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SANTA BARBARA • SANTA CRUZ

OFFICE OF THE PRESIDENT

1111 Franklin Street Oakland, CA 94607-5200 Phone: (510) 987-9074 Fax: (510) 987-9086 http://www.ucop.edu

June 19, 2003

CHAIRMAN OF THE BOARD CHAIRMAN OF THE COMMITTEE ON GROUNDS AND BUILDINGS CHAIRMAN OF THE COMMITTEE ON FINANCE PRESIDENT OF THE UNIVERSITY

ACTION BY CONCURRENCE--AMENDMENT OF THE BUDGET FOR CAPITAL IMPROVEMENTS AND THE CAPITAL IMPROVEMENT PROGRAM FOR UCSF MEDICAL CENTER M, L-OPERATING ROOM EXPANSION, SAN FRANCISCO CAMPUS

It is recommended that:

#### Pursuant to Standing Order 100.4(q)

(1) The President amend the 2002-03 Budget for Capital Improvements and the Capital Improvement Program to include the following project:

San

UCSF Medical Center M, L-Operating Room Expansion -

Francisco:

preliminary plans, working drawings, construction, and

equipment - \$18,506,000 to be funded from Hospital Reserves

(2) The Officers of the Regents be authorized to execute all documents necessary in connection with the above.

A Key to abbreviations and the project description are attached.

# <u>KEY</u>

# Capital Improvement Program Abbreviations

S	Studies
P	Preliminary Plans
W	Working Drawings
C	Construction
E	Equipment
-	State Funds (no abbreviation)
F	Federal Funds
G	Gifts
HR	Hospital Reserve Funds
I	California Institutes for Science and Innovation
LB	Bank Loans or Bonds (External Financing includes Garamendi, Bonds, Stand- By, Interim and Bank Loans)
LR	Regents' Loans (Internal Loans)
N	Reserves other than University Registration Fee (Housing and Parking Reserves)
R	University Registration Fee Reserves
U	Regents' Appropriations (President's Funds, Educational Fund)
X	Campus Funds
CC	CI California Construction Cost Index
EP	Equipment Price Index

#### Budget for Capital Improvements and Capital Improvement Program Scheduled for

Regent's Allocations, Loans, Income Reserves, University Registration Fee Reserves, Gift Funds, and Miscellaneous Funds

Campus and Project Title ( <u>Total Cost</u> )	Proposed 2002-03			
San Francisco				
UCSF Medical Center	P	\$740,000	HR	
M, L-Operating Room Expansion	W	\$1,227,000	HR	
, .	C	\$12,439,000	HR	
	E	\$4,100,000	HR	
(\$18.506.000)		_		

## **DESCRIPTION**

The proposed project involves the expansion of the 4<sup>th</sup> floor Moffitt and Long Hospital surgery suite by a net addition of four new operating rooms (ORs) for a total of 26 operating rooms at the completion of the project. This operating room expansion would increase the number of ORs, by four, and recovery bed stations, by five, for the anticipated increase in demand for Medical Center surgical services at Parnassus. This expansion would relocate and expand the operating and pre-op/post op facilities and would augment support facilities essential to the functioning of a highly complex surgery unit.

#### Background

The surgery department cannot accommodate the current and future surgical service requests, which could adversely impact the total patient census and revenue flows from the surgery practice at the Medical Center. This project would improve the surgical services provided at the UCSF Medical Center by providing the surgical staff with the most current equipment and technology, which should result in a significant increase in revenue flows from the surgical program. The increased revenue is essential for the Medical Center to be able to afford the long-term plan for the replacement of the hospitals at Parnassus.

The increasing demand for surgical services has put an extraordinary burden on an already over-utilized Parnassus surgery suite. Currently, the surgery area comprises three separate suites, all located on the 4<sup>th</sup> floor of Moffitt/Long Hospital; (1) the Moffitt suite is basically unchanged from the original 1954 construction and includes eight operating rooms plus ancillary staff support and limited storage space; (2) the Long surgery suite, constructed during the Moffitt Retrofit project of 1979, includes 12 operating rooms, the existing pre-op/post-op patient recovery area (28 patient bed stations) and one isolation room for a total of 29 bed stations, sterilization cleaning functions, and staff/storage support areas; and (3) the third suite is located on Moffitt 4<sup>th</sup> floor east wing and is designated for two pediatric operating procedures.

