1	[Planning – institutional master plan review for medical institutions.]
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3	Ordinance amending Planning Code Section 304.5, Institutional Master Plans, to
4	require a qualified health planner retained by the Department of Public Health to
5	analyze the relationship to citywide health care needs of medical institutions'
6	institutional master plans, revisions, and conditional use applications, to provide
7	comments to the Planning Department, making environmental findings, and making
8	findings of consistency with the General Plan and priority policies of Planning Code
9	Section 101.1.
10	Note: Additions are <u>single-underline italics Times New Roman</u> ;
11	deletions are <i>stri<del>kethrough italies Times New Roman</del>.</i> Board amendment additions are <u>double underlined</u> .
12	Board amendment deletions are strikethrough normal.
13	Be it ordained by the People of the City and County of San Francisco ("City"):
14	Section 1. Findings.
15	(1) The institutional master plan review process provides the City, the Planning
16	Commission, and the general public with essential information for making decisions with
17	regard to the use and development of medical institutions in the City.
18	(2) The institutional master plan process gives medical institutions the opportunity to
19	make modifications to their master plans in response to public comments prior to more
20	detailed planning and in advance of requests for authorization by the City of proposed new
21	development.
22	(3) Additional information regarding the relationship of proposed medical institution
23	development to citywide healthcare needs will provide the Planning Department with an
24	important perspective for review of medical institutions' institutional master plans, plan
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1	revisions, and conditional use applications flied by medical institutions. Such analysis will
2	help prevent inefficient or redundant development of healthcare services in the City.
3	(3) The institutional master plan review process does not provide the Planning
4	Commission with the specialized information and analysis necessary to take account of
5	citywide healthcare needs. The existing healthcare review and comment process, set forth in
6	Planning Code Section 304.5(e), does not occur because the designated review agency,
7	West Bay Health Systems Agency, no longer exists.
8	(4) The San Francisco Department of Public Health can provide the expertise needed
9	to analyze medical institutions' master plans in the context of citywide health needs.
10	Section 2. Environmental Findings, General Plan Findings, and Other Required
11	Findings.
12	(a) The Planning Department has determined that the actions contemplated in this
13	Ordinance are in compliance with the California Environmental Quality Act (California Public
14	Resources Code sections 21000 et seq.). Said determination is on file with the Clerk of the
15	Board of Supervisors in File No and is incorporated herein by
16	reference.
17	(b) On, 2007, the Planning Commission, in Resolution No.
18	approved and recommended for adoption by the Board this legislation and
19	adopted findings that it is consistent, on balance, with the City's General Plan and eight
20	priority policies of Planning Code Section 101.1 The Board adopts these findings as its own.
21	A copy of said Resolution is on file with the Clerk of the Board of Supervisors in File No.
22	, and is incorporated by reference herein.
23	(c) Pursuant to Planning Code Section 302, this Board of Supervisors finds that this
24	legislation will serve the public necessity, convenience, and welfare for the reasons set forth in

1	Planning Commission Resolution No, and incorporates such reasons by
2	reference herein.
3	Section 3. The San Francisco Planning Code is hereby amended by amending
4	Sections 304.5 to read as follows:
5	SEC. 304.5. INSTITUTIONAL MASTER PLANS.
6	(a) Purposes. The principal purposes of the requirements for institutional master
7	plans contained in this Section are:
8	(1) To provide notice and information to the Planning Commission,
9	community and neighborhood organizations, other public and private agencies and the
10	general public as to the plans of each affected institution at an early stage, and to give an
11	opportunity for early and meaningful involvement of these groups in such plans prior to
12	substantial investment in property acquisition or building design by the institution;
13	(2) To enable the institution to make modifications to its master plan in
14	response to comments made in public hearings prior to its more detailed planning and prior to
15	any request for authorization by the City of new development proposed in the master plan;
16	and
17	(3) To provide the Planning Commission, community and neighborhood
18	organizations, other public and private agencies, the general public, and other institutions with
19	information that may help guide their decisions with regard to use of, and investment in, land
20	in the vicinity of the institution, provision of public services, and particularly the planning of
21	similar institutions in order to insure that costly duplication of facilities does not occur.
22	(b) When Required. Not later than December 31, 1976, each medical institution and
23	each post-secondary educational institution, including group housing affiliated with and
24	operated by any such institution, as described in Sections 209.2(c), 209.3(a) and (i), 216(a),

