

Agenda Report

March 26, 2018

TO: Honorable Mayor and City Council

FROM: Planning & Community Development Department

**SUBJECT: HUNTINGTON MEMORIAL HOSPITAL MASTER PLAN AMENDMENT
AND REVISED FINAL ENVIRONMENTAL IMPACT REPORT
(SCH#2011081076) 100 WEST CALIFORNIA BOULEVARD**

RECOMMENDATION:

It is recommended that the City Council:

1. Adopt a Resolution certifying the Revised Final Environmental Impact Report (EIR), adopting findings pursuant to the California Environmental Quality Act (CEQA), and adopting the Mitigation Monitoring and Reporting Program for the Huntington Memorial Hospital Master Plan Amendment project;
2. Adopt the Findings of Consistency (Attachments A) for the approval of the Master Plan Amendment for Huntington Memorial Hospital, Refined Alternative 2 – Reduced Patient Beds as described in the Revised Final Environmental Impact Report, referenced as the “Recommended Project” in this agenda report, with Conditions of Approval (Attachment B);
3. Adopt the Findings of Consistency (Attachment A) and approve the Private Tree Removal Permit for the removal of six protected trees on the Huntington Memorial Hospital campus, and acknowledge that the proposed landscape design, as conditioned, emphasizes a replacement tree canopy that is sustainable over the long term by adhering to the adopted replacement matrix;
4. Adopt the Findings of Consistency (Attachment A) for a Zoning Map Amendment to change the zoning designation of the property located at 620 and 624 South Pasadena Avenue from Commercial Office (CO) to Public and Semi-Public (PS) (Attachment F);
5. Adopt a Resolution of the City Council of the City of Pasadena approving a 14-year, eight-phase Master Plan Amendment for Huntington Memorial Hospital located at 100 West California Boulevard;
6. Direct the City Attorney to prepare an ordinance within 60 days amending the official Zoning Map of the City of Pasadena established by Section 17.20.020 of Title 17 of the

Pasadena Municipal Code (Zoning Code) to implement the zone change contained in this report; and

7. Direct the City Clerk to file a Notice of Determination with the Los Angeles County Recorder.

PLANNING COMMISSION RECOMMENDATION:

On February 28, 2018, the Planning Commission considered the Recommended Project (Refined Alternative 2 – Reduced Patient Beds). The Hospital supported the staff recommendation to approve the Recommended Project, with a request to remove a condition of approval limiting the number of monthly helicopter flights. One speaker gave verbal comments, and one letter was received, both in support of the Recommended Project. After a few questions and comments by the Commission, the staff recommendation was unanimously approved, with the removal of the helicopter flights condition and a technical change to a footnote in the Revised Final EIR, as requested by one of the Commissioners.

DESIGN COMMISSION ADVISORY REVIEW:

Design Commission Advisory Review

On June 14, 2016, the Design Commission conducted an Advisory Review of the proposed Master Plan Amendment, focusing on urban design issues related to architecture, landscaping, site planning, and related aesthetic issues, as well as historic preservation. The Design Commission discussed the scale of the previously proposed 90 foot tall West Tower Annex in relation to the lower profile of the adjacent 32-foot tall East Tower Annex, the potential obstruction of the existing 97'-6" "iconic twin towers" of the Hospital, and whether some of the buildings proposed to be demolished have historic value. The Design Commission also discussed concerns related to existing circulation patterns occurring at the Hospital's main entrance off California Boulevard on Drexel Place and conflicts with the slightly off-set driveway of the Orangewood Shopping Center located north of the main Hospital entrance.

BACKGROUND:

Huntington Memorial Hospital is a 625-bed, not-for-profit general medical and surgical hospital founded in 1892 and located on the present site since 1902. The Hospital is designated as a Level II Trauma Center and provides immediate 24-hour, seven-days-a-week trauma care. The Hospital is currently the only trauma center serving the San Gabriel Valley and one of 14 trauma centers in Los Angeles County.

