<td>Hoover Site Development, including: a) Medical Office Building &amp; Parking Structure b) Hoover Pavilion Renovation</td>
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<td></td>
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<td>School of Medicine (SoM) Foundations In Medicine (FIM) 1 Building</td>
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<td></td>
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<td>October 21, 2010</td>
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<td>Final Review</td>
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<tr>
<td>Surface Improvements for Welch Road + Durand Way</td>
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<td>March 24, 2011</td>
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<td>Pre-Final Review</td>
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<td>Final Review</td>
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</table>
The ARB members evaluated each of the Project components by reviewed the proposed designs with elements contained in the Architectural Review Findings (PAMC 18.76.020(d)), including, but not limited to the following:

- Site development and planning;
- Pedestrian movements;
- Landscaping (including trees and other natural features), open space, hardscape materials;
- Automobile, bicycle parking and circulation;
- Signage and lighting;
- Building massing and contextual relationships;
- Exterior materials and finishes, and
- Energy conservation and green building features.

The Architectural Review Findings provide a basis from which to understand the architectural implications and connections between the different projects within the Medical Center. Hence, the SUMC Design Guidelines document was prepared in order to express the similarities and differences of the new project components and how they could contribute to a cohesive identity over the entire SUMC site.

Consequently, at the end of the ARB review process in April 2011, the ARB recommended approval of all of the SUMC Project components with recommended architectural conditions of approval. These recommendations are included in Attachment I-F.

**Tree Preservation Alternative**

During the course of the application review and comments from the ARB, major design changes were observed. One of the most significant project refinements was developed by the Applicant, which included minimizing tree impacts, providing more compact building footprints and expanding gardens and open space. The City discussed this refinement in the EIR as the Applicant’s preferred project, the Tree Preservation Alternative. The design of each Project component was revised on the basis of this alternative, which in turn preserved 74 protected trees on the entire SUMC site. These protected trees have been discussed earlier in the Tree Preservation Alternative Discussion section above.

The Tree Preservation Alternative primarily brought about the following major changes to the design of the new Stanford Hospital:

- Eliminated a tower from the Kaplan Lawn and incorporated that use into the remaining portions of the project preserving nine oak trees in this area. Each hospital module was reduced in size and all four modules were made equal in height. In addition, the hospital was enclosed at level 3 and the size of the central atrium was reduced to provide a more compact footprint;
- Changed the parking plan to include a parking garage off of Welch Road with a conference center and garden and wellness center on the third floor roof that connected to the Hospital. This parking garage was subsequently set back further from Welch Road to form a more cohesive landscaped and tree lined front; and
- Incorporated a landscaped area at the corner of Welch Road and Pasteur Drive.
All the trees to be removed would be required to be replaced, as proposed, in accordance with the ratios set forth in Table 3-1 of the City of Palo Alto Tree Technical Manual (TTM) in order to maintain the appropriate landscape approach at the SUMC. The difference between the required tree replacement and the number of trees planted at SUMC would be mitigated through contribution to the Forestry Fund in the City of Palo Alto. Payment to the Forestry Fund would be in the amount representing the value of the replacement trees that would be required under the TTM standard if appropriate replacement tree locations cannot be identified within the proposed “Hospital” district.

The following table summarizes the total number of protected trees on site and the manner in which they would be retained, replaced or transplanted for the SUMC Project.

<table>
<thead>
<tr>
<th>Site</th>
<th>Trees to be removed</th>
<th>Trees to be removed and replaced</th>
<th>Trees to be transplanted</th>
<th>Trees to remain</th>
<th>Total Number of Trees</th>
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<td>Stanford Hospitals and Clinics</td>
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<td>3</td>
<td>23</td>
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<td>Lucile Packard Children’s Hospital</td>
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<td>11</td>
<td>16</td>
<td>4</td>
<td>31</td>
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<td>Hoover Pavilion Site</td>
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<td>10</td>
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<td>25</td>
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<tr>
<td>School of Medicine Buildings</td>
<td>3</td>
<td>-</td>
<td>2</td>
<td>7</td>
<td>12</td>
</tr>
</tbody>
</table>

**Visual Quality**

The Draft EIR prepared for the project includes an analysis of how development of the SUMC Project would affect the existing visual quality of the SUMC Sites and the vicinity. Visual quality pertains to how people see and experience the environment, particularly its visual character. A detailed discussion regarding how the existing visual quality is addressed on the SUMC sites and the vicinity is included in the ARB staff reports for each project component (See Attachments II-B.2 to II-B.7).