and 217(a) and (h) of this Code, in the City and County of San Francisco shall have on file
with the Planning Department a current institutional master plan describing the existing and
anticipated future development of that institution as provided in Subsection (c) below.

Thereafter, at intervals of two years, each such institution shall file a report with the Planning Department describing the current status of its institutional master plan. In addition, any substantial revisions to the institutional master plan already on file with the Planning Department shall be filed with the Department as soon as such revisions have been formalized by the management of the institution.

Each such institution that is newly established after the effective date of this Section shall file the required institutional master plan in connection with its establishment, and shall file the reports and revisions described above, in accordance with this Section.

The institutional master plans, reports and revisions required by this Section shall, upon filing, be available for public review at the Planning Department.

- (c) Format and Substance of Plan. In the case of an institution occupying a site area of one or more acres, or occupying a site area of less than one acre but anticipating future expansion, the plan submitted shall be a full institutional master plan and shall at a minimum contain textual and graphic descriptions of:
- (1) The nature of the institution, its history of growth, physical changes in the neighborhood which can be identified as having occurred as a result of such growth, the services provided and service population, employment characteristics, the institution's affirmative action program, all ownership by the institution of properties throughout the City and County of San Francisco, and any other relevant general information pertaining to the institution and its services:

1	(2) The present physical plant of the institution, including the location and
2	bulk of buildings, land uses on adjacent properties, traffic circulation patterns, and parking in
3	and around the institution;
4	(3) The development plans of the institution for a future period of not less
5	than 10 years, and the physical changes in the institution projected to be needed to achieve
6	those plans. Any plans for physical development during the first five years shall include the
7	site area, ground coverage, building bulk, approximate floor area by function, off-street
8	parking, circulation patterns, areas for land acquisition, and timing for the proposed
9	construction. In addition, with respect to plans of any duration, the submission shall contain a
10	description and analysis of each of the following:
11	(A) The conformity of proposed development plans to the Comprehensive
12	Plan (Master Plan) of the City and County of San Francisco, and to any neighborhood plans
13	on file with the Planning Department,
14	(B) The anticipated impact of any proposed development by the institution on
15	the surrounding neighborhood, including but not limited to the effect on existing housing units,
16	relocation of housing occupants and commercial and industrial tenants, changes in traffic
17	levels and circulation patterns, transit demand and parking availability, and the character and
18	scale of development in the surrounding neighborhood,
19	(C) Any alternatives which might avoid, or lessen adverse impacts upon the
20	surrounding neighborhood, including location and configuration alternatives, the alternative of
21	no new development, and the approximate costs and benefits of each alternative,
22	(D) The mitigating actions proposed by the institution to lessen adverse
23	impacts upon the surrounding neighborhood;

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1	(4) A projection of related services and physical development by others,
2	including but not limited to office space and medical outpatient facilities, which may occur as a
3	result of the implementation of the institution's master plan;

(5) Any other items as may be reasonably required by the Planning Department or Planning Commission.

In the case of an institution presently occupying or proposing to occupy a site area of less than one acre, and placing on file with the Planning Department a statement that the institution does not anticipate any future expansion to more than one acre, an abbreviated institutional master plan may be filed, consisting of a textual description of the institution's physical plant and employment, the institution's affirmative action program, all ownership by the institution of properties throughout the City and County of San Francisco, the services provided and service population, parking availability, and any other relevant general information pertaining to the institution and its services.