The 1994 Northridge Earthquake caused extensive damage to hospitals throughout the Los Angeles region, necessitating the closure of 11 facilities. This resulted in an increased burden of patient care on the still-operational hospitals. As a result, the State signed SB 1953 (Hospital Facilities Seismic Safety Act) in September 1994, requiring hospitals to comply with seismic building code safety requirements developed by the

California Office of Statewide Health Planning and Development (OSHPD) by specified timeframes. Any hospital building deemed to pose a significant life and safety risk or to be at risk for collapse in a major earthquake was required to cease operation as an acute care facility after January 1, 2008, with deadline extensions possible under certain circumstances. Subsequent legislation further extended the compliance deadline with the final compliance deadline of January 1, 2020 for general acute care hospital buildings in the highest risk category, which applies to Huntington Memorial Hospital. Because the Hospital is a licensed acute care facility, the OSHPD is responsible for the review of construction plans and issuance of building permits; however, the City is the review authority for all Planning entitlements, such as the proposed Master Plan Amendment, Zone Change, and forthcoming Design Review.

The first Master Plan for the Hospital was adopted in 1987 and has been amended several times (1994, 2005, and 2008). The Hospital has identified several facilities that require seismic upgrades to comply with State laws, and therefore, is proposing a Master Plan Amendment to perform required upgrades and/or replace these facilities.

Original Project and Recommended Project

The project, as studied in the Draft EIR included the construction of a six-story, 90-foot tall West Tower Annex building and associated demolition of two construction bungalows, in addition to demolition of three buildings (the 1921, 1938, and Valentine buildings) to create a landscaped Central Garden, interior tenant improvements to the East Tower, façade work on the La Viña, Wingate, and Hahn buildings, and utility/infrastructure upgrades.

The analysis in the Draft EIR found that the Original Project would result in significant and unavoidable impacts at one adjacent intersection and four street segments. However, an alternative to the project (Alternative 1b – Reduced Patient Beds) found that reducing the number of new beds from 65 to 17 eliminated the significant and unavoidable impacts.

In December 2016, the Planning Commission considered the proposed Master Plan Amendment where staff recommended certification of the Final EIR and approval of Alternative 1b – Reduced Patient Beds project. Huntington representatives supported the staff recommendation.

Several speakers spoke at the hearing and expressed concerns about the 90-foot height of the proposed West Tower Annex and the potential to negatively impact the surrounding area. Members of the Commission expressed similar concerns and the Commission voted to continue the hearing indefinitely and requested representatives from the Hospital to meet with the speakers and consider redesigning the proposed West Tower Annex by lowering its height.

In February 2017, representatives from the Hospital, including the architect, met with the speakers and staff to explore alternative scenarios for the project. After the meeting the Hospital continued to have internal discussions and in early May informed staff that

plans were being prepared for an alternative scenario with two smaller buildings instead of the 90-foot tall West Tower Annex. In June 2017, revised plans were formally submitted to the City, proposing two buildings of two and three stories (West Annex A and B) in place of the six story West Tower Annex, while leaving the remainder of the proposed project unchanged. This project is referred to in this report as the Recommended Project. Additional environmental analysis was conducted and the new plans were incorporated into a Revised Final EIR as Refined Alternative 2 – Reduced Patient Beds.

The table below illustrates some of the changes associated with the Original Project, as compared with Alternative 1b as described in the Draft EIR and Refined Alternative 2 as described in the Revised Final EIR. The Recommended Alternative generally occupies the same or a reduced development envelope as compared to the Original Project.

	Original Project	Alternative 1b – Reduced Patient Beds	Refined Alternative 2 – Reduced Patient Beds (Recommended Project)
New Buildings	West Tower Annex	West Tower Annex	West Tower Annex A West Tower Annex B
Height	90 feet	90 feet	60 feet (West Tower A) 42 feet (West Tower B)
Setback from Pasadena Ave.	5 feet	5 feet	5 feet
Setback from California Blvd.	55 feet	55 feet	10 feet
Number of new patient beds	65	17	17

DESCRIPTION OF RECOMMENDED PROJECT:

The Recommended Project is an eight-phase Master Plan that would allow new construction totaling 217,370 square feet and demolition of existing buildings totaling 248,047 square feet, which would result in a net reduction of 30,677 square feet at completion. The largest component of new development includes two new buildings (West Annex A and West Annex B). West Annex A would be three stories tall and 60 feet in height, while West Annex B would be two stories tall and 42 feet in height. West Annex A includes one basement level, while West Annex B would include two levels of subterranean parking. The project would also add 17 new patient beds for a total of 642 beds at completion.