Over the course of the four-year design review process, changes were made to the Project components that resulted in better consistency with the Architectural Review Findings. The site planning and design revisions that resulted in the Tree Preservation Alternative is a primary example of the efforts of the City, the Applicant and the ARB to design a Project that has dramatically improved from the start of the process.

The design drawings submitted by the Project applicant and reviewed by the ARB responded to each of the Visual Quality impacts identified in the Draft EIR, and were thus found to be consistent with the Architectural Review Findings. The ARB recommended approval of each of the Project components. The ARB staff reports and minutes from the final review meeting are located in Attachment II-B.

**Historic Review and Historic Review Board Comments**

In preparation for the environmental analysis, the consulting firm Architectural Resources Group (ARG) provided descriptions and assessments of a number of potential resources within the SUMC sites. Each resource was evaluated using the standards for eligibility for listing on the California Register of Historical Resources (CRHR) and the National Register of Historic Places (NRHP). Part of the evaluation process includes determining if the resource maintains integrity,
as identified by the National Parks Service. ARG’s report is contained within the Draft EIR in Attachment I. The resources that would be affected by the SUMC Project include Hoover Pavilion and the Stone Building.

**Stone Building Complex**
The Stone Building complex (also referred to as the 1959 Hospital Building complex), constructed in 1959 and 1963, is a large three-story building with two wings projecting from the main block to form a forecourt with a central fountain. Interior courtyards are located throughout the building complex. Originally the joint Palo Alto-Stanford Hospital and Stanford University Medical School, the building complex was designed by Edward Durell Stone and the landscaping was designed by Thomas Church.

Evaluation and analysis of the Stone Building Complex was performed by Stanford University as part of the SUMC application submittal and peer reviewed ARG for the environmental analysis. Although the Stanford University analysis found that the Stone Building Complex was not a historic resource, ARG concluded that it appeared eligible for listing on the CRHR and should be considered a historical resource for purposes of the City’s CEQA review. This conclusion was supported by the City of Palo Alto’s Historic Preservation Planner.

The SUMC project would result in the demolition of the Stone Building Complex. Since the building is to be considered as a historical resource for purposes of CEQA review, demolition would result in a significant and unavoidable impact. As described above in the Environmental Review section, City Council would need to adopt a Statement of Overriding Considerations that would allow demolition of a historic resource.

**Hoover Pavilion**
The Hoover Pavilion is not currently listed on the National Register or the California Register. The property was not included in the City of Palo Alto’s 1978-79 historic survey report by Beach and Boghosian that created the City’s original Historic Inventory because it was outside the boundary of the surveyed area. The Dames and Moore report “Final Survey Report Palo Alto Historical Survey Update” dated February 2001, evaluated the Hoover Pavilion and found it to appear eligible for the National Register under Criteria A and C. The significance and integrity of the Hoover Pavilion was again evaluated in the “Cultural Resources and Stanford University Medical Center Facilities Renewal and Replacement Project” report prepared by SUMC staff. The SUMC report concluded that the Hoover Pavilion retained integrity and appeared to be eligible for listing in the California Register under Criterion 3, as an important example of pre-World War II hospital design and for its Art Deco features and original building materials. ARG who was hired to analyze the Project for the EIR, concurred with the SUMC findings of eligibility for the California Register in its September 2009 report “Historic Resource Evaluation and Peer Review: Stanford University Medical Center Project.”

As a property that appears to be eligible for the National Register of Historic Places (National Register) and California Register of Historical Resources (California Register), the Hoover Pavilion is considered a historical resource for the purposes of California Environmental Quality Act (CEQA). Generally, under CEQA a project that follows The Secretary of the Interior’s Standards for the Treatment of Historic Properties with Guidelines for Preserving,
Rehabilitating, Restoring, and Reconstructing Historic Buildings (The Standards) or The Secretary of Interior’s Standards for Rehabilitation and Guidelines for Rehabilitating Historic Structures is considered to have mitigated impacts to a historical resource to a less-than-significant level (CEQA Guidelines 15064.5).