(d) Hearing on Plan. In a case in which a full institutional master plan, or revisions to such a plan, have been filed in accordance with Subsection (c) above, the Planning Commission shall hold a public hearing on such plan or revisions. The Zoning Administrator shall set the time and place for the hearing within a reasonable period, but in no event shall the hearing date be less than 30 days nor more than 180 days after the plan, or revisions, have been accepted for filing.

In a case in which an abbreviated institutional master plan has been filed in accordance with Subsection (c) above, the Zoning Administrator shall report the filing to the Planning Commission, and the Commission may, at its option, either hold or not hold a public hearing on such plan, as the Commission may deem the public interest to require. In the event a public hearing is to be held on such an abbreviated institutional master plan, the Planning

Department or the Commission may require submission of additional information by the institution as deemed necessary for such hearing.

The public hearing conducted by the Planning Commission on any institutional master plan, or revisions thereto, shall be for the receipt of public testimony only, and shall in no way constitute an approval or disapproval of the institutional master plan or revision, or of any facility described therein, by the Planning Commission.

Notice of all hearings provided for herein shall be given in the same manner as prescribed for conditional use applications under Section 306.3 of this Code. The institution may be required to file with its master plan, or revisions thereto, the information and other material needed for the preparation and mailing of notices as specified in that Section.

Public testimony, as represented in the official minutes of the Planning Commission and written correspondence to the Commission, concerning the content of an institutional master plan and revisions thereto, shall become a part of the institutional master plan file at the Planning Department and shall be available for public review.

(e) Submission to <u>Department of Public Health</u> West Bay Health Systems Agency. <u>The Planning Department shall submit all</u>All institutional master plans and revisions filed by medical institutions, and all conditional use applications filed by such institutions, <u>shall be submitted by the Planning Department to the West BayHealth Systems Agency, designated pursuant to Public Law 93-641, to a qualified health planner retained by contract by the Director of Public Health for review and comment <u>on the proposed action and its relationship to citywide healthcare needs. For purposes of this Section, the Department of Public Health contracting process shall include a review of each candidate health planner to ensure there is no potential conflict of interest with regard to the medical institution(s) being reviewed. Each submission shall be made not more than 10 days after the</u></u>

institutional master plan, revisions thereto, or conditional use application has been accepted for filing.

(f) Conditional Use Authorizations. In the case of any institution subject to the institutional master plan requirements of this Section, no conditional use required for development by the institution under Articles 2 or 7 of this Code shall be authorized by the Planning Commission unless such development shall be as described in the institutional master plan, or revisions thereto, filed with the Planning Department and heard by the Planning Commission as provided in this Section, and no hearing shall be held or consent calendar item approved by the Commission on any such application for a conditional use until six months shall have elapsed after the date on which the public hearing is commenced on the institutional master plan, or on the revisions thereto that relate to the proposed development. The procedures for conditional use applications shall be those set forth in Section 303 and elsewhere in this Code.

In addition, where conditional use authorization is sought with respect to a medical institution, no such authorization shall be approved by the Planning Commission until after at least 75 days shall have elapsed after the requests for review and comments have been made pursuant to Subsection (e) above for both the institutional master plan and the conditional use application. Furthermore, no conditional use authorization shall be approved by the Planning Commission for any medical institution until the proposed development has first been approved pursuant to Sections 1513, 1523 and 1604 of Public Law 93-641 or Sections 437 and 438 of the California Health and Safety Code, if such approval is found by the reviewing agencies to be required under those Sections.

(g) Permit Applications. Commencing on January 1, 1977, the Planning Department shall not approve any building permit application for any construction pertaining to any

1	development of any institution subject to this Section, with the exception of minor alterations
2	necessary to correct immediate hazards to health or safety, unless that institution has
3	complied with all the applicable requirements of Subsections (b) and (c) above with regard to
4	its filing of an institutional master plan or revisions thereto.
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6	APPROVED AS TO FORM: DENNIS J. HERRERA, City Attorney
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8	By: Andrew W. Garth
9	Deputy City Attorney
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