Additionally, the Master Plan boundary would be revised. A medical office building and a parking structure at the southeast corner of the Hospital campus (northwest corner of Bellefontaine Street and Fair Oaks Avenue) are owned by the Hospital but leased and operated by another entity, and therefore are proposed to be excluded from the Master Plan boundary. The parcel at 620-624 S. Pasadena Avenue, immediately south of the parking lot at the northwest corner of the Hospital campus, is owned by the Hospital and developed with two construction management buildings and would be included in the Master Plan boundary (Attachment F) in order to accommodate the new West Annex A

and B buildings. In addition to the inclusion of this property into the Master Plan, the property would also be re-zoned from CO (Commercial Office) to PS (Public, Semi-Public), the same as the remainder of the Master Plan area. Vehicle access to the Hospital campus would remain unchanged from existing conditions, while new landscaped areas, pedestrian corridors, and green space at the center of the campus would be created as part of the proposed project.

Location and Setting

The Hospital occupies a 29-acre site at 100 West California Boulevard, including the majority of the block bounded by West California Boulevard to the north, Bellefontaine Street to the south, South Fair Oaks Avenue to the east, and Pasadena Avenue to the west. The Hospital campus is bisected by Fairmount Avenue, which runs north-south between California Boulevard and Bellefontaine Street, and can also be accessed directly from Fair Oaks Avenue by Congress Street.

The area surrounding the project site is urbanized, with a variety of medical, commercial, office, residential, school, and institutional uses that have been developed over time and in diverse architectural styles. The nearest residential uses to the Hospital include single-family residences across Pasadena Avenue to the west. Two of these single-family residences have previously been converted for use by the Pasadena Chapter of the Ronald McDonald House (zone: Hospitality House). Other land uses along Pasadena Avenue include a one-and-two story courtyard-style multi-family residential complex, a gated community garden affiliated with the Waverly School (grades K-12), and a vacant lot. Also west of the Hospital Campus is the Markham Place/Governor Markham District, a National Register Landmark District.

The main Hospital campus consists of 15 buildings, many of which are interconnected. The main lobby is flanked by two, 97-foot tall towers referenced as the East and West Towers, constructed in 1990 and 2007, respectively. The East and West Towers are connected by an elevated pedestrian bridge, all fronting on California Boulevard. Directly in front of the East Tower is a 32-foot tall annex building referred to as the East Tower Annex, constructed in 1997. Directly east of the East Tower is the Emergency Department on Fairmount Avenue. The remaining buildings are generally arrayed around several landscaped courtyards at the core of the Hospital campus and house the Hospital's inpatient services as well as some outpatient services. The Hospital campus contains three parking structures (two for general public use and one for staff use) and three surface parking lots that contain a total of 2,433 spaces. Internal vehicular circulation consists of the Hospital's privately-owned Congress Street and Fairmount Avenue. Ingress and egress are currently provided on Drexel Place (the main driveway entrance) from California Boulevard at the north, Bellefontaine Street at the south, Fairmount Avenue at the east, and Pasadena Avenue at the west. A map of existing facilities on the Hospital campus is shown as Figure 1.

Figure 1: Existing Facilities



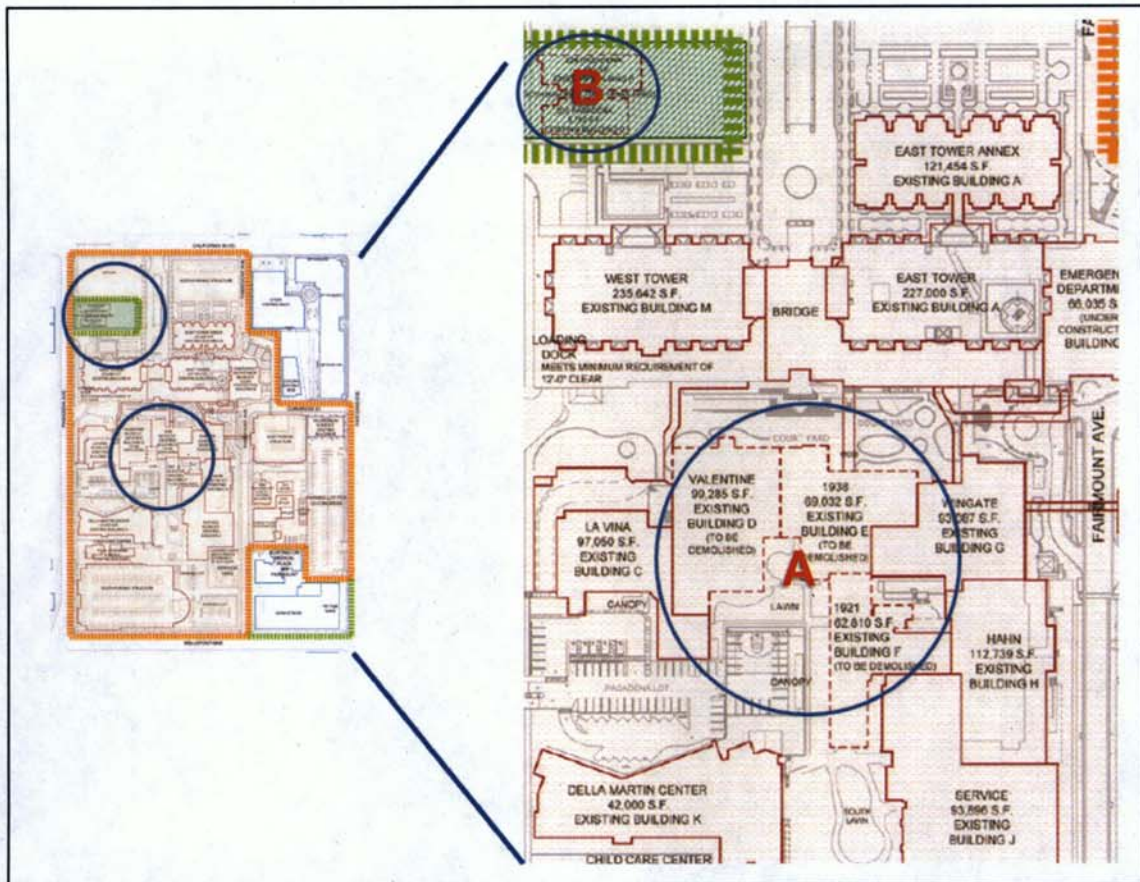
Key Components of the Project

The eight phases of the Master Plan are not sequential; some of the phases would overlap, but all phases are anticipated to be complete by 2032 (See Attachment G for list of work that will occur during each phase). The key components of the Recommended Project are broken down as follows:

Demolition:

- Demolition of the 1921, 1938, and Valentine Buildings to be replaced by a central garden, as shown in Figure 2, letter A.
- Demolition of two construction management buildings located at 620-624 S. Pasadena Avenue to be partially replaced by the West Annex A and West Annex B buildings, as shown in Figure 2, letter B.

Figure 2: Location of Proposed Demolition



Renovation and Rehabilitation:

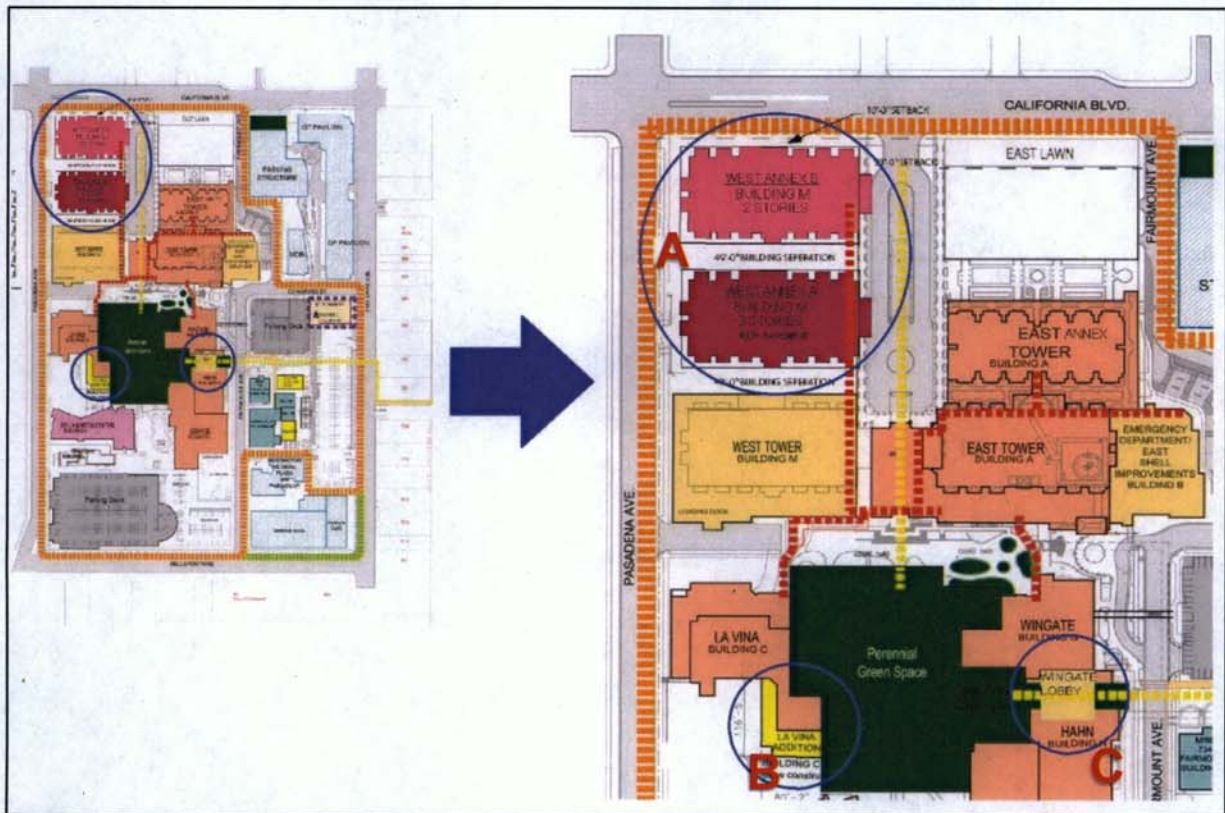
- Tenant improvements in the East Tower. The first and second floors would be renovated to provide new operating rooms and laboratories. There are no proposed changes to the height, footprint or exterior of the East Tower.
- Interior remodel to relocate rehabilitation facilities between levels within the existing La Viña Building.
- Relocate inpatient services currently housed in the 1921, 1938, and Valentine Buildings (to be demolished), Wingate, Hahn, and La Viña Buildings into the East and West Towers, West Annex A and West Annex B buildings, and elsewhere within the La Viña Building.
- Façade changes to the 1921, 1938 and Valentine Buildings. As shown on the existing site plan included in Attachment C, the 1921, 1938 and Valentine Buildings share connectivity with several adjacent buildings. The adjacent buildings are the La Viña, Wingate, and Hahn buildings. Once the 1921, 1938 and Valentine Buildings are demolished, the former connections to the La Viña, Wingate, and Hahn buildings would have to be repaired. The facades of the existing La Viña, Wingate, and Hahn buildings have yet to be designed; however,

the façade of the newer portion of the buildings will be conditioned to be architecturally complementary with the existing buildings.

New Development:

- Construction of two buildings (West Annex A and West Annex B). West Annex A would be three stories tall, 60 feet in height, and 136,000 square feet in size. West Annex B would be two stories tall, 42 feet in height, and 64,000 square feet in size, as shown in Figure 3, letter A below.
- Construction of an 8,500 square foot addition to the southeastern portion of the La Viña Building, consisting of a lobby, elevators and stairwells, as shown in Figure 3, letter B below.
- Construction of a 4,800 square foot addition to the southeastern portion of the Wingate building, consisting of an entry lobby, as shown in Figure 3, letter C below.

Figure 3: Location of New Development



Operational:

- Add 17 hospital beds, with total bed count limited to 642 beds maximum at full build-out.

Utility Infrastructure Improvements:

- Re-route mechanical, electrical, plumbing, and data utility infrastructure from the Central Utility Plant to service the existing West Tower, proposed West Tower Annex A and B, and proposed La Viña Building expansion.
- Provide new utility services to existing buildings to be retained in compliance with current State seismic and City requirements.
- Upgrade non-structural performance category utility and infrastructure for the existing La Viña Building, East Tower and existing East Tower Annex, including fiber optic networks, data center, and improved mechanical and plumbing systems.
- Provide new emergency and power upgrades for East Tower, East Tower Annex, and La Viña Building.
- Complete relocation or construction of remaining utility infrastructure to serve relocated facilities.

Landscaping and Hardscape:

- Landscaping, including removal of six protected trees and creation of a Central Garden and pedestrian linkages.
- Lighting and Signage

Other:

- Modify the boundary of Master Plan to include 620-624 S. Pasadena Ave and exclude 800 S. Fairmount Ave (Huntington Medical Plaza) and 797 S. Fair Oaks Ave (Huntington Outpatient Surgery Center and Garage). (Attachment F).
- Zoning Map Amendment to change the zoning of 620-624 S. Pasadena Avenue from CO (Commercial Office) to PS (Public, Semi-Public). (Attachment A).

ANALYSIS:

General Plan Consistency

The project site has a General Plan designation of Institutional. This category is used to characterize facilities owned and operated by the City or by other public and/or private institutions such as corporate yards, schools, libraries, and hospitals. The Land Use Element of the General Plan reaffirms the City's commitment to provide services to the residents of Pasadena, including Goal 16 *Superior Services – A superior level of services meeting the needs of Pasadena's diverse residents including schools, hospitals, parks, child and senior facilities and programs, libraries, shelters, public auditoriums, health facilities, social clubs and recreation centers.* In addition, General Plan Policy No. 2.9 *Institutional Uses* calls on the City to, "... [a]ccommodate the

development of educational, religious, cultural, and similar facilities that enrich the lives of Pasadena's residents." Furthermore, Policy No. 16.2 *Service Adequacy* states, "...periodically review the impacts of major physical, environmental, economic and social changes identifying their implications in meeting the service needs of Pasadena's residents." The Hospital's continued use of the project site as a hospital and the proposed improvements to comply with State law are consistent with the Land Use Element of the General Plan, as discussed above and further in the Findings (Attachment A).

Zoning Code Consistency

As noted earlier, the zoning designation for the majority of the project site is PS (Public, Semi-Public), with the exception of one parcel located at 620-624 South Pasadena Avenue, which is zoned CO (Commercial Office). Two construction management buildings owned by the Hospital currently occupy the site. During Phase 5, the construction management buildings would be demolished to make room for the proposed West Annex A and West Annex B buildings. The proposed project includes a Zoning Map Amendment to change the zoning of the subject parcel from CO to PS, in order to be consistent with the remainder of the site.

The PS zoning district is intended for large public or semi-public land uses (e.g. schools, libraries, and religious facilities) that may not be appropriate in other zoning districts. The PS zone is applied to sites with a contiguous area of two acres or more, including alleys, streets, or other rights-of-way; the project site is approximately 29 acres. All existing and proposed uses within the project site are conditionally permitted in the PS zone. The proposed Master Plan would allow Huntington Memorial Hospital to remain on the project site; therefore, the proposed use is consistent with the intent of the PS zoning district.

Development Standards

For properties in the PS zoning district, development standards are established through a Conditional Use Permit or Master Plan. The previously approved Master Plan and subsequent amendments established a series of development standards for the site. The existing and proposed development standards are shown on the following table:

Table 1: Huntington Hospital Development Standards		
Development Standards	Existing (Established by previous Master Plan and Amendments)	Proposed
Gross Floor Area	1,216,000 sq. ft. (MPA 2008)	1,449,549 sq. ft.
Setbacks		
From California Blvd.	55 feet (MP 1987)	10 feet
From Pasadena Ave.	5 feet on the ground floor 25 feet for second and upper floors with up to 10 feet encroachment for 50 percent of building elevation at the sole discretion of the Design Commission	No change proposed
Height		
East Tower	97 feet, 6 inches (MPA 1994 allowed for up to 116 feet)	No change proposed
East Tower Annex	32 feet (MPA 2005)	No change proposed
Emergency Department Addition	70 feet (MPA 2008)	No change proposed
West Tower	97 feet, 6 inches	No change proposed
West Tower Annex A	-	60 feet
West Tower Annex B	-	42 feet
Parking Spaces	2,433 (1,818 required)	2,757 (1,926 required)

Parking and Circulation

Vehicle access to the Hospital campus would remain unchanged from existing conditions. Ingress and egress are currently provided from California Boulevard to the north on Drexel Place (the main driveway entrance), Bellefontaine Street to the south, Fairmount Avenue to the east, and Pasadena Avenue to the west. Parking for the proposed West Annex A and West Annex B buildings would be located in two levels of subterranean parking beneath West Annex B, accessed via Drexel Place from California Boulevard, and would share the existing ingress/egress for the partially subterranean parking structure beneath the East Tower Annex. The Recommended Project would add 350 parking spaces to the existing 2,433 parking spaces available on the Hospital campus and remove 26 temporary parking spaces, resulting in a total of 2,757 parking spaces. The Zoning Code requires three parking spaces per licensed bed, therefore, the Recommended Project (642 total beds) would require 1,926 parking spaces. The Recommended Project would comply with the minimum amount of parking required.

The intersection of Drexel Place and California Boulevard was noted as being of a concern of the Design Commission. This intersection is signalized with protected left-turn phasing in the east-west direction and permitted left-turn phasing in the northbound direction. While the ingress/egress driveway for the Orangewood Shopping Center north of the Hospital is slightly offset from Drexel Place, both driveways are controlled by the

same traffic signal, which serves to synchronize vehicle turning movements into and out of both locations as well as pedestrian movements across California Boulevard, and therefore, no conflicts would occur if motorists are observing traffic regulations. As this is an existing condition and the proposed project does not include realignment of the Hospital's Drexel Place driveway, no new impacts were found and therefore no changes to the circulation plan are required.

Lighting and Signage

The Hospital would install exterior lighting including pedestrian safety lighting, landscaping lighting, and new streetlights. Additional pedestrian lighting would be installed along or near the Fair Oaks Avenue frontage. All proposed outdoor lighting would be shielded and directed away from adjoining properties. A conceptual Master Sign Plan is shown within the project plans included as Attachment E.

Landscaping

New landscaped areas and pedestrian corridors would be created as part of the project; the most substantial landscaped area would be a central garden located in the middle of the Hospital Campus. The central garden is designed as a pedestrian-oriented outdoor courtyard that would serve as a gathering space and rest area for visitors, patients, and employees. There would be numerous terraces and gathering areas, a rose garden, children's garden, fountain/water feature, and extensive pedestrian walkways. Landscaping of the garden would include a mix of trees, shrubs, and ground cover, selected to provide varied textures and colors along with utilizing drought tolerant species. A conceptual landscaping plan is included as part of Attachment E.

The project proposes to remove 66 trees, six of which are protected trees (one native tree and five specimen trees). The native tree would be replaced with eight 15-gallon, four 24-inch, or two 36-inch box trees, and the five specimen trees would be replaced with 36 24-inch or 18 36-inch box trees. Due to the lapse in time since the tree inventory has been completed, a condition of approval would be included requiring an updated tree inventory to be submitted with the Design Review application for the proposed West Annex A and West Annex B buildings and La Viña addition. At that time, if additional trees meet the size requirement to be protected pursuant to Pasadena Municipal Code Chapter 8.52, the applicant will be required to submit an application for Private Tree Removal indicating which of the Tree Protection Ordinance findings apply to the removal(s), including the possibility of requiring a conceptual landscaping plan indicating the location of required replacement trees.

ENVIRONMENTAL ANALYSIS:

Pursuant to Section 15125 of the CEQA Guidelines, the Draft EIR evaluates the project in the context of the conditions that exist at the time the Notice of Preparation was circulated in August 19, 2011. In accordance with CEQA, the analysis in the Draft EIR is focused on issues determined in the Initial Study to be potentially significant, whereas issues found in the Initial Study to have less than significant impacts or no impacts do

not require further evaluation. Impacts associated with the proposed project that were determined in the Initial Study not to be significant include: Agricultural Resources, Biological Resources, Cultural Resources, Energy, Geology and Soils, Hazards and Hazardous Materials, Hydrology and Water Quality, Land Use and Planning, Mineral Resources, Population/Housing, Public Services, Recreation, and Utilities (Wastewater, Solid Waste, Gas, and Electricity). The remaining environmental issues analyzed in the Draft EIR are: Aesthetics, Air Quality, Greenhouse Gas Emissions, Noise, and Traffic and Circulation.

Two public scoping meetings were held, the first on September 1, 2011 and a second on September 14, 2011. A Notice of Availability advertising availability of the Draft EIR was published on January 5, 2016, and circulated for a 45-day period ending on February 19, 2016. The Draft EIR was previously provided to the Planning Commission for their review. All comments received from the public and the Commission related to the Draft EIR were documented with responses and presented in the original Final EIR, which was released in November 2016. Due to the refinements in the proposed project, a Revised Final EIR has been prepared to include analysis of the Recommended Project and was released on February 14, 2018. The Revised Final EIR is included as Attachment C.

Revised Final EIR:

Subsequent to the Planning Commission hearing in December 2016, the applicant submitted revised plans that included two new buildings (West Annex A and West Annex B) in lieu of the originally proposed West Tower Annex building, with the remainder of the project unchanged. This necessitated a review and refinement of the findings and alternatives in the Final EIR, which are presented as part of Chapter 3 – Clarifications, Revisions, and Corrections in the Revised Final EIR (Attachment C).

The Revised Final EIR was prepared because a Final EIR had already been released in December 2016 and due to the refinement of Alternative 2 – Reduced Patient Beds to include the revised plans. The Final EIR includes Clarifications, Revisions, and Corrections made to the information and analysis provided in the Draft EIR, chiefly related to the analysis of Refined Alternative 2 – Reduced Patient Beds. The revised sections of the Draft EIR are summarized below:

Project Description:

The project description was revised with respect to the renovation, relocation, and expansion of the La Viña Building, reflecting a change from a 13,200 square foot expansion to the revised 8,500 square foot expansion. Additionally, Figure 2-6, which depicted a 4,800 square foot addition to the Wingate Building, was revised to clarify the location and footprint of the addition.

Air Quality:

The first paragraph of the Introduction section was revised to reflect an updated

timeframe for completion of the project phases, clarifying that projects would take place over the next 15 years, with 2032 remaining as the completion date. Additionally, Table 4.B-5 was revised with updated Phase IV and VII regional emission information. Language related to Toxic Air Contaminants and Construction was also updated.

Greenhouse Gases:

This section was amended to account for the updated timeframe for completion of the project phases, clarifying that projects would take place over the next 15 years, with 2032 remaining as the completion date. Additionally, Tables 4.C-4 and 4.C-5 were revised with respect to greenhouse gas emissions levels.

Traffic:

The Traffic Impact Study and Project Characteristics sections were revised to reflect an updated timeframe for completion of the project phases, noting that the time to complete projects is 15 years, ending in 2032.

Alternatives:

This section was updated with new text related to Refined Alternative 2 – Reduced Patient Beds, accounting for additional analysis that was required to study the proposed West Annex A and West Annex B buildings.

Environmentally Superior Alternative:

CEQA requires that an EIR describe a range of reasonable alternatives to a proposed project that could feasibly avoid or lessen any significant environmental impacts, while attaining the basic objectives of the project but will avoid or substantially lessen any of the significant effects of the project. The significant impacts identified in the Draft EIR are related to traffic. For this reason, staff and the Planning Commission recommend that the City Council adopt the findings to approve the Recommended Project, Refined Alternative 2 - Reduced Patient Beds. The Hospital is in agreement with the staff and Planning Commission recommendation.

COUNCIL POLICY CONSIDERATION:

The proposed recommendation furthers the goals and policies of the General Plan related to health facilities and compatibility with surrounding neighborhoods, specifically:

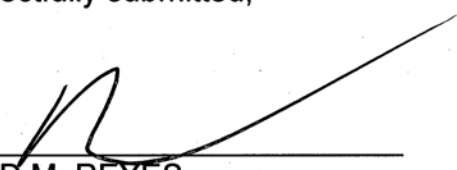
- Goal 16 Superior Services. A superior level of services meeting the needs of Pasadena's diverse residents including schools, hospitals, parks, child and senior facilities and programs, libraries, shelters, public auditoriums, health facilities, social clubs and recreation centers.

- Policy 2.9 Institutional Uses. Accommodate the development of educational, religious, cultural, and similar facilities that enrich the lives of Pasadena's residents.
- Policy 2.11 Health Facilities. Accommodate a wide range of healthcare and mental health facilities that are transit-accessible and pedestrian-friendly.
- Policy 4.11 Development that is Compatible. Require that development demonstrates a contextual relationship with neighboring structures and sites addressing such elements as building scale, massing, orientation, setbacks, buffering, the arrangement of shared and private open spaces, visibility, privacy, automobile and truck access, impacts of noise and lighting, landscape quality, infrastructure, and aesthetics.
- Policy 4.12 Transitions in Scale. Require that the scale and massing of new development in higher-density centers and corridors provide appropriate transitions in building height and bulk and are sensitive to the physical and visual character of adjoining lower-density neighborhoods.
- Policy 16.2 Service Adequacy. Periodically review the impacts of major physical, environmental, economic and social changes identifying their implications in meeting the service needs of Pasadena's residents.
- Policy 37.2 Medical Supporting Uses. Capitalize on the Huntington Memorial Hospital through opportunities for new and expanded medical facilities, medically oriented businesses and increased housing so that hospital employees are able to live close to jobs.

FISCAL IMPACT:

Consistent with the adopted Fee Schedule, fees will be charged for review of applications and for processing, permitting, inspections, and monitoring.

Respectfully submitted,



DAVID M. REYES
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Prepared by:

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DS



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Approved by:



STEVE MERMELL
City Manager

Attachments: (7)

- Attachment A: Findings – Master Plan Amendment, Zoning Map Amendment, Private Tree Removal
- Attachment B: Conditions of Approval
- Attachment C: Revised Final Environmental Impact Report
- Attachment D: Mitigation Monitoring and Reporting Program
- Attachment E: Project Plans
- Attachment F: Proposed Zone Change: 620 and 624 S. Pasadena Avenue
- Attachment G: Project Phasing