ARG analyzed the potential impacts of the project on the Hoover Pavilion in their report, “Stanford Hoover Pavilion Renovation Project Impact Analysis Report,” dated January 18, 2011 (Attachment II-B.5). ARG found that while integrity would be diminished, overall the historical resource would retain good integrity and the physical characteristics that convey its historical significance and that justify its eligibility for inclusion in the California Register. As defined by CEQA, the proposed project would result in a less-than-significant impact to the Hoover Pavilion. In Section 6 of its report, however, ARG provided detailed recommendations to further reduce project impacts on the historic character of Hoover Pavilion, and to enhance consistency with the Secretary of the Interior’s Standards for Rehabilitation beyond the minimum required.

The Stone Building Complex and Hoover Pavilion are not listed on the City of Palo Alto’s Historic Inventory. The City’s Historic Resources Board (HRB) does not have authority under the existing Code to make recommendations on historic resources that are not listed on the Historic Inventory (PAMC 16.49.050). However, it was recognized that the HRB could provide valuable input with regard to the Hoover Pavilion renovations and affect of the proposed MOB and parking structure on Hoover Pavilion. In addition, the proposed Hospital Zone also provides a special HRB review process for future development on the Hoover site.

City Staff presented the Hoover Pavilion renovations project to the HRB on February 2 and April 6, 2011. Staff also reviewed the Cultural Resources chapter of the Draft EIR with the HRB on July 7, 2010. At those meetings, the HRB expressed general support for the renovation to Hoover Pavilion. Suggestions were made with regard to the modifications to historic main entry and the rooftop equipment screens, as well as the renovation and replacement of exterior windows. These suggestions were transmitted to the ARB for their consideration. See Attachment II-B.10 for the minutes of these meetings.

The HRB also commented on the relationship between the MOB and parking garage to Hoover Pavilion. ARG, in their January 2011 report, had indicated that the location of the MOB would reduce views of a primary façade of Hoover Pavilion. As described above, this would be in conflict with one of the Standards and would diminish the integrity of Hoover Pavilion (but overall, Hoover Pavilion would still be eligible for listing on the California Register). The HRB agreed with the ARG report. The HRB recommended, as a way to reduce the impacts of the MOB, that the finial, which had been located at the Hoover Pavilion corner tower but removed decades ago, be restored and replaced. The finial would restore visual focus to the impressive corner tower. This recommendation was also transmitted to the ARB. The ARB recommended that as a condition of approval, the finial be replaced.

**Green Building**

The non-OSHPD buildings are subject to all requirements of the City’s Green Building Code. The OSHPD permitted buildings will receive their building permits from the State and are subject to a different set of regulations applicable to hospitals.
Despite the separate regulations governing the hospitals component, Applicant is targeting LEED for New Construction (LEED-NC) Silver certification equivalency. LEED for New Construction and Major Renovations is designed to guide and distinguish high-performance commercial and institutional projects. The LPCH Expansion Project is targeting LEED for Healthcare (LEED-HC) Silver certification equivalency. LEED for Healthcare, passed by member ballot on November 16, 2010, is designed to guide and distinguish high-performance healthcare projects, including inpatient and outpatient care facilities and long term care facilities.

Information regarding LEED for New Construction and LEED for Healthcare may be found at the U.S. Green Building Council’s website: www.usgbc.org.

Both the LPCH and the Stanford Hospital and Clinics have been tracking 15 “big sustainability ideas” throughout the design process, which include:

1. Alternative System Approaches to Reduce Energy Demand (Displacement Ventilation)
2. Passive Design Elements to Reduce Energy Demand
3. Maximize Daylight and Views
4. Healthy Materials - Develop Material “Precautionary List”
5. Site as Therapeutic & Restorative Tool
6. Restore the Landscape & Create Habitat
7. Rainwater Harvesting to Provide 100% Irrigation
8. Reduce Potable Water Use by at least 30% from BAU
9. Alternative Transportation & Active Living
10. Renewable Energy Sources
11. Local Materials - Regional Materials Sourcing
12. Sustainability Sourced Materials with Low Embodied Energy
13. Minimize Construction Waste
14. Optimize Indoor Air Quality
15. Learning - educate visitors by integrating sustainable design features into the patient experience

During the architectural review, the applicants have highlighted the sustainable design aspects of the exterior façade, and have explained how the skin system is integral to the Displacement Ventilation HVAC System.

**POLICY IMPACTS**

**Consistency with Comprehensive Plan Land Use Designations and Policies**

**Land Use Designations**

The majority of the SUMC Site falls within a Major Institution/Special Facilities land use designation. However, small portions of the Main SUMC Site fall into the Research/Office Park land use designation. These portions include the 701 Welch Road and 703 Welch Road clinics near the intersection of Welch Road and Quarry Road, and the property immediately west of 800 Welch Road between Sand Hill Road and Welch Road. The 0.65-acre area on the western
boundary of the SUMC Site falls within the jurisdiction of unincorporated Santa Clara County and is designated for Major Institution/University Lands/Campus Educational Facilities uses.

The SUMC Project would expand the LPCH Hospital into the area occupied by the 701 and 703 Welch Road clinics, which would be demolished. This expansion would conflict with the existing Research/Office Park designation, which does not allow hospital uses. However, as part of the SUMC Project, modifications to the existing Comprehensive Plan land use designations are proposed. The following changes to existing land use designations would be made through the Comprehensive Plan Amendment:

- SoM proposes annexation of the 0.65-acre parcel within Santa Clara County jurisdiction. This area would be annexed under the Major Institution/Special Facilities land use designation. The proposed FIM 1 building would be consistent with this designation.
- LPCH proposes that the 701 and 703 Welch Road parcels be converted from the Research/Office Park land use designation to the Major Institution/Special Facilities land use designation. The proposed LPCH expansion would be consistent with this new designation.

Comprehensive Plan Policies and Programs
The SUMC Project is required to be consistent with the Comprehensive Plan. In order to ensure such consistency is achieved, City staff has identified all Comprehensive Plan policies applicable to the SUMC Project. The Draft Environmental Impact Report, Table 3.2-2 demonstrates how the SUMC Project would be consistent with each of these policies with mitigation. This analysis is based upon the Project Description and upon the environmental analysis provided in subsequent sections of this EIR. Where the environmental analysis identifies necessary mitigation measures, the analysis in Table 3.2-2 briefly describes those measures. Mitigation measures would help ensure consistency with Comprehensive Plan policies that avoid or reduce impacts related to visual quality, cultural resources, pedestrian circulation, urban forest resources, groundwater and runoff pollution, air quality degradation, and noise incompatibility. The mitigation measures are described in the Mitigation Monitoring and Reporting Plan in Attachment I-A.

Text modifications to the Comprehensive Plan are also proposed to clarify proposed building height exceptions and commercial square footage limits for the SUMC to accommodate the proposed building heights. Specifically, the SUMC Project sponsors propose to modify Program L-3 as follows (underlined text would be added):

The Citywide 50-foot height limit has been respected in all new residential and commercial development since it was adopted in the 1970’s. Only a few exceptions have been granted for architectural enhancements or seismic retrofits to noncomplying buildings. In addition, the City has allowed taller buildings within the Hospital District at the Stanford University Medical Center that reflect the Medical Center’s unique needs.

In addition, the City has proposed to modify Policy L-8 as follows (underlined text would be added):

Maintain a limit of 3,257,000 square feet of new non-residential development for the nine planning areas evaluated in the 1989 Citywide Land Use and Transportation Study, with
the understanding that the City Council may make modifications for specific properties that allow modest additional growth. Such additional growth will count towards the 3,257,900 maximum. Stanford University Medical Center hospital, clinic and medical school uses are not intended to be treated as “non-residential development” for the purposes of this policy; thus, additional growth in areas zoned “Hospital District” is exempt from this policy.

In both of the requested Comprehensive Plan modifications, the changes would affect only those sites at SUMC. If the City Council decided to approve the maximum height allowance as part of the HD, the modification to Policy L-3 would be consistent with the new regulations. The modification recognizes the unique needs of SUMC, as well as the development plan which supports more efficient medical-related functions with vertically designed buildings and preservation of landscaping, plazas and walkways that would promote pedestrian activities. The modification to Policy L-8 clarifies an exemption for SUMC that currently exists for other medical-related uses in the City, including the Palo Alto Medical Foundation facility on El Camino Real and the Veteran’s Administration Hospital on Miranda Avenue, as shown on Comprehensive Plan Map L-6.

Zoning Ordinance
The SUMC Project would conflict with existing development restrictions in the PF district, such as FAR and height limits. The Applicant requests creation of a new zoning district specifically designed for SUMC for hospitals and clinics, associated medical research, medical office, and support uses. The new zoning district is proposed as “Hospital District,” and would include development standards that accommodate the SUMC Project as proposed. The following table illustrates the differences between the existing PF district and the proposed HD:

<table>
<thead>
<tr>
<th>Comparison of existing PF zone district regulations with the new HD district regulations</th>
<th>HD</th>
<th>PF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum Site Area</td>
<td>No standards</td>
<td>No standards</td>
</tr>
<tr>
<td>Minimum Site Width</td>
<td>No standards</td>
<td>No standards</td>
</tr>
<tr>
<td>Minimum Site Depth</td>
<td>No standards</td>
<td>No standards</td>
</tr>
<tr>
<td>Minimum Street Setbacks</td>
<td>10 ft (1)</td>
<td>20 ft</td>
</tr>
<tr>
<td>Maximum Site Coverage</td>
<td>40% (2)(4)</td>
<td>30%(7)</td>
</tr>
<tr>
<td>Maximum Height (ft)</td>
<td>130 ft (5)</td>
<td>50 ft</td>
</tr>
<tr>
<td>Maximum Floor Area Ratio (FAR)</td>
<td>1.5 to 1 (3)(6)</td>
<td>1 to 1</td>
</tr>
</tbody>
</table>
Comparison of existing PF zone district regulations with the new HD district regulations

<table>
<thead>
<tr>
<th>HD</th>
<th>PF</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Measured from the right-of-way line of any public street to</td>
<td></td>
</tr>
<tr>
<td>the base of the buildings and not including any awnings or other</td>
<td></td>
</tr>
<tr>
<td>projections. This setback requirement does not apply to below-</td>
<td></td>
</tr>
<tr>
<td>grade parking facilities or portions of buildings that bridge a</td>
<td></td>
</tr>
<tr>
<td>street. This setback requirement also does not apply to any</td>
<td></td>
</tr>
<tr>
<td>portion of a lot or site that does not abut a public street.</td>
<td></td>
</tr>
<tr>
<td>(2) Site coverage is calculated based upon the total contiguous</td>
<td></td>
</tr>
<tr>
<td>area within this zone (Main SUMC site or the Stanford Hoover</td>
<td></td>
</tr>
<tr>
<td>Pavilion site), rather than on a parcel-by-parcel basis.</td>
<td></td>
</tr>
<tr>
<td>(3) FAR is calculated based upon the total contiguous area</td>
<td></td>
</tr>
<tr>
<td>within this zone (Main SUMC site or the Stanford Hoover Pavilion</td>
<td></td>
</tr>
<tr>
<td>site), rather than on a parcel-by-parcel basis.</td>
<td></td>
</tr>
<tr>
<td>(4) The maximum site coverage for the Stanford Hoover Pavilion</td>
<td></td>
</tr>
<tr>
<td>site shall be 30 percent.</td>
<td></td>
</tr>
<tr>
<td>(5) The maximum height for new construction at the Stanford</td>
<td></td>
</tr>
<tr>
<td>Hoover Pavilion site shall be 60 ft.</td>
<td></td>
</tr>
<tr>
<td>(6) The maximum floor area ratio for the Stanford Hoover Pavilion</td>
<td></td>
</tr>
<tr>
<td>site shall be 0.5 to 1.</td>
<td></td>
</tr>
<tr>
<td>(7) Provided that, for parking facilities the maximum floor area</td>
<td></td>
</tr>
<tr>
<td>ratio and site coverage shall be equal to the floor area ratio</td>
<td></td>
</tr>
<tr>
<td>and site coverage established by the most restrictive adjacent</td>
<td></td>
</tr>
<tr>
<td>district, and provided, further, that the maximum floor area</td>
<td></td>
</tr>
<tr>
<td>ratio for the Stanford Hoover Pavilion site shall be 0.25:1.</td>
<td></td>
</tr>
</tbody>
</table>

The proposed boundaries of the new district are depicted in Attachment I-C. The proposed zoning changes would resolve potential zoning inconsistencies associated with the SUMC Project. With the adoption of the new Hospital District, the SUMC Project would be consistent with the Palo Alto Zoning Ordinance.

Area Plan update
The Stanford University Medical Center (SUMC) Area Plan Update has been prepared pursuant to Program L-46 of the City’s 2010 Comprehensive Plan, which states:

"Work with Stanford to prepare an area plan for the Stanford Medical Center. An area plan for the Medical Center should address building locations, floor area ratios, height limits, and parking requirements. It should discuss the preservation of historic and open space resources and the protection of views and view corridors. The plan should describe improvements to the streetscape and circulation pattern that will improve pedestrian, bicycle, transit, and auto connections."

The Area Plan Update has been cooperatively prepared by the City and Stanford with the City having ultimate approval authority (Attachment I-H). The Area Plan Update is a guidance document for the City, Stanford and the public to provide an overview and context for anticipated future development at the SUMC. The Area Plan Update is not intended to establish land use or development policies or standards, and is not intended to supersede the applicable policies, regulations, requirements and standards of the City’s Comprehensive Plan and Municipal Code. The Area Plan Update does not identify mitigation measures for project impacts, evaluate alternatives to the proposed project, or specify community benefits outside the immediate scope of the project.

The draft Area Plan Update is divided into the following sections:

1.0 Area Plan- Background and Purpose
This section identifies the purpose and intent of the Area Plan and a history of hospital planning and development at Stanford.
2.0 Plan Elements
This section discusses the key issues and broad planning principles that have been adopted by the City in the Comprehensive Plan to guide the planning and development within the SUMC. Subsections within Section 3 include Land Use; Linkages and Connections; Circulation, Vehicular Access and Parking; Transit, Bicycle, and Pedestrian Circulation; Open Space, Historical Resources, and Visual; Resources.

3.0 Zoning and Land Use Regulations
This chapter identifies the Comprehensive Plan and zoning changes that may be needed to accommodate the SUMC’s current proposals.

The draft Area Plan Update has been reviewed by the City Council on May 14 and July 23, 2007 and by the Commission on June 27 and July 11, 2007. Comments received at these meetings have informed and shaped the development of the Draft Area Plan Update.

It is important to understand that the SUMC Area Plan Update is not a regulatory document and does not comprise a coordinated area plan or specific plan under the City’s Municipal Code. Staff recommends that the City Council find the Area Plan Update to be acceptable in satisfying Comprehensive Plan Program L-46.

ENVIRONMENTAL REVIEW
As described earlier, the previously released Draft EIR (May 2010) and the Responses to Comments document (Volumes I and II, February 2011) constitute the Final EIR (Attachment II-A). The responses and revisions in the Final EIR substantiate and confirm or correct the analyses contained in the Draft EIR. It should be noted that no new significant environmental impacts and no substantial increase in the severity of an earlier identified impact have resulted from responding to comments.

Mitigation Monitoring and Reporting Program
As described earlier in the Entitlement Description section, if the City Council decides to approve the SUMC Project, then the City Council must adopt a Mitigation Monitoring and Reporting Program (MMRP). Pursuant to CEQA Guidelines Section 15097, an MMRP is a mechanism used for the monitoring and reporting of revisions to the project or conditions of approval that the public agency has required as mitigation measures to lessen or avoid significant environmental effects. The City can conduct the reporting or monitoring, or it can delegate the responsibilities to another public agency or private entity that accepts the delegation.

The SUMC Project MMRP would identify: the specific monitoring action that would occur, the various City departments or other entities that would oversee the completion of the measures, and a timeline for when these measures would be implemented. The responsible departments would ensure that due diligence is carried out during implementation of the measures. Execution of the MMRP would reduce the severity or eliminate the identified significant impacts.

The MMRP is included in Attachment I-A.
Revisions to the Previously Identified Significant and Unavoidable Impacts

As a result of responding to comments and initiating changes to the analysis in the Draft EIR, revisions to the previously identified significant and unavoidable impacts have been made as described in the Final EIR. The following five impacts are no longer significant and unavoidable:

- **(TR-2) Intersection Level of Service:** The Significant and Unavoidable (SU) LOS impacts during Peak Hour conditions at three Menlo Park intersections (Middlefield Road and Willow Road, Bayfront Expressway and Willow Road, and University Avenue and Bayfront Expressway) have now been reduced to Less Than Significant (LTS). Please refer to Staff-Initiated Change 2 in Section 3 of the Final EIR for a detailed explanation of this change.

- **(TR-7) Transit impacts:** The SUMC Project would not adversely impact either AM or PM Peak Hour bus service in Palo Alto or Caltrain service. Nonetheless, mitigation to provide enhanced bus stops and shuttle service is included.

- **(AQ-8) Cumulative Construction and Operational TAC and Fine Particulate Matter Emissions:** A revised analysis of cumulative Toxic Air Contaminants (TAC) and fine particulate matter emissions has been completed for the SUMC Project using the methodology and thresholds established by the 2010 Bay Area Air Quality Management District (BAAQMD) CEQA Guidelines. This quantified analysis replaces the qualitative analysis in the Draft EIR and yields more accurate results. The results show that all cumulative estimates for cancer risk, chronic non-cancer Health Indexes (HI), and annual average PM2.5 concentration would be below the BAAQMD cumulative significance thresholds for on-site patient receptors and maximally exposed off-site residential receptors within the zone of influence. Please refer to Staff-Initiated Change 3 in Section 3 of the Final EIR for a detailed explanation of this change.

- **(CC-1) Furthering Individual Policies of the Palo Alto Climate Protection Plan and (CC-2) Emit Significant Greenhouse Gas Emissions:** The SUMC Project’s greenhouse gas emissions were reevaluated. The reevaluation has determined that, compared to the Business as Usual (BAU) scenario, the SUMC Project would reduce greenhouse gas emissions by more than 30 percent. Also, the SUMC Project would be consistent with the goals of the City’s Climate Protection Plan after implementation of identified mitigation measures. As such, the SUMC Project’s contribution to global climate change would be less than cumulatively considerable after mitigation. A major driver for the change in this conclusion is that the City has determined that, from a global perspective, increased patient/visitor trips would not constitute new trips that would result from the SUMC expansion. This is because patients would be expected to seek medical treatment somewhere, even if the SUMC Hospitals were not expanded. Please refer to Staff-Initiated Change 4 in Section 3 of the Final EIR for a detailed explanation of this change.

**Significant and Unavoidable Impacts**

Most impacts identified for the SUMC Project would either be LTS or could be mitigated to a LTS level. The following is a list of the twelve impacts that remain significant and unavoidable:

- **(TR-3) Impacts on Roadway Segments:** Increased average daily traffic on four Menlo Park roadway segments on Marsh Road, Sand Hill Road, Willow Road, and Alpine Road;

- **(AQ-1) Construction Criteria Air Pollutant Emissions and (AQ-6): Emission of criteria air pollutants (NOx) during construction, on both a project level and cumulative level;**

- **(AQ-2) Operational Criteria Air Pollutant Emissions and (AQ-7): Emission of criteria air pollutants (ROG, NOx, PM10) during operation, on both a project level and cumulative level;**
• (NO-1) Construction Noise and (NO-5): Temporary but substantial noise during construction, on both a project level and cumulative level;

• (NO-3) Operational Noise Impacts from Transportation Sources: Emission of ambulance noise along a new route along Sand Hill Road into the proposed Durand Way extension, so that noise levels at roadside residences would increase by a level considered unacceptable under the City’s Comprehensive Plan;

• (CR-1) Impacts on Historical Resources and (CR-5): Demolition of an historical structure, the 1959 Hospital Building complex (also referred to as the Stone Building complex), which is a significant and unavoidable impact on both a project and cumulative level; and

• (BR-4) Result in a Substantial Adverse Effect on any Protected Tree and (BR-9): Removal of up to 74 Protected Trees, as defined in City of Palo Alto’s Tree Protection and Management Regulations, which is a significant and unavoidable impact on both a project level and a cumulative level. While the Draft EIR identified the loss of up to 71 Protected Trees, per revisions to the analysis, this number has been corrected to 74 Protected Trees. Additionally, the analysis of the Tree Preservation Alternative included pile-driving activities during construction. It has been determined by the SUMC Project sponsors that pile-driving may be required in order to construct the replacement SHC Hospital. Also the SUMC Project sponsors have identified the Tree Preservation Alternative as a preferred site plan such that, going forward, refinements to project design would focus on the site plan for the Tree Preservation Alternative. As such, the Draft EIR addresses pile-driving impacts under the Tree Preservation Alternative scenario. The Draft EIR indicates that potential pile-driving activities would result in significant and unavoidable noise effects to nearby residents.

Statement of Overriding Considerations
If the City Council decides to approve the SUMC Project, and if the SUMC Project as approved would result in significant impacts that could not be mitigated to less-than-significant levels, then the City Council must indicate that any such unavoidable impacts are acceptable due to overriding considerations. Pursuant to CEQA Guidelines Section 15093, a “Statement of Overriding Considerations” would balance the benefits of the SUMC Project against its unavoidable environmental effects. If the City Council finds that the benefits of the SUMC Project outweigh the impacts, then the adverse environmental effects may be considered acceptable.

The Statement of Overriding Considerations document includes two categories of benefits from the amenities of the Project that would constitute “overriding considerations”:

A. Amenities of the development of the Project itself, such as:
   a) Health Care
   b) Level 1 Trauma Center
   c) Seismic Safety

B. Additional community benefits and other payments negotiated as part of the Development Agreement for the Project, which include:
   a) Health Care Services Funding
   b) Community Health programs
   c) Infrastructure Capital Fund
   d) Climate Change / Sustainable Communities
   e) Cost Neutrality Payment
f) Use Tax Direct Payment Permit

The Statement of Overriding Considerations document is included in Attachment I-A.

NEXT STEPS
The Commission's recommendation will be forwarded to the City Council, which is tentatively expected to review the Project on June 5, 2011.

ATTACHMENTS I - PRINTED
A. CEQA Resolution & Mitigation Monitoring and Reporting Plan
B. Comprehensive Plan Amendment Resolution
C. Hospital District Ordinance
D. Development Agreement
E. Record of Land Use Action for the Conditional Use Permit
F. Resolution for Architectural Review
G. Resolution for Annexation
H. SUMC Area Plan
I. SUMC Application Excerpt Materials
J. SUMC Project Plans Highlights Pages

ATTACHMENTS II - ELECTRONIC (CD)
A. Final EIR Documents
   1. Final EIR Staff Report to PTC + supporting materials and responses
   2. Final EIR Review - PTC Meeting Minutes
   3. Public Comment on Final EIR
B. Architectural and Historic Resources – Staff Reports and Minutes
   1. Design Guidelines
   2. LPCH - ARB Staff Reports of March 24, 2011
   3. Welch Road
   4. FIMI
   5. Hoover Renovations - ARB Staff Reports of April 7, 2011
   6. Hoover Site Development
   7. New Stanford Hospital (SHC) – ARB Staff Report of April 21, 2011
   8. Peer Review Memorandums prepared by Bruce Fukuji
   9. ARB Minutes of March 24, April 7 and April 21, 2011
   10. HRB Minutes of February 2 and April 6, 2011
   11. Final Project Plans
C. Development Agreement Discussions with City Council
   1. City Council January 31 Update Meeting: Staff Report and Minutes
   2. March 15, 2011 Finance Committee Meeting: Staff Report and Minutes
   3. April 20, 2011 Policy and Services Committee Meeting: Staff Report
D. Fiscal Report – ADE March 9, 2011
COURTESY COPIES
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