As discussed at the May 2003 meeting of the Committee on Health Services, UCSF plans to begin the process of increasing OR capacity by transferring cancer surgery to Mt. Zion. Though this will help to relieve some of the capacity constraints and allows for some flexibility during the construction phase, major reconfiguration at the Parnassus site will still be required to resolve significant functional problems. These problems include but are not limited to the following:

Without more space, the surgery department cannot accommodate the current and future surgical service requests, which may adversely impact the total patient census and revenue flows from the surgery practice at the Medical Center. This remodel would reconfigure existing space to increase the number of operating rooms by four, relocate and expand the pre-op/post-op areas, which would improve patient confidentiality and comfort, and help optimize staff efficiencies and reduce overall congestion.

#### **Project Description**

Given the limited square footage and complexity of this project, the construction must be phased in sequence to allow the build-out of areas released by the relocation of various functions. Phasing of the work would extend the construction timeline an additional twelve months.

#### PHASE ONE:

#### Relocation of the North Wing

During conceptual planning of the project, it was noted by physicians and staff that PACU (Post Anesthesia Care Unit) should be located in an area that provides natural light near the bedside. This feature has been determined to promote healing and provides the patient with a sense of consciousness in the recovery process. The north wing of Moffitt Hospital, currently occupied by the Department of Urology, was identified as an ideal space for the PACU with natural light exposure from the north, east, and west. The majority of Urology's function in the north wing is outpatient, which had been previously planned for consolidated into Ambulatory Care Center at 400 Parnassus Avenue. Other areas of the north wing are currently occupied by support functions for Urology.

#### PHASE TWO:

#### Pre-op/Post-op Ward (North Wing)

This project would remodel 14,532 asf of Medical Center space, including existing surgery areas in Long Hospital, as well as newly assigned areas encompassing the entire North and West wings of Moffitt Hospital. The project would relocate the existing 29-bed station pre-op/post-op ward in Long Hospital to a new 34-bed ward on the North and partial West wings of Moffitt Hospital. The space released by the pre-op/post-op ward in Long Hospital would be developed into 5 new operating rooms with adjacent support areas, additional storage space, and a surgery conference room.

#### PHASE THREE:

#### Operating Rooms (South Wing)

This phase includes the demolition of the old Pre-op/Post-op ward and renovation into 5 new operating rooms. A companion project approved in September 2002 will convert an existing operating room to another use (see Other Related Projects section), for a net addition of 4

operating rooms, for a total of 26 ORs. One of the new operating rooms is specifically designed for cardiac surgery.

The 5 new operating rooms would incorporate the latest technological advances in equipment, including:

- Robotics and advanced micro-surgical procedures
- Telemetry capabilities for voice-activated control of equipment (surgical lights, booms, tables).
- Audio/Visual Technology to broadcast surgical procedures to numerous sites simultaneously for teaching and training.
- In-Room Documentation Centers for paperless charting and billing controls.
- Environmental controls for infection control, patient and staff comfort (Hepa-filtration, laminar flow of air distribution, climatic controls for specific cases, sound and vibration reduction).

#### PHASE FOUR:

Relocation of the Cysto/Litho Operating Room (cost not included in this project)

The project, MC M-4 Operating Room 20 Cysto/Litho Renovation, was approved by the Chancellor in September 2002 for a total project cost of \$1,000,000. This project relocates the existing Cysto/Litho Room from the North wing of Moffitt Hospital to operating room 20 in the designated operating room suite area in the South wing of Moffitt Hospital. An existing operating room would be expanded into a new procedure room to house new Lithotripter equipment, used to break up bladder stones, and to provide other in-patient urological surgical support services.

# Relocation of Vascular Surgery Faculty to Ambulatory Care Facility

Vascular Surgery is being displaced from the west wing of the fourth floor of Moffitt Hospital to the fifth floor of the Ambulatory Care Building (ACC). The Vascular Surgery relocation was combined with the needs of the Clinical Diabetes Center in a project for the complete renovation of 7,078 asf of space in the northwest corner of the fifth floor of the ACC Building. The Chancellor approved this project, entitled the MC A-5 Clinical Diabetes Center & Vascular Surgery Office Remodel, in November 2002 for a total project cost of \$3,200,000.

#### PHASE FIVE:

Staff Support Area and Relocation of Clinical Engineering (West Wing)

The West wing of Moffitt Hospital would be developed into staff support areas, including the relocation of the Clinical Engineering Department from Long Hospital, physician sleep rooms, a staff lounge for surgery personnel, and additional storage. The Clinical Engineering Department currently occupies space planned for the new surgical support storage area and the surgery conference room in Long Hospital.

In addition, the five phases of this project would include numerous infrastructure upgrades, such as:

- Extensive demolition of existing spaces.
- Asbestos and lead abatement.
- Fire alarm reconfigurations and upgrades.
- Fire protection reconfigurations and upgrades.
- Various improvements to provide for ADA compliance.
- Substantial reconfiguration of interior partitions.
- New casework throughout.
- New floor, wall and ceiling finishes throughout.
- Upgrades of information systems and related infrastructure,
- Extensive electrical systems upgrades, including electrical services to the project area
- Extensive mechanical and plumbing systems upgrades.
- Relocation of existing in-patient cystology and urology equipment.
- Relocation of existing occupants of the West wing of Moffitt Hospital.
- Incorporation of state-of-the art medical equipment for the operating rooms.
- Implementation of electronic documentation of patient information.

The project is proposed in multiple phases in order to keep the existing operating rooms functioning, with a corresponding increase in cost and duration of the project. Construction is scheduled to begin in June 2003 and to be completed in February 2005, with equipment installation and occupancy by May 2005. This project would help the UCSF Medical Center maintain and improve its competitive position in the market.

#### CEOA Classification

This project is classified Categorically Exempt under provisions of the California Environmental Quality Act and is consistent with the campus Long Range Development Plan. The 1996 LRDP anticipated increases in population at Parnassus Heights resulting from increased patient and visitor activity at the Medical Center. This project is well within LRDP projections as analyzed in the LRDP Final EIR.

#### Financial Feasibility

The total cost of the project is \$18,506,000 and will be financed by Hospital Reserves.

Approved by:

Richard C. Atkinson President of the University

Judith L. Hopkinson

Chairman of the Committee on Finance

George M. Marcus Chairman of the Committee on Grounds and

Buildings

John Moores

Chairman of the Board

Attachment

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John Moores

Chairman of the Board

Attachment

UCSF Medical Center CCCI 4098

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Richard C. Atkinson President of the University

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Chairman of the Committee on Finance

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Buildings

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Attachment

# PROJECT STATISTICS UCSF MEDICAL CENTER M, L-4 OPERATING ROOM EXPANSION CAPITAL IMPROVEMENT BUDGET SAN FRANCISCO CAMPUS CCCI 4098

Cost Category	<b>Amount</b>	% of Total	
Site Clearance	\$ 0	0.0%	
Building	11,424,000	79.3%	
Exterior Utilities	0	0.0%	
Site Development	0	0.0%	
A/E Fees	1,671,000	11.6%	
Campus Administration	403,000	2.8%	
Surveys, Tests	100,000	0.7%	
Special Items (a)	245,000	1.7%	
Contingency	563,000	3.9%	
Total	\$14,406,000	100%	
Group 2 & 3 Equipment	4,100,000		
Total Project	\$18,506,000		
Statistics			
Gross Square Feet (gsf) (b)	23,322		
Assignable Square Feet (asf) (b)	14,532		
Ratio asf/gsf (%)	62%		
Building Cost/gsf (b)	\$490	•	
Building Cost/asf (b)	\$786	·	

# Comparable University Projects at CCCI 4098

Date of Latest Approval* Campus Project	Ratio gsf/asf	Building ost/GSF
2/22/91 Los Angeles UCLA Medical Center Main Operating Room Suite Expansion "A' 3/14/01 San Francisco UCSF Medical Center Emergency Dept. Expansion	' 63% 89%	\$561 \$577
*Date of latest approved CIB		

<sup>(</sup>a) Special Items OSHPD plan check and certification, OSHPD radiological equipment fee, hazardous materials survey and testing (EH&S), equipment planning fee and purchasing/relocation of \$245,000.

<sup>(</sup>b) Gross square feet (gsf) is the total area, including all usable areas, stairways, and space occupied by the structure itself. Assignable square feet (asf) is the net